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| **Personalized Recovery Oriented Services (PROS)** |
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|  | **GROUP: Anxiety Management** |  |
| Description: | A weekly group designed to implement the use of coping skills to decrease and manage anxiety like symptoms.  |
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| Goal/Expected Outcome: | Members will use skills and techniques necessary to identify and manage their symptoms of anxiety. Members will also become aware of external and internal factors that cause anxiety. Members will report managing anxiety increases overall wellness and ability to move forward toward their life role goal. |
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| Objectives: | 1. Member will identify barriers to their life role goals caused by anxiety.2. Member will learn to use self-care skills, mindfulness techniques and CBT skills to reduce or manage symptoms of anxiety. |
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| Methods:  | * Facilitator will use Youtube videos, Cognitive Behavior Therapy techniques, and Group exercises to teach disability education, self-care skills, mindfulness skills and CBT tools to reduce or manage anxiety.

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| Duration: | 45 minutes  |
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| Service Category: | Wellness Self-Management |

Burns, David D *The Feeling Good Handbook*. New York: Plume, 1999. Print |
| Anxiety Man: Week 1**Introduce**: Objective of this group and the methods used to achieve objective. **Objective**: Set the stage for this group with goals of the group and methods for learning coping skills to manage anxiety, group expectations and overall outcome of improved mental health**Present**: 1. Present from Face Sheet (attached) highlighting, Self-care, mindfulness and CBT skills.
2. Anxiety Questionaire (See Attached)
3. Show Youtube video: https://www.youtube.com/watch?v=-FyVetL1MEw

Be The Warrior Not The Worrier - Fighting Anxiety & Fear | Angela Ceberano | TEDxBedminster**Explore**: 1. Continue group discussion about what members hope to get from group.
2. Have members complete questionnaire
3. What Fear Projects have they already engaged in? Look for ways members have already been successful managing anxiety and help them identify their strengths and barriers in a group discussion

**Summarize**: review group outcomes and ask members to bring in examples of anxiety episodes from their upcoming week**ANXIETY QUESTIONNAIRE FOR ADULTS (SAQ-A30)****Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_start/ end**Below are a series of social situations that may or may not cause you UNEASE, STRESS or NERVOUSNESS. Check off the box that represents your anxiety level in the identified situation. IF it doesn’t apply respond by imagining the situation.**Not at all or very slight =1- Slight= 2- Moderate=3- High=4- Very high or extremely high=5** 1 2 3 4 5

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| 1. Greeting someone and being ignored  |  |  |  |  |  |
| 2. Having to ask a neighbor to stop making noise  |  |  |  |  |  |
| 3. Speaking in public  |  |  |  |  |  |
| 4. Asking someone attractive for a date  |  |  |  |  |  |
| 5. Complaining to the waiter about my food  |  |  |  |  |  |
| 6. Feeling watched by people  |  |  |  |  |  |
| 7. Participating in a meeting with people in authority  |  |  |  |  |  |
| 8. Talking to someone who isn’t paying attention to what I am saying  |  |  |  |  |  |
| 9. Refusing when asked to do something I don’t like doing  |  |  |  |  |  |
| 10. Making new friends  |  |  |  |  |  |
| 11. Telling someone that they have hurt my feelings  |  |  |  |  |  |
| 12. Having to speak in class, at work, or in a meeting  |  |  |  |  |  |
| 13. Maintaining a conversation with someone I’ve just met  |  |  |  |  |  |
| 14. Expressing my annoyance to someone that is picking on me  |  |  |  |  |  |
| 15. Greeting each person at a social meeting when I don’t know most of them  |  |  |  |  |  |
| 16. Being teased in public  |  |  |  |  |  |
| 17. Talking to people I don’t know at a party or a meeting  |  |  |  |  |  |
| 18. Being asked a question in class by the teacher or by a superior in a meeting  |  |  |  |  |  |
| 19. Looking into the eyes of someone I have just met while we are talking  |  |  |  |  |  |
| 20. Being asked out by a person I am attracted to  |  |  |  |  |  |
| 21. Making a mistake in front of other people  |  |  |  |  |  |
| 22. Attending a social event where I know only one person  |  |  |  |  |  |
| 23. Starting a conversation with someone you’re attracted to  |  |  |  |  |  |
| 24. Being reprimanded about something I have done wrong  |  |  |  |  |  |
| 25. While having dinner with a group and being asked to speak for everyone  |  |  |  |  |  |
| 26. Telling someone that their behavior bothers me and asking them to stop  |  |  |  |  |  |
| 27. Asking someone I find attractive to dance  |  |  |  |  |  |
| 28. Being criticized  |  |  |  |  |  |
| 29. Talking to a superior or a person in authority  |  |  |  |  |  |
| 30. Telling someone I am attracted to that I would like to get to know them better  |  |  |  |  |  |

