Managing Depression
A Self-Help Guide
We can all go through times when we are feeling unhappy, however when we are depressed, these feelings can last a long time and it can feel like nothing makes us happy. We may find we start to see the world as a negative place and we may start to see ourselves in a negative way. What can make depression so difficult is that we can start to lose interest in the things we used to enjoy and as a result withdraw from activities and people. By stopping doing the things we like and not socialising we can get trapped in a negative cycle.

What is depression?

We can all go through times when we are feeling unhappy, however when we are depressed, these feelings can last a long time and it can feel like nothing makes us happy. We may find we start to see the world as a negative place and we may start to see ourselves in a negative way. What can make depression so difficult is that we can start to lose interest in the things we used to enjoy and as a result withdraw from activities and people. By stopping doing the things we like and not socialising we can get trapped in a negative cycle.

Example of a Vicious Cycle

“*The world is a bad place*”
“*Nothing ever goes right for me*”
“*I can’t do anything right*”

Depressed
Low
Stressed

Do less activity
Stop seeing friends
Want to stay in bed and hide away

Feel unwell
Body aches
Tired
No energy

Boosting motivation and getting active
Managing negative thoughts
Problem solving
Getting a good night’s sleep
Treatment options—Medication
Relaxation
How to get help
Keeping safe
How may depression affect me?

As demonstrated in the previous picture of a vicious cycle, depression can affect the way we feel, think, act (behaviours) and our bodies (physical). Some of the symptoms that people tend to report are:

**Physical symptoms:**
- Aching in joints.
- Body feels heavy.
- Tired all the time.
- No energy or not being able to sit still.

**Thoughts:**
- I am useless, I am a failure.
- No-one cares about me.
- People will think I am miserable and not want to be with me.
- Everyone is doing better than me.
- It is all my fault.
- I wish I had done things differently.
- I don't want to be here anymore, thoughts of suicide.

**Behaviour:**
- Not wanting to see our friends or family.
- Not wanting to go out.
- Wanting to stay in bed all day.
- Sleeping more or struggling to get to sleep.
- Putting off things we need to do.
- Stopping our normal routines and activities.
- Doing less exercise.
- Wanting to eat more or losing our appetite.

**Physical symptoms:**
- Aching in joints.
- Body feels heavy.
- Tired all the time.
- No energy or not being able to sit still.

Although the symptoms of depression are really unpleasant and can be overwhelming, there are a number of things we can do to help us lift our mood.
Boosting Motivation and Getting Active

Why is this important?
When we feel depressed, the last thing we want to do is to be active. It can feel like too much effort to get out of bed. However we have found that the more active we are the better we feel. Activity and physical exercise can help us by:

- Helping our brains produce chemicals that act as a natural antidepressant.
- Boosting our mood.
- Helping us focus.
- Make contact with other people.
- Get the feeling of achievement from getting things done.

We are not suggesting that we all start running marathons but even by starting off doing one activity a day be it going for a short walk, or vacuuming a room, or dancing to our favourite song we can start to gradually build our activity levels up.

What if we are filling our days but we still feel low?
Sometimes we can fill our day with activities but still feel low in ourselves. In those cases it may be that we are not getting enough balance in our day. Ideally our day should be made up of:

We can do this in three steps:

1. Work out what activities in our life are routine (laundry, showering etc.), which are necessary (paying bills, taking medication, going to work etc.) and pleasurable (seeing friends, having a soak in the bath, spending time with our family etc.). There may be some tasks that fall into more than one group, don’t worry as long as they are somewhere on the list.
2. Rank the activities in order of how easy and difficult they are to do.
3. Plan your week to come so that you get a good mix of what you have to and like to do, what you find easy and what you find tougher.

Don’t worry if to start with, putting all the activities in your diary feels too much. You can start off with a few additional activities.

Some suggestions for completing your diary:

- Try using coloured pens so you can see any patterns at a glance e.g. red for difficult, green for easy.
- Try not to squeeze lots of difficult activities into the same day as this can leave us feeling exhausted – can you plan it for another day? Can you break it up with some easier activities?
- If you are doing lots of activities on your own, is there anyway that you can include family and friends? Just make sure you have some time for yourself to relax.
- If the idea of rigid planning doesn’t appeal, why not try a ‘lucky dip’. A person that had tried this technique with the support of a PWP developed a system by which they would put tasks in three envelopes and they would plan their day based on the type of activity they had to do but would have the surprise of what the activity was. They even got their children involved in picking the tasks for the day.

Remember: This guide shows you the process and how the technique works, as long as you incorporate the key steps, you can adapt it to suit you!

The next are some worksheets that you can use as a guide through this process.
Step 1: Identify Activities

Necessary

Routine

Pleasurable

Step 2: Rank Activities

Using the routine, necessary and pleasurable activities; place them in the below list based on how difficult or easy you find it to complete them.

Hard

Medium

Easy
Managing Negative Thoughts

As touched upon earlier, when we feel depressed we can have negative thoughts that can pop into our heads without warning. Although looking back at them we may recognise that these thoughts are overly negative, at the time, we may believe them completely. These thoughts that are sometimes referred to as ‘Negative Automatic Thoughts’ (NAT’s), can with practiced, be managed using a technique called thought challenging.

**Thought challenging**

**Step 1. Identifying the thoughts**

Before we can start to challenge thoughts we first need to know what our thoughts are. Because they can happen so quickly and go just as quickly, writing them down when we notice them can be very helpful.

By keeping a diary of our thoughts, we can not only identify them but we can also start to notice situations that might trigger off our negative thoughts and patterns of when they occur. This can take practice so don’t worry if it is difficult at first.

**Step 2. Weighting up the thoughts**

We can think of this process like putting negative thoughts on trial. Like in a trial there is a defence and a prosecution, what is the evidence that suggests my thought is accurate and what is the evidence that suggests it is not the case?

Is our thought based on the truth or are we currently looking at the world in a negative way that is making us view ourselves negatively? When we can see the accuracy of our thoughts we can move on to the step of reconstructing. When doing this it can be helpful to start with the negative thought you believe the most.

**Step 3. Reconstructing the thoughts**

We are trying to create a new thought that is more realistic than the original. We are not trying to make it the opposite, we are aiming for accuracy. For example; our negative thought may be that “I never do anything right” and the opposite may be “I never make any mistakes; I am perfect all the time”. Neither of these are accurate and while the first may make us feel bad about ourselves, the second places unrealistic expectations on us that may make us feel bad if we cannot achieve them. The more accurate thought is more likely to be, “I sometimes make mistakes but generally I try my best and things usually go right”.

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**Step 3: Activity Diary**

You can use this diary to plan your week. Try to note if you are completing the tasks at the time they are needed. You can complete a diary for your typical week to see what you are doing already and what you can add in.

<table>
<thead>
<tr>
<th>Day of the week / date</th>
<th>6am—8am</th>
<th>8am—10am</th>
<th>10am—12pm</th>
<th>12pm—2pm</th>
<th>2pm—4pm</th>
<th>4pm—6pm</th>
<th>6pm—8pm</th>
<th>8pm—10pm</th>
<th>10pm—12am</th>
</tr>
</thead>
</table>

**Thought challenging has three steps:**

1. Identifying the thoughts
2. Weighing up the thoughts
3. How can we re-construct the thought to make it more accurate?
Negative Thinking Styles

Sometimes when we are struggling with our mood, we can get into habits in the way we think about ourselves, the world and others that are negative. Thought challenging is great for changing this and as you will learn on the next page, identifying when this happens is a big part of making that change.

To help you spot these habits, here are a few that tend to come up.

Just remember—we all get these from time to time, however when we are low, we tend to get them more often and they can make us feel lower.

**Gloomy Glasses**

When we tend to see the world through a negative filter. We struggle to see the positive and only see things that confirm our negative thoughts.

Once we recognise this, we can try and seek out the positive.