(Caballo, Salazar, Irurtia, Arias, and CISO-A Research Team, 2010) |
| Anxiety Man week 2:Review: Strengths and barriers to managing their anxiety this past week.Objective: Disability Education; Definition of Anxiety, 3 main diagnosis for anxiety  (GAD, Panic Disorder and Social Anxiety).Present: Use attached information and whiteboard to teach members Definition of Anxiety, identifying  symptoms and risks.Explore: Have members share experiences with Anxiety and lead group to focus on management  of their symptoms.Summarize: Definition and 3 areas of Anxiety explored and ask members to bring more examples of ways they  currently are successful. |
| Anxiety Man Week 2**Teaching Points for Disability Education****Definition**Occasional anxiety is a normal part of life. You might feel anxious when faced with a problem at work, before taking a test, or making an important decision. But anxiety disorders involve more than temporary worry or fear. For a person with an anxiety disorder, the anxiety does not go away and can get worse over time. The feelings can interfere with daily activities such as job performance, school work, and relationships. There are several different types of anxiety disorders. Examples include generalized anxiety disorder, panic disorder, and social anxiety disorder.**Signs and Symptoms****Generalized Anxiety Disorder**People with generalized anxiety disorder display excessive anxiety or worry for months and face several anxiety-related symptoms.Generalized anxiety disorder symptoms include:Restlessness or feeling wound-up or on edgeBeing easily fatiguedDifficulty concentrating or having their minds go blankIrritabilityMuscle tensionDifficulty controlling the worrySleep problems (difficulty falling or staying asleep or restless, unsatisfying sleep)**Panic Disorder**People with panic disorder have recurrent unexpected panic attacks, which are sudden periods of intense fear that may include palpitations, pounding heart, or accelerated heart rate; sweating; trembling or shaking; sensations of shortness of breath, smothering, or choking; and feeling of impending doom.Panic disorder symptoms include:Sudden and repeated attacks of intense fearFeelings of being out of control during a panic attackIntense worries about when the next attack will happenFear or avoidance of places where panic attacks have occurred in the past**Social Anxiety Disorder**People with social anxiety disorder (sometimes called “social phobia”) have a marked fear of social or performance situations in which they expect to feel embarrassed, judged, rejected, or fearful of offending others.Social anxiety disorder symptoms include:Feeling highly anxious about being with other people and having a hard time talking to themFeeling very self-conscious in front of other people and worried about feeling humiliated, embarrassed, or rejected, or fearful of offending othersBeing very afraid that other people will judge themWorrying for days or weeks before an event where other people will beStaying away from places where there are other peopleHaving a hard time making friends and keeping friendsBlushing, sweating, or trembling around other peopleFeeling nauseous or sick to your stomach when other people are aroundEvaluation for an anxiety disorder often begins with a visit to a primary care provider. Some physical health conditions, such as an overactive thyroid or low blood sugar, as well as taking certain medications, can imitate or worsen an anxiety disorder. A thorough mental health evaluation is also helpful, because anxiety disorders often co-exist with other related conditions, such as depression or obsessive-compulsive disorder.Anxiety Man week 3:Review: Definition of Anxiety and Strengths managing their anxiety this past week.Objective: Learn Disability Education; Risk Factors, Treatments, Self Help Groups, Stress Management, MedicationsPresent: Use attached information and whiteboard to teach members  Risk Factors, Treatments, Self Help Groups, Stress Management, Medications to manage anxiety.Explore: Use whiteboard to personalize information and discuss with groups in terms of barriers and strengths to managing anxiety Summarize: Ask members which one of the five areas of skills use they will address this week to manage try to manage their anxiety and ask them to share their work next week. **Anxiety Man week 3****Teaching Points for Disability Education****Risk Factors**Researchers are finding that genetic and environmental factors, frequently in interaction with one another, are risk factors for anxiety disorders. Specific factors include:Shyness, or behavioral inhibition, in childhoodBeing femaleHaving few economic resourcesBeing divorced or widowedExposure to stressful life events in childhood and adulthoodAnxiety disorders in close biological relativesParental history of mental disordersElevated afternoon cortisol levels in the saliva (specifically for social anxiety disorder)**Treatments and Therapies**Anxiety disorders are generally treated with psychotherapy, medication, or both.**Psychotherapy**Psychotherapy or “talk therapy” can help people with anxiety disorders. To be effective, psychotherapy must be directed at the person’s specific anxieties and tailored to his or her needs. A typical “side effect” of psychotherapy is temporary discomfort involved with thinking about confronting feared situations.**Cognitive Behavioral Therapy (CBT)**CBT is a type of psychotherapy that can help people with anxiety disorders. It teaches a person different ways of thinking, behaving, and reacting to anxiety-producing and fearful situations. CBT can also help people learn and practice social skills, which is vital for treating social anxiety disorder.Two specific stand-alone components of CBT used to treat social anxiety disorder are cognitive therapy and exposure therapy. Cognitive therapy focuses on identifying, challenging, and then neutralizing unhelpful thoughts underlying anxiety disorders.Exposure therapy focuses on confronting the fears underlying an anxiety disorder in order to help people engage in activities they have been avoiding. Exposure therapy is used along with relaxation exercises and/or imagery. One study, called a meta-analysis because it pulls together all of the previous studies and calculates the statistical magnitude of the combined effects, found that cognitive therapy was superior to exposure therapy for treating social anxiety disorder.CBT may be conducted individually or with a group of people who have similar problems. Group therapy is particularly effective for social anxiety disorder. Often “homework” is assigned for participants to complete between sessions.**Self-Help or Support Groups**Some people with anxiety disorders might benefit from joining a self-help or support group and sharing their problems and achievements with others. Internet chat rooms might also be useful, but any advice received over the Internet should be used with caution, as Internet acquaintances have usually never seen each other and false identities are common. Talking with a trusted friend or member of the clergy can also provide support, but it is not necessarily a sufficient alternative to care from an expert clinician.**Stress-Management Techniques**Stress management techniques and meditation can help people with anxiety disorders calm themselves and may enhance the effects of therapy. While there is evidence that aerobic exercise has a calming effect, the quality of the studies is not strong enough to support its use as treatment. Since caffeine, certain illicit drugs, and even some over-the-counter cold medications can aggravate the symptoms of anxiety disorders, avoiding them should be considered. Check with your physician or pharmacist before taking any additional medications.The family can be important in the recovery of a person with an anxiety disorder. Ideally, the family should be supportive but not help perpetuate their loved one’s symptoms.**Medication**Medication does not cure anxiety disorders but often relieves symptoms. Medication can only be prescribed by a medical doctor (such as a psychiatrist or a primary care provider), but a few states allow psychologists to prescribe psychiatric medications.Medications are sometimes used as the initial treatment of an anxiety disorder, or are used only if there is insufficient response to a course of psychotherapy. In research studies, it is common for patients treated with a combination of psychotherapy and medication to have better outcomes than those treated with only one or the other.The most common classes of medications used to combat anxiety disorders are antidepressants, anti-anxiety drugs, and beta-blockers (visit Mental Health Medications). Be aware that some medications are effective only if they are taken regularly and that symptoms may recur if the medication is stopped.**Antidepressants**Antidepressants are used to treat depression, but they also are helpful for treating anxiety disorders. They take several weeks to start working and may cause side effects such as headache, nausea, or difficulty sleeping. The side effects are usually not a problem for most people, especially if the dose starts off low and is increased slowly over time.Please Note: Although antidepressants are safe and effective for many people, they may be risky for children, teens, and young adults. A “black box” warning—the most serious type of warning that a prescription can carry—has been added to the labels of antidepressants. The labels now warn that antidepressants may cause some people to have suicidal thoughts or make suicide attempts.For thisreason, anyone taking an antidepressant should be monitored closely, especially when they first start taking the medication.**Anti-Anxiety Medications**Anti-anxiety medications help reduce the symptoms of anxiety, panic attacks, or extreme fear and worry. The most common anti-anxiety medications are called benzodiazepines. Benzodiazepines are first-line treatments for generalized anxiety disorder. With panic disorder or social phobia (social anxiety disorder), benzodiazepines are usually second-line treatments, behind antidepressants.**Beta-Blockers**Beta-blockers, such as propranolol and atenolol, are also helpful in the treatment of the physical symptoms of anxiety, especially social anxiety. Physicians prescribe them to control rapid heartbeat, shaking, trembling, and blushing in anxious situations.Choosing the right medication, medication dose, and treatment plan should be based on a person’s needs and medical situation, and done under an expert’s care. Only an expert clinician can help you decide whether the medication’s ability to help is worth the risk of a side effect. Your doctor may try several medicines before finding the right one.**You and your doctor should discuss:**How well medications are working or might work to improve your symptomsBenefits and side effects of each medicationRisk for serious side effects based on your medical historyThe likelihood of the medications requiring lifestyle changesCosts of each medicationOther alternative therapies, medications, vitamins, and supplements you are taking and how these may affect your treatmentHow the medication should be stopped. Some drugs can’t be stopped abruptly but must be tapered off slowly under a doctor’s supervision.For more information, please visit Medications Health Topic webpage developed by the National Institute of Mental Health (NIMH). Please note that any information on this website regarding medications is provided for educational purposes only and may be outdated. Information about medications changes frequently. Please visit the U.S. Food and Drug Administration (FDA) website for the latest information on warnings, patient medication guides, or newly approved medications. |
| Anxiety Man week 4**Review**: Disability Education; Risk Factors, Treatments, Self Help Groups, Stress Management, Medications**Objective**: Members will understand and identify how learned helplessness and the 5 stages of change can assist them to move forward with their goals by managing their anxiety.Present: Brief background of Learned Helplessness and Maslow’s Hierarchy of Needs**Present**: Handout learned helplessness exercise. Group A gets handout that can be completed and Group B gets handout that first 2 words are impossible to solve. Ask members to find anagram for first work and raise hand. Act as if it’s OK for some people not to be able to find the anagram and ask group to move to second word. Ask members to raise their hands when they get an anagram for the second word. Begin to discuss how some members are looking frustrated. Ask members to move on to the third word. When most of group raises their hand, stop exercise. Examine how almost ½ the class could not complete the assignment (Cinerama = American) do to learned helpless around first 2 words that could not be put into anagrams. **Explore:**  how this translates to beliefs about being able to manage your own anxiety. Brainstorm ways to overcome Learned Helplessness. Introduce Maslow’s Hierarchy of Needs Sheet as way to address Self Care. Summarize: Ask members to identify one self-care skill the can use this week to overcome learned helplessness and reduce anxiety.Anagram Handout1. Slapstick