**Critical Self**

If we are blaming ourselves for things that may not be all our responsibility then we are getting stuck in this habit. We will put ourselves down and no-matter what, see ourselves as no good. Even if others say different!

Can we ask is what I think true? Would the people who know me agree with these thoughts?

**The Crystal Ball**

Becoming sure we know what is going to happen, like when we think: I don’t want to go to that party, I’m going to have an awful time. We become so convinced things are going to go badly we can miss out on enjoyable opportunities. How likely is it that this is going to happen? Have we got any previous examples of when it went well?

**Mind Reading**

Sometimes we can be sure when we are low, that others are thinking badly of us or upset with us. Our friend doesn’t answer their phone and we might think they are avoiding us. However they might be having a shower or left their phone in another room.

We can ask ourselves—is there another way of looking at this? Am I maybe jumping to conclusions?

**Catastrophe!**

When we think and believe that the worst possible thing is going to happen. This can make us really upset and stressed and as a result we can avoid things because we are convinced it will go badly.

Is what we think very likely? Has it happened before? Is there any evidence that suggests actually it might not be as bad as we think?

**I Should and I Must**

By telling ourselves that we should and we must do things or do things a certain way, we can put a lot of pressure on ourselves. We can also set expectations that are unrealistic. If we set standards we can’t reach, it is just going to make us feel worse in ourselves.

Can I break my goals down to be more manageable? Is there a more realistic goal?

**Comparison**

If you feel others are always perfect and you are always automatically not as good, this is going to leave you feeling low and lacking in confidence.

If you can spot yourself thinking like this, you can try to focus on the things that are positive about you. Others are great but there is only one you.

**Black and White Thinking**

Things can feel really urgent. We can start to see the world in terms of only good and bad, right and wrong.

Is there a middle ground? Am I able to look at things from another perspective?
Step 2. Weighting up the thoughts

Negative Thought
Example: I'm not going to be able to answer the questions.

Evidence for
- Has someone you trust said this?

Evidence Against
- What evidence suggests the thought is not true?

Tip: Challenge the thoughts with the highest percentage first.

Evidence For
- Has someone you trust said this?

Evidence Against
- What evidence suggests this is not the case?

Step 3. Reconstructing the thoughts

Now we need to balance the thought based on the evidence we have collected. If you find it difficult it can help to think of the complete opposite of your original thought and then try to find the middle ground. We have done this in the below example:

Example: I'm not going to be able to answer the questions (90%)

Evidence For
- My last interview I didn't get the job. I didn't get any feedback.
- The last interview was tough but I have been successful in a number of interviews.

Evidence Against
- What unhelpful thinking style might be being used?

Balanced Thought
- It might be tough but I have prepared. I will listen carefully to what is asked of me and try my best.
- I will be able to answer anything I am asked perfectly! This is going to be easy!

Now let's have a go at balancing our thought:

Evidence For

Evidence Against

Balanced Thought
Problem solving

When we feel depressed we can sometimes feel like everything is too much, that we are being overwhelmed. When this happens it can be helpful to break problems down into manageable chunks. We can do this by using problem solving skills broken down into the following:

What is the problem to be worked on?:

What are our options? Let's weigh them up—use another sheet of paper if needed

<table>
<thead>
<tr>
<th>What are the possible solutions? - It doesn’t matter how unusual the options might be, don’t rule anything out.</th>
<th>Positives of option</th>
<th>Negatives of option</th>
</tr>
</thead>
<tbody>
<tr>
<td>Solution 1:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Solution 2:</td>
<td></td>
<td></td>
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<tr>
<td>Solution 3:</td>
<td></td>
<td></td>
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<tr>
<td>Solution 4:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Let’s make a plan and....

Which option are we going to try first? - Which one

What do we need to put this plan in action? Do we need to get help

Do it!

How did it go? - What went well? What could have been done differently? Do we need to change the plan slightly and try again or do we need to try a different solution?