2. Whirl3. Cinerama\_\_\_\_\_\_\_\_\_\_\_\_cut\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_cut\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_cut\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Anagram Handout1. Bat2. Lemon3. Cinerama*In learned helplessness studies, an animal is repeatedly exposed to an aversive stimulus which it cannot escape. Eventually, the animal stops trying to avoid the stimulus and behaves as if it is helpless to change the situation. When opportunities to escape become available, learned helplessness means the animal does not take any action.–*[*Wikipedia*](https://en.wikipedia.org/wiki/Learned_helplessness)Related image |



Anxiety Man week 5

**Review**: Learned Helplessness and Self-Care as a skill to manage anxiety. What did members do to manage their anxiety?

**Objective** Members will learn about the 5 stages of change and be able to identify what stage they are in regarding changing the way they use recovery tools to reduce of manage anxiety.

**Present**: Use whiteboard or handout to teach and explore 5 Stages of Change

**Explore:**  Handout attached chart of Stages of Change. Offer an example of a change you have gone through and identify your stages of change. Can members identify your transition from one stage to the next?

Ask a member to identify a change they went through and identify each stage of change.

* What do you want but can’t seem to get because you can’t manage your anxiety?
* How did anxiety impact moving from one stage to the next?
* How did you overcome anxiety to be able to move through to the next stage?
* What needs to happen for you to move from one stage to the next?
* What do you need to be able to use new coping skills for your anxiety so you can make change?

Summarize: Ask members to take one step (in thought, feeling or/action) toward what they want and reducing anxiety.

 **What do you want!!!!!!!**



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Anxiety Man week 6

**Review**: The 5 stages of change and be able to identify what stage they are in regarding changing the way they use recovery tools to reduce of manage anxiety.

**Objective** Members will learn how mindfulness impacts anxiety management and learn 2 mindfulness techniques to reduce and manage anxiety.

**Present**: 1) <https://www.youtube.com/watch?v=4sXBEfIXUno>

**The Long Journey to Becoming '10% Happier**

2) <https://www.youtube.com/watch?v=7X2UJHOJPmQ>

**Grounding Technique using the 5 Senses**

Focus on one of your 5 senses (Sight, touch, hearing, smell, taste).

**Explore** Engage group in mindfulness exercise, you choose**:** Deep breathing exercise, noticing your 5 senses (or just one sense).

**Summarize**: Ask members to practice one mindfulness activity every day this week and discuss in class next week focusing on managing their anxiety.

Anxiety Man 7

**Review**: Disability Education, Self-care and mindfulness exercise. Ask members to discuss managing anxiety this past week and what tools they used.

**Objective**: Members will learn evidenced based practice technique of Cognitive Behavior Therapy (CBT) and be able to identify their thoughts, feeling and behavior about their own anxiety. Members will begin to **identify Automatic Negative Thoughts (ANT)** ….thought distortions

**Present**: Youtube video: <https://www.youtube.com/watch?v=UoFRU9wsqyI>

 **Each week supply members with thought distortions and the CBT tools to fix anxious thoughts**

**Explore**: What Is Cognitive Behavioral Therapy For Anxiety? What is an Automatic Negative Thoughts (ANT)? Develop group definition of Automatic Negative thoughts that you will use throughout the course of the group.

On whiteboard introduce CBT components of Thoughts feelings and behaviors leading to anxiety. You can use example from Davis Burns handout to show thoughts and feelings (The 10 forms of twisted Thinking).