If you need to use another solution, you already have a few worked out

Getting a good night’s sleep

We can all go through times when we struggle with our sleep. We may struggle to get to sleep, wake up during the night, wake up too early or struggle to wake up in the morning. A lot of things can impact our sleep: physical difficulties like arthritis or injury, illness or psychological distress.

The amount of sleep we need can depend on our age and our level of activity. As we get older we tend to need less sleep and if we are not expending as much energy through the day. We may also need more if we are doing sports or have a physically demanding job.

There are plenty of things we can do to help us get a good night’s sleep:

1. Our environment: Is our room too hot, cold, light or dark, noisy or quiet, is our mattress uncomfortable?
   - Think Goldilocks, are the conditions just right for you?

2. Our actions: Are we drinking too much caffeine, exercising before bed, smoking or playing with electronic devices prior to trying to sleep.
   - Try a warm milky drink half an hour before bed.
   - Exercise helps us sleep but if we do it just before bed it can wake our bodies up.

3. Are we associating night with struggling to sleep: Are we lying in bed focusing on not being able to sleep; can we get up and try to do something boring and come back to bed when we feel tired? Then we can only associate bed with being tired and drifting to sleep......

What changes could I make to help my sleep?

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Techniques—Relaxation

Controlled Breathing

Anxiety can affect your breathing. People often tend to “over-breathe” when they are very anxious, and our breathing can become shallow and fast. This is due to the fight-or-flight response that we talked about earlier preparing the body for physical exertion.

The following side effects can occur (tick those that apply):

- Light-headedness
- Feeling faint
- Dizziness
- Tingling sensations in the hands or feet
- Visual changes

Breathing is much more effective when we use our diaphragms, rather than with our chest.

- Sit comfortably in a chair and place one hand on your chest and the other on your abdomen.
- As you breathe in, notice which hands moves the most. Begin to practice so that your lower hand on your abdomen moves and you breathe in and out, rather than the hand on your chest. Often people think it should be their tummy that draws in as they breathe in, however it should be the opposite.
- If you notice you are feeling tense, try breathing out a little more slowly and deeply, and notice a short pause before breathing in. You may find it helpful to count slowly or to use a word such as “relax” or “peace” to help extend the out-breath a little, and you can say this to yourself or out loud.

Breathing from just the chest, the lungs expand outwards. This is fine but when we “over-breathe” it can feel like not enough.

Breathing from the chest and diaphragm, we increase our capacity to take in oxygen.

You can access an audio version of this relaxation technique at: http://www.covwarkpt.nhs.uk/dont_panic/Pages/relaxation.aspx

Treatment Options—Medication

At IAPT we do not prescribe medication and we do not insist that you take or stop medication. Instead we will provide you with information to help you make an informed choice.

What medications are prescribed?

Antidepressants are prescribed by GPs to many people with depression. The most widely used antidepressants are called Selective Serotonin Reuptake Inhibitors (SSRI) and Selective Noradrenalin Reuptake Inhibitors (SNRI). Although they were prescribed more in the past, earlier antidepressants such as Tricyclics are still prescribed where clinically indicated.

What might put people off taking medication?

People may stop taking antidepressants completely or take less than prescribed for a number of reasons. Some possibilities may be due to beliefs that antidepressants are; ineffective, not helpful, side effects, concerns about addiction, concerns about safety, family oppose it or because they forgot to renew prescription. Like with all medications, some types may suit one person more than another. It may take a few tries to get the type and medication right. Please talk to your GP if you have any concerns.

How should I take my medication?

Usually with antidepressants it takes a few weeks before it can build enough in the system. This means it can sometimes take time to feel the full benefit. Unpleasant side effects can appear before these beneficial effects, which can cause many people to stop or reconsider taking their antidepressants. Some people may continue to take their antidepressants, but do so sporadically when they feel particularly low, believing that they will have an immediate effect. For best results take them daily at around the same time and in the dosage prescribed.

How long will I have to take them for?

After we start to feel better it can be tempting to stop taking them. It is suggested to keep taking them for six months following feeling better. Stopping sooner can increase the chances of relapse.

If you are interested to read further information on medication, there are many information materials available. Organisations such as MIND, Rethink and the Mental Health Foundation provide clear leaflets and booklets. Also we would recommend that you speak to your GP for any further advice around medication.
Techniques—Relaxation

Progressive muscle relaxation

It is important that you are feeling calm when you practice the relaxation and ensure you have a few moments to yourself. Sit in a comfortable chair, or lie down on a bed or on the floor. Ensure you will not be disturbed by noises, but if you do become aware of sounds just try to put them out of mind as soon as they enter.

- Close your eyes. Feel the chair or floor supporting your whole body – your heads, your arms and your legs. If you notice any tension in your body, begin to let it go. Take two slow deep breaths and just let the tension start to ease out of your body.

- Start to become aware of your head and how your forehead feels. If you notice any tension, let this go and feel your forehead start to become smooth and relaxed. Let go of any tension around your eyes, in your cheeks, your mouth and your jaw. Allow your teeth to part and feel that tension ease.

- Now take your attention to your neck and let the chair or floor take the weight of your head, feel your neck relax. Your head should now feel heavy. Now take your attention to your shoulders and gently drop them.

- Notice how your body feels as you start to relax.

- Take your attention now to your arms and hands. Let them drop down into the chair, or let them sink into the floor. They are now feeling heavy.

- Focus on your back and let any tension go as you feel yourself sink deeper into your chair, or into the floor. Now take your attention to your hips, your legs and your feet and relax them, again letting them sink into the chair or the floor. Notice how your body feels as the relaxation is taking over.

- Notice your breathing, your abdomen rising and falling gently with each inhale and exhale of the breath. Allow your breath to be a little slower and deeper.

- You should now be feeling completely relaxed and heavy. Continue to lie still and focus on slow, deep breathing.

- When you are ready, count back from 5 to 1 and start to wiggle your toes and fingers. Breathe in deeply and stretch. Open your eyes and start to look around the room, noticing what you see, feel and hear. Gently rise.

You can access an audio version of this relaxation technique at:
http://www.covwarkpt.nhs.uk/dont_panic/Pages/relaxation.aspx

How to get help

If you feel that anxiety is a problem for you and you are over 16, registered with a Coventry or Warwickshire GP and are ready to make changes in your life, IAPT (Improving Access to Psychological Therapies) might be able to help you. The IAPT service helps people with anxiety, depression, low mood, panic attacks, phobias and stress to build on their strengths and to learn new coping skills by using Cognitive Behavioural Therapy techniques.

If you would like to refer yourself to the IAPT service, please phone 024 7667 1090 (open Monday to Friday 9am to 4.30pm, excluding bank holidays). We will take your details and book you in for an assessment with one of our therapists to agree the best way forward to get the help you need.

REMEMBER:

*CBT involves working collaboratively with your practitioner to identify the right intervention for you to allow you to become your own therapist and manage your low mood*
If you are having thoughts of ending your life or of harming yourself, you should start by going to your GP, who will be able to talk to you about this.

**You could also contact a helpline:**
If you live in Coventry & Warwickshire you can phone the Mental Health Matters helpline, who provide emotional support over the telephone **24 hours a day, 7 days a week.** The 24 hour helpline number is **0800 616171 from a landline** or **0300 330 5487 from a mobile.**

The highly trained and experienced support workers use counselling skills to provide emotional guidance and information. You could phone them if:

- You are feeling low, anxious or stressed and feel talking to another person might help you cope;
- You are in extreme emotional distress and feel that there is nowhere else to turn; or
- You are caring for another person and finding it difficult to cope.

If you live in Solihull you can contact the Samaritans on 116 123.

Contacting a Helpline can give you a feeling of relief, wellbeing and peace of mind.
You won’t be judged and the service is confidential unless they consider that there is a risk to yourself or others.

**We all need help and support at some point in our lives. How you feel is important and never stupid. We appreciate how much courage it takes to make that first call—you can do it.**