Have member shout out thoughts about anxious situations or their anxiety in general. As a group try to identify thoughts that **MIGHT** be distorted.

**Summarize**: CBT and ask members to bring in an examples of identify an **ANT**

**The Ten Forms of Twisted Thinking**

From "The Feeling Good Handbook" by David D. Burns, M.D. © 1989

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**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.
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**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 window of his car. He told himself, "Just my luck! Birds are always crapping on my car!"
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**3. Mental Filter** - You pick out a single negative detail and dwell on it exclusively, so that your vision 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.
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**4. Discounting the positive** - You reject positive experiences by insisting that 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 positives takes the joy out of life and makes you feel inadequate and unrewarded.
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**5. Jumping to conclusions** - You interpret things negatively when there are no facts to support your conclusion.

*Mind Reading* : Without checking it out, you arbitrarily conclude that someone is reacting negatively to you.

*Fortune-telling* : 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 may tell yourself, "I'll never get better."
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**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."
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**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 that 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."
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**8. "Should" statements** - You tell yourself that things should 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.
"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?"
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 " must erbation." I call it the "shouldy" approach to life.
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**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 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.
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 very little room for constructive communication.

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**10. Personalization and Blame** - Personalization comes 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 difficulty in 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 was better in bed, he wouldn't beat me." Personalization leads to guilt, shame and feelings of inadequacy.
Some people do the opposite. They blame other people or their circumstances for their problems, and they overlook ways 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.

**Ten Ways to Untwist Your Thinking**

From "The Feeling Good Handbook" by David D. Burns, M.D. © 1989
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**1. Identify The Distortion:** 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.
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**2. Examine The Evidence:** 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.
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**3. The Double-Standard Method:** 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.
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**4. The Experimental Technique:** Do an experiment to test the validity of your negative thought. For example, if during an 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.
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**5. Thinking In Shades Of Grey:** Although this method may sound drab, the effects can be illuminating. Instead of thinking about your problems in all-or-nothing extremes, evaluate things on a scale 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.
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**6. The Survey Method:** Ask people questions to find out if your thoughts and attitudes are realistic. For example, if you feel that public speaking anxiety is abnormal and shameful, ask several friends if they ever felt nervous before they gave a talk.
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**7. Define Terms:** 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 realize that there is no such thing as 'a fool' or 'a loser.'
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**8. The Semantic Method:** 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."
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**9. Re-attribution:** 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.
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**10. Cost-Benefit Analysis:** 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."

Anxiety Man 8

Review: Disability Education, Self-care and mindfulness exercise, CBT. Ask members to discuss managing anxiety this past week and what tools they used.

Objective: Members will practice identifying their thoughts, feeling and behavior about their own anxiety. Members will begin to identify Automatic Negative Thoughts (ANT) and learning about all or nothing thinking

Present: Review of Anxious thoughts feelings and behaviors

Explore: Teach using handout what all or nothing thinking is and how to identify negative thoughts.

On whiteboard introduce CBT components of Thoughts feelings and behaviors leading to anxiety. You can use example from Davis Burns handout to show thoughts and feelings (The 10 forms of twisted Thinking) for ALL OR NOTHING THINKING.

Have member give examples of Thoughts, Feelings and Behaviors that are ALL OR NOTHING that trigger Anxiety. When a member shares ask group to identify thought vs feeling vs behavior around ALL OR NOTHING that trigger Anxiety.

Try Example

1. All or nothing -thinking You see things in black and 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!

Thought\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Feeling\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Behavior\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Summarize: CBT and ask members to bring in an examples of identify an ANT and an example of ALL or NOTHING

**The Ten Forms of Twisted Thinking**

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**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 window of his car. He told himself, "Just my luck! Birds are always crapping on my car!"
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**3. Mental Filter** - You pick out a single negative detail and dwell on it exclusively, so that your vision 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.
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**4. Discounting the positive** - You reject positive experiences by insisting that 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 positives takes the joy out of life and makes you feel inadequate and unrewarded.
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**5. Jumping to conclusions** - You interpret things negatively when there are no facts to support your conclusion.

*Mind Reading* : Without checking it out, you arbitrarily conclude that someone is reacting negatively to you.

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**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."
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**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 that 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."
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"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?"
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 " must erbation." I call it the "shouldy" approach to life.
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**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 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.
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 very little room for constructive communication.

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**10. Personalization and Blame** - Personalization comes 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 difficulty in 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 was better in bed, he wouldn't beat me." Personalization leads to guilt, shame and feelings of inadequacy.
Some people do the opposite. They blame other people or their circumstances for their problems, and they overlook ways 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.

Anxiety Man: Week 9

**Review**: What is CBT and what is an **Automatic Negative Thoughts (ANT)** and **all or nothing thinking**? Review recovery work over past week managing anxiety.

**Objective**: Members learn to use **Examine the Evidence** skill to combat **ANT**s feeding anxiety. Members will able to identify **Overgeneralizing ANT** and use one of the skills presented to reduce anxiety**.**

**Present**: Use definition from attached sheet to describe **Overgeneralizing and Examining the Evidence.**

**Explore**: Example: You’re worried and ruminating about getting to your Anxiety Management group and when you go out to catch the bus a bird poops on you! You say, “Birds are ALWAYS crapping on me”, or, “See I never can catch the bus without crap happening to me!”

Use whiteboard to show members examples of Overgeneralizing and examine the evidence to change the thought and reduce anxiety.

 Example: Thought- “I’m always getting crapped on!”

 Feeling- helpless, worried, immobilized

 Behavior- Stop coming to Anxiety Management Class

You are a Detective! Ask yourself “YES OR NO” questions like:

 Do I want to learn to manage my anxiety?

 Will staying away from class help me learn coping strategies to manage my anxiety?

You are Curious! Ask yourself open ended questions:

 **Who** is stopping me from reducing my anxiety about this?

 **What** else do I need to be able to move forward with my plan to go to PROS?

 **Where** can I go for support?

**Why** do I think that if I stop this group will help me?

**When** was the last time I was crapped on?

**How** can I restate my thought to help me learn these coping strategies?

Summarize: Group reviewed, what is CBT? What is a Thought Distortion? Members reported on noticing, **All or Nothing Thinking** this week. Members learned how to examine the evidence. Members learned to identify **Overgeneralizing** Thought Distortion. Ask members to bring in a real life example of Overgeneralizing and an example of using evidence to disprove a thought distortion.

**Summarize**: identifying ANTs and identifying Overgeneralizing while practicing examining the evidence skill.

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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 " must erbation." I call it the "shouldy" approach to life.
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Anxiety Man Week 10:

Review: What is CBT? What is **Examine the Evidence** and how did you use it last week. What is **Thought Distortion**? Members report on noticing, **All or Nothing Thinking and Overgeneralizing** this week. How did you manage your anxiety this week?

Objective: To improve skill use around CBT to manage Anxiety

Learn to identify **Mental Filtering** Thought Distortion

Learn how to use **Double Standards** to fight you thought distortion.

Present: **Mental Filter Thought Distortion**: You pick out a single negative **detail** (not event like overgeneralizing) and dwell on it exclusively so that your vision of all reality becomes murky and distorted due to this filter. Example: You receive many positive comments about (fill in the blank) but only a few people comment about (fill in the blank) negatively or are critical. You become focused on the negative remarks and obsess about these comments fueling your anxiety (worry, perseveration, rumination, anger, frustration hurt, avoiding, arguing, and addictive behavior)

 **The Double Standards Method**: 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.

Examine: Use whiteboard to show member’s examples of **Mental Filter** and use examine the evidence and Double standard skill to change the thought and reduce anxiety.

 Example: Thought- “I’m never going to understand CBT”

 Feeling- helpless, worried, immobilized

 Behavior- Stop coming to Anxiety Management Class

Or, Have members fill in the blank of your presentation and flush out thought distortion and skill to reduce anxiety.

Summarize: You know what to do ☺

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Anxiety Man Week 11:

Review: What is CBT? What is **Examine the Evidence** and how did you use it last week. What is **Thought Distortion**? Members report on noticing, **All or Nothing Thinking and Overgeneralizing** and **Mental Filtering** thought distortions this week. How did you use skills : **Mindfulness/Meditation, Examine the Evidence and Double Standards** tools

Objective: To improve skill use around CBT to manage Anxiety

Learn to identify **Discounting Positives** Thought Distortion

Learn how to use **Experimental Technique** to fight you thought distortion.

Present: **Discounting Positives**: You insist your accomplishments or positive qualities “don’t count”

 **Experimental Technique**: Do an experiment to test the validity of your negative thought. For example: during an episode of panic you become terrified you are about to die of a heart attack; you jog in place or walk fast to prove your heart is strong.

Examine: Use whiteboard to show members examples of **Discounting Positives** and use **Experimental Technique,** **Examine the Evidence and Double Standards** skills to change the thought and reduce anxiety.

1. Have group split into pairs.
2. One member of the pair writes down 3 compliments or positive feedback statements about the person they are paired with.
3. Next member reads the compliment to the other member
4. The other member responds to each statement using one of the tools on paper.
5. After response is written member shares the tool used to discount positive for each compliment or positive statement.

Facilitator offers members opportunity to debrief. Switch member’s roles in exercise if there is time

Summarize: You know what to do ☺

**Compliments or Positive Feedback Tools**

**Member Giving Compliment:**

**1.**

**2.**

**3.**

**Member Receiving Compliment:**

1. **Experimental Technique**
2. **Examine the Evidence**
3. **Double Standards**

**The Ten Forms of Twisted Thinking**

From "The Feeling Good Handbook" by David D. Burns, M.D. © 1989

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**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.
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**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 window of his car. He told himself, "Just my luck! Birds are always crapping on my car!"
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**3. Mental Filter** - You pick out a single negative detail and dwell on it exclusively, so that your vision 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.
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**4. Discounting the positive** - You reject positive experiences by insisting that 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 positives takes the joy out of life and makes you feel inadequate and unrewarded.
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**5. Jumping to conclusions** - You interpret things negatively when there are no facts to support your conclusion.

*Mind Reading* : Without checking it out, you arbitrarily conclude that someone is reacting negatively to you.

*Fortune-telling* : 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 may tell yourself, "I'll never get better."
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**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."
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**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 that 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."
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**8. "Should" statements** - You tell yourself that things should 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.
"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?"
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 " must erbation." I call it the "shouldy" approach to life.
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**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 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.
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 very little room for constructive communication.

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Some people do the opposite. They blame other people or their circumstances for their problems, and they overlook ways 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.

Anxiety Man Week 12:

Review: First ask members to complete survey attached

What is CBT? What is **Examine the Evidence** and how did you use it last week. What is **Thought Distortion**? Members report on noticing, **Jumping to Conclusions**, **All or Nothing Thinking and Overgeneralizing,** **Mental Filtering,** **and Double Standards** thought distortions this week. How did you use skills: **Shades of Gray,** **Mindfulness/Meditation** and tools **Experimental Technique,** **Examine the Evidence and Double Standards?**

Objective: To improve skill use around CBT to manage Anxiety

Learn to identify the 2 ways **Magnification or Minimization** Thought Distortion and how it impacts anxiety.

Learn how to use **Survey Method** (Rating how true or important the thought is) to fight a thought distortion.

Present: You will never see social anxiety the same after watching this - Youtube video

<https://www.youtube.com/watch?v=dBZyFMd6La4>

Examine: **Magnification or Minimization** Thought Distortion and safety.

 **Survey Method** tool Play Family Feud… Survey Says!:

split group in 2 and play Family Feud. Use compiled date from the beginning of class.

**Ask this question: 1) Group was surveyed with this question. What are the top 3 answers to the question, “When I come to group I feel”**

**Excited**

**Bored**

**Interested**

**Ready**

**Play game starting with 1st pair.**

Summarize: You know what to do ☺

**Handout at beginning of Group**

**Please put a 1 next the answer you think is most true, a 2 next to the answer you think is next to be true, put a 3 next to the answer you feel is almost the least true and then a 4 next to the answer that is not true at all.**

**“When I come to group I feel”**

**Interested\_\_\_\_\_**

**Ready\_\_\_\_\_\_**

**Excited\_\_\_\_**

**Bored\_\_\_\_\_**

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Anxiety Man Week 13:

**Review**: What is CBT? What is and how did you use it last week. Members report on noticing, **Emotional Reasoning**, **Magnification or Minimization,** **Jumping to Conclusions**, **All or Nothing Thinking and Overgeneralizing,** **Mental Filtering,** **and Double Standards** thought distortions this week. How did you use skills: **Define Terms**, **Survey Method,** **Shades of Gray,** **Mindfulness/Meditation** and tools **Experimental Technique,** **Examine the Evidence and Double Standards?**

Objective: To improve CBT skills to manage Anxiety

Learn to identify the Thought Distortion **“Should Statements**” and how it impacts your anxiety.

Learn how to use **“The Semantic** **Method**” to fight a thought distortion.

Present: <https://www.youtube.com/watch?v=wLOK4Hl6ZyE>

 Imaginary Gallery STOP Video at 5:34!!!!!

 Teach Defining Terms coping skills for all thought distortions:

 When you label yourself “inferior” or a “fool” or a “loser” ask, “What is the definition of ‘fool?’. You may find that you have not been using the word correctly

and you will learn to express yourself with defined terms.

Examine:

 Loser…

*noun*

1. a person or thing that loses or has lost something, especially a game or contest.

|  |  |
| --- | --- |
| *synonyms:* | defeated person, [also-ran](https://www.google.com/search?espv=2&biw=1418&bih=671&q=define+also-ran&forcedict=also-ran&sa=X&ved=0ahUKEwiAn6_GgNvRAhVCziYKHe8QB9QQ_SoIHTAA), [runner-up](https://www.google.com/search?espv=2&biw=1418&bih=671&q=define+runner-up&forcedict=runner-up&sa=X&ved=0ahUKEwiAn6_GgNvRAhVCziYKHe8QB9QQ_SoIHjAA)"the loser still gets the silver medal" |
|  |  |

* + a person who accepts defeat with good or bad grace, as specified.

"we won fair and square—they should concede that and be good losers"

* + a person or thing that is put at a disadvantage by a particular situation or course of action.

"children are the losers when politicians keep fiddling around with education"

fool1….

*noun*

1. .a person who acts unwisely or imprudently; a silly person.

"what a fool I was to do this"

|  |  |
| --- | --- |
|  |  |

*verb*

trick or deceive (someone); dupe.

"he **fooled** nightclub managers **into** believing he was a successful businessman"

|  |  |
| --- | --- |
| *synonyms:* | [deceive](https://www.google.com/search?espv=2&biw=1418&bih=671&q=define+deceive&forcedict=deceive&sa=X&ved=0ahUKEwjp9evxgNvRAhXRfiYKHVURDboQ_SoIfDAA), [trick](https://www.google.com/search?espv=2&biw=1418&bih=671&q=define+trick&forcedict=trick&sa=X&ved=0ahUKEwjp9evxgNvRAhXRfiYKHVURDboQ_SoIfTAA), [hoax](https://www.google.com/search?espv=2&biw=1418&bih=671&q=define+hoax&forcedict=hoax&sa=X&ved=0ahUKEwjp9evxgNvRAhXRfiYKHVURDboQ_SoIfjAA), [dupe](https://www.google.com/search?espv=2&biw=1418&bih=671&q=define+dupe&forcedict=dupe&sa=X&ved=0ahUKEwjp9evxgNvRAhXRfiYKHVURDboQ_SoIfzAA), take in, [mislead](https://www.google.com/search?espv=2&biw=1418&bih=671&q=define+mislead&forcedict=mislead&sa=X&ved=0ahUKEwjp9evxgNvRAhXRfiYKHVURDboQ_SoIgAEwAA), [delude](https://www.google.com/search?espv=2&biw=1418&bih=671&q=define+delude&forcedict=delude&sa=X&ved=0ahUKEwjp9evxgNvRAhXRfiYKHVURDboQ_SoIgQEwAA), [hoodwink](https://www.google.com/search?espv=2&biw=1418&bih=671&q=define+hoodwink&forcedict=hoodwink&sa=X&ved=0ahUKEwjp9evxgNvRAhXRfiYKHVURDboQ_SoIggEwAA), [sucker](https://www.google.com/search?espv=2&biw=1418&bih=671&q=define+sucker&forcedict=sucker&sa=X&ved=0ahUKEwjp9evxgNvRAhXRfiYKHVURDboQ_SoIgwEwAA), [bluff](https://www.google.com/search?espv=2&biw=1418&bih=671&q=define+bluff&forcedict=bluff&sa=X&ved=0ahUKEwjp9evxgNvRAhXRfiYKHVURDboQ_SoIhAEwAA), [gull](https://www.google.com/search?espv=2&biw=1418&bih=671&q=define+gull&forcedict=gull&sa=X&ved=0ahUKEwjp9evxgNvRAhXRfiYKHVURDboQ_SoIhQEwAA); More |
|  |  |

*adjective*

*informal*

foolish or silly.

"that damn fool waiter"

Use white board to write down reasoning statement and emotional statements and ask group to identify. Use Procrastination, Fooling Yourself etc as red flags for thought distortion.

Next, use dictionary to define additional negative words we use to define our self and. Ask members for positive ways to define themselves.

Summarize: You know what to do ☺

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Anxiety Man Week 14:

**Review**: What is CBT? Members report on noticing Automatic Negative Thoughts (ANTs), **Emotional Reasoning**, **Magnification or Minimization,** **Jumping to Conclusions**, **All or Nothing Thinking and Overgeneralizing,** **Mental Filtering,** **and Double Standards**. How did you use skills: **Define Terms**, **Survey Method,** **Shades of Gray,** **Experimental Technique,** **Examine the Evidence and Double Standards as well as self-care skills and mindfulness to manage anxiety?**

Objective: To improve CBT skills to manage Anxiety

Learn to identify the Thought Distortion **“Should Statements**” and how it impacts your anxiety.

Learn how to use **“The Semantic** **Method**” to fight a thought distortion.

Present: Read from attached definition of Should Statements and Semantic Method.

Explore: Define the word Semantic:

**ADJECTIVE**

* Relating to meaning in language or logic.

On white board writer down all the “should statements” members could shout out. Help members to change “should” to a more meaningful, logical word. Challenge perfectionism and sabotaging statements.

Example: “I should be able to take my medication everyday”

New statement “I take my medication more regularly than I have in the past”.

Summarize: You know what to do ☺

**The Ten Forms of Twisted Thinking**

From "The Feeling Good Handbook" by David D. Burns, M.D. © 1989

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**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.
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**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 window of his car. He told himself, "Just my luck! Birds are always crapping on my car!"
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**3. Mental Filter** - You pick out a single negative detail and dwell on it exclusively, so that your vision 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.
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**4. Discounting the positive** - You reject positive experiences by insisting that 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 positives takes the joy out of life and makes you feel inadequate and unrewarded.
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**5. Jumping to conclusions** - You interpret things negatively when there are no facts to support your conclusion.

*Mind Reading* : Without checking it out, you arbitrarily conclude that someone is reacting negatively to you.

*Fortune-telling* : 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 may tell yourself, "I'll never get better."
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**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."
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**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 that 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."
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**8. "Should" statements** - You tell yourself that things should 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.
"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?"
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 " must erbation." I call it the "shouldy" approach to life.
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**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 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.
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 very little room for constructive communication.

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**10. Personalization and Blame** - Personalization comes 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 difficulty in 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 was better in bed, he wouldn't beat me." Personalization leads to guilt, shame and feelings of inadequacy.
Some people do the opposite. They blame other people or their circumstances for their problems, and they overlook ways 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.

Anxiety Man Week 15:

**Review**: What is CBT? Members report on noticing Automatic Negative Thoughts (ANTs), **Should Statements**, **Emotional Reasoning**, **Magnification or Minimization,** **Jumping to Conclusions**, **All or Nothing Thinking and Overgeneralizing,** **Mental Filtering,** **and Double Standards**. How did you use skills: **The Semantic** **Method, Define Terms**, **Survey Method,** **Shades of Gray,** **Experimental Technique,** **Examine the Evidence and Double Standards as well as self-care skills and mindfulness to manage anxiety?**

Objective: To improve CBT skills to manage Anxiety

Learn to identify the Thought Distortion **“Labeling**” and how it impacts your anxiety.

Learn how to use **“Re-attribution**” to fight a thought distortion.

Present: Read from attached definition of Labeling and Re-Attribution Method.

Explore: Lead discussion about Labeling and members beliefs about Labeling. Help members discover their belief about Labeling. Use ABCD model to reframe their negative belief about labeling their anxiety and endorse their positive belief about their ability to label their anxiety or themselves.

 Activating Situation:

 Belief:

 Consequence of negative Belief/Consequence of positive belief:

 Dispute: Use any skills to “fight” negative belief.

 Identify: belief and impact on anxiety

Summarize: You know what to do ☺

**The Ten Forms of Twisted Thinking**

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**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 window of his car. He told himself, "Just my luck! Birds are always crapping on my car!"
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**3. Mental Filter** - You pick out a single negative detail and dwell on it exclusively, so that your vision 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.
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**4. Discounting the positive** - You reject positive experiences by insisting that 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 positives takes the joy out of life and makes you feel inadequate and unrewarded.
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**5. Jumping to conclusions** - You interpret things negatively when there are no facts to support your conclusion.

*Mind Reading* : Without checking it out, you arbitrarily conclude that someone is reacting negatively to you.

*Fortune-telling* : 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 may tell yourself, "I'll never get better."
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**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."
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**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 that 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."
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**8. "Should" statements** - You tell yourself that things should 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.
"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?"
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 " must erbation." I call it the "shouldy" approach to life.
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**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 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.
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 very little room for constructive communication.

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**10. Personalization and Blame** - Personalization comes 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 difficulty in 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 was better in bed, he wouldn't beat me." Personalization leads to guilt, shame and feelings of inadequacy.
Some people do the opposite. They blame other people or their circumstances for their problems, and they overlook ways 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.

Anxiety Man Week 16:

**Review**: What is CBT? Members report on noticing Automatic Negative Thoughts (ANTs), **Labeling**, **Should Statements**, **Emotional Reasoning**, **Magnification or Minimization,** **Jumping to Conclusions**, **All or Nothing Thinking and Overgeneralizing,** **Mental Filtering,** **and Double Standards**. How did you use skills**: Re-attribution**, **The Semantic** **Method, Define Terms**, **Survey Method,** **Shades of Gray,** **the** **Experimental Technique,** **Examine the Evidence and Double Standards as well as self-care skills and mindfulness to manage anxiety?**

Lead review of ABCD model to reframe their negative belief about labeling their anxiety and endorse their positive belief about their ability to label their anxiety or themselves.

 Activating Situation:

 Belief:

 Consequence of negative Belief/Consequence of positive belief:

 Dispute: Use any skills to “fight” negative belief.

 Identify: belief and impact on anxiety

Objective: To improve CBT skills to manage Anxiety

Learn to identify the Thought Distortion **“Personalization and Blaming**” and how it impacts your anxiety.

Learn how to use **“Cost Benefits Analysis”** to fight a thought distortion.

Present: Read from attached definition of Personalization and Blaming and Cost Benefits Analysis Method.

Explore: On the white board explore a members example of anxious episode from this week.

Thought\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_:

 Advantage (Benefit)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Disadvantage(Cost)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Feeling\_\_\_\_\_\_\_\_\_\_\_\_\_\_:

 Advantage (Benefit) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Disadvantage (Cost) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Behavior\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_:

 Advantage (Benefit) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Disadvantage (Cost) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Summarize: You know what to do ☺

**The Ten Forms of Twisted Thinking**

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Anxiety Man Week 17:

**Review**: What is CBT? Members report on noticing Automatic Negative Thoughts (ANTs), **Personalization and Blaming , Labeling**, **Should Statements**, **Emotional Reasoning**, **Magnification or Minimization,** **Jumping to Conclusions**, **All or Nothing Thinking and Overgeneralizing,** **Mental Filtering,** **and Double Standards**. How did you use skills**: Cost Benefits Analysis , Re-attribution**, **The Semantic** **Method, Define Terms**, **Survey Method,** **Shades of Gray,** **the** **Experimental Technique,** **Examine the Evidence and Double Standards as well as self-care skills and mindfulness to manage anxiety?**

Lead review of ABCD model to reframe their negative belief about labeling their anxiety and endorse their positive belief about their ability to label their anxiety or themselves.

 Activating Situation:

 Belief:

 Consequence of negative Belief/Consequence of positive belief:

 Dispute: Use any skills to “fight” negative belief.

 Identify: belief and impact on anxiety

Objective: To improve CBT skills to manage Anxiety

Practice identifying Automatic Negative thoughts (ANTs) and Skills to untwist distortions.

Present: Group guessing game.

Explore: Give everyone a copy of the attached sheets, **The Ten Forms of Twisted Thinking and**

 **Ten Ways to Untwist Your Thinking.**

Cut your copy of the attached into individual definitions and put all in a box.

 Have a member pick out a paper that has an ANT or a skill to change anxious thought

 Have member describe a personal or made up situation incorporating the ANT or Skill

 Ask group to guess which ANT or skill member was describing.

Summarize: You know what to do ☺

**The Ten Forms of Twisted Thinking**

From "The Feeling Good Handbook" by David D. Burns, M.D. © 1989

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**4. Discounting the positive** - You reject positive experiences by insisting that 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 positives takes the joy out of life and makes you feel inadequate and unrewarded.
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**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 that 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."
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**8. "Should" statements** - You tell yourself that things should 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.
"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?"
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 " must erbation." I call it the "shouldy" approach to life.
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**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 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.
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 very little room for constructive communication.

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**10. Personalization and Blame** - Personalization comes 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 difficulty in 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 was better in bed, he wouldn't beat me." Personalization leads to guilt, shame and feelings of inadequacy.
Some people do the opposite. They blame other people or their circumstances for their problems, and they overlook ways 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.

**Ten Ways to Untwist Your Thinking**

From "The Feeling Good Handbook" by David D. Burns, M.D. © 1989
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**1. Identify The Distortion:** 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.
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**2. Examine The Evidence:** 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.
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**3. The Double-Standard Method:** 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.
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**4. The Experimental Technique:** Do an experiment to test the validity of your negative thought. For example, if during an 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.
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**5. Thinking In Shades Of Grey:** Although this method may sound drab, the effects can be illuminating. Instead of thinking about your problems in all-or-nothing extremes, evaluate things on a scale 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.
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**6. The Survey Method:** Ask people questions to find out if your thoughts and attitudes are realistic. For example, if you feel that public speaking anxiety is abnormal and shameful, ask several friends if they ever felt nervous before they gave a talk.
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**7. Define Terms:** 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 realize that there is no such thing as 'a fool' or 'a loser.'
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**8. The Semantic Method:** 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."
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**9. Re-attribution:** 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.
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**10. Cost-Benefit Analysis:** 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."

Anxiety Man Week 18:

**Review**: Disability Education, self-care skills, mindfulness and CBT Skills: Automatic Negative Thoughts (ANTs), **Personalization and Blaming , Labeling**, **Should Statements**, **Emotional Reasoning**, **Magnification or Minimization,** **Jumping to Conclusions**, **All or Nothing Thinking and Overgeneralizing,** **Mental Filtering,** **and Double Standards**. How did you use skills**: Cost Benefits Analysis , Re-attribution**, **The Semantic** **Method, Define Terms**, **Survey Method,** **Shades of Gray,** **the** **Experimental Technique,** **Examine the Evidence and Double Standards as well as self-care skills and mindfulness to manage anxiety?**

Lead review of ABCD model to reframe their negative belief about labeling their anxiety and endorse their positive belief about their ability to label their anxiety or themselves.

 Activating Situation:

 Belief:

 Consequence of negative Belief/Consequence of positive belief:

 Dispute: Use any skills to “fight” negative belief.

 Identify: belief and impact on anxiety

Objective: Identify group and individual outcomes

Present: Anxiety Questionnaire

Explore: Use questionnaire handed out at beginning of curriculum and have members complete same questionnaire. Lead discussion with members about progress.

Summarize: You know what to do ☺

**ANXIETY QUESTIONNAIRE FOR ADULTS (SAQ-A30)**

**Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_start/ end**

Below are a series of social situations that may or may not cause you UNEASE, STRESS or NERVOUSNESS. Check off the box that represents your anxiety level in the identified situation. IF it doesn’t apply respond by imagining the situation.

**Not at all or very slight =1- Slight= 2- Moderate=3- High=4- Very high or extremely high=5**

 1 2 3 4 5

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 1. Greeting someone and being ignored  |  |  |  |  |  |
| 2. Having to ask a neighbor to stop making noise  |  |  |  |  |  |
| 3. Speaking in public  |  |  |  |  |  |
| 4. Asking someone attractive for a date  |  |  |  |  |  |
| 5. Complaining to the waiter about my food  |  |  |  |  |  |
| 6. Feeling watched by people  |  |  |  |  |  |
| 7. Participating in a meeting with people in authority  |  |  |  |  |  |
| 8. Talking to someone who isn’t paying attention to what I am saying  |  |  |  |  |  |
| 9. Refusing when asked to do something I don’t like doing  |  |  |  |  |  |
| 10. Making new friends  |  |  |  |  |  |
| 11. Telling someone that they have hurt my feelings  |  |  |  |  |  |
| 12. Having to speak in class, at work, or in a meeting  |  |  |  |  |  |
| 13. Maintaining a conversation with someone I’ve just met  |  |  |  |  |  |
| 14. Expressing my annoyance to someone that is picking on me  |  |  |  |  |  |
| 15. Greeting each person at a social meeting when I don’t know most of them  |  |  |  |  |  |
| 16. Being teased in public  |  |  |  |  |  |
| 17. Talking to people I don’t know at a party or a meeting  |  |  |  |  |  |
| 18. Being asked a question in class by the teacher or by a superior in a meeting  |  |  |  |  |  |
| 19. Looking into the eyes of someone I have just met while we are talking  |  |  |  |  |  |
| 20. Being asked out by a person I am attracted to  |  |  |  |  |  |
| 21. Making a mistake in front of other people  |  |  |  |  |  |
| 22. Attending a social event where I know only one person  |  |  |  |  |  |
| 23. Starting a conversation with someone you’re attracted to  |  |  |  |  |  |
| 24. Being reprimanded about something I have done wrong  |  |  |  |  |  |
| 25. While having dinner with a group and being asked to speak for everyone  |  |  |  |  |  |
| 26. Telling someone that their behavior bothers me and asking them to stop  |  |  |  |  |  |
| 27. Asking someone I find attractive to dance  |  |  |  |  |  |
| 28. Being criticized  |  |  |  |  |  |
| 29. Talking to a superior or a person in authority  |  |  |  |  |  |
| 30. Telling someone I am attracted to that I would like to get to know them better  |  |  |  |  |  |

(Caballo, Salazar, Irurtia, Arias, and CISO-A Research Team, 2010)