

Karuna

Counselling & Psychotherapy

Self Help for Depression

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Self Help For Depression

Depression

Most, if not everyone, has days when they feel low, when everything seems to go wrong and they feel what is the point, the “I should have stayed in bed” feeling. These are part and parcel of life and though unpleasant, are different from what health professionals call clinical depression. The main differences between the two, are that in clinically depressed people these feelings last longer, they effect more of the individual’s life and are more severe.

Healthcare professionals use a list of symptoms to help diagnose people with clinical depression. The following list is an extension of this. People often feel relieved to know their experiences are part of a common illness which can be treated and this can also help people to feel less alone.

Indicators & Symptoms of Depression

1. Not surprisingly, the most common symptom is a low or depressed mood for most of the day, where you may feel bleak, empty or numb.
2. There may be changes in your appetite or weight. Usually both drop but some people may comfort eat leading them to put weight on.
3. Often people who are depressed feel tired all the time. This may result in them wanting to curl up in bed or lie on the settee doing nothing all day. This can mean that the person withdraws from their friends or family or they stop doing activities.
4. Sometimes people who are depressed also feel anxious or agitated without knowing why.
5. There may be changes in sleep pattern. Usually a difficulty getting off to sleep or difficulty staying asleep, so you may wake very early in the morning and be unable to drop back off. Occasionally people may sleep longer as a way of trying to escape from day to day living.
6. People may become less interested in what they would have normally found pleasurable.
7. Feeling pessimistic, or a feeling of hopelessness where you believe things will continue to be pointless forever. You may see the future as containing nothing but misery and loss.
8. Feeling worthless, that you are bad useless or inadequate, that life is pointless, sometimes people feel excessively guilty.
9. Problems with concentration, perhaps not even being able to concentrate on a conversation.
10. Problems remembering things.
11. Loss of interest in sex or a low libido.

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12. Increased irritability and anger.
13. Occasionally people with depression will self harm.
14. Morbid or suicidal thoughts. These may range from feeling it would not be so bad to die accidentally, to actively making plans to end your life.

Symptoms

Persistent low mood

Changes in appetite or weight

Persistent tiredness

Social withdrawal

Inability to sleep / stay asleep

Lack of joy

Problems with concentration

Loss of interest in sex

Suicidal thoughts

Feeling hopeless / worthless

How Common Is Depression?

Depression is very common. Some statistics suggest that 1 in 6 people will experience some form of depressive episode at some point in their lives. This means that if you were in a class of 30 children at school, 5 of your classmates will be clinically depressed at some time during their life. However, most depressed people do recover, many without treatment. Treatment aims to speed up the process and support people through the worst periods.

The average length of time someone typically experiences depression is between 3 and 6 months. Taken as a percentage of your life time, this is comparatively short. However, for some, depression lasts longer and about half of depressed people will experience a recurrence. Medication and psychological treatments aim to increase your chances of staying well and lessen the impact should you have a recurrence.

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- **Depression is Very Common**
- **1 in 6 people will experience it at some time in their life.**
- **Depression tends to be short lived lasting between 3 & 6 months**

Why Me?

There are three main schools of thought as to why people may become depressed. These are 1.) biological and physiological; 2.) psychological and 3.) social in origin.

1. Biological & Physiological

There is a strong body of evidence to suggest that our biological makeup plays a significant role in whether or not we experience depression. We know there is a genetic link, if you have a parent who has been depressed, you have a greater chance of becoming depressed at some point too. However, professionals call this a predisposition, an increased likelihood, and not a certainty. There are many people who have family members who have been depressed and they have never had such an experience. Therefore we know that our biological and genetic makeup does not provide us with all the answers. We also know that women who have recently given birth are at an increased risk. This is because of the hormone changes which occur following birth. However, many women do not become depressed even if they feel low for a few days following the birth of their baby.

2. Psychological

Psychological theorists have found relationships between unpleasant events, particularly those experienced in childhood and the likelihood of becoming depressed. Just as our genetic makeup can leave us predisposed to depression, so too can experiences such as loss of a parent through death or divorce, abuse, poor or inadequate attachments, as well as many other negative experiences. Again having these experiences does not mean that we will automatically become depressed, only that the person is more vulnerable to depression or some other form of psychological distress.

Often when people first experience depression there is a trigger, a significant event which frequently is similar to the childhood experience which perhaps the child was

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unable to go through fully at the time. For example, a child who lost their mother may become depressed in later life at the loss of a friend.

3. Social / Environmental

Further researchers have found that people who are depressed share a number of social factors in common. People who are depressed are more likely to;

- a. Live in poor housing in run down areas.
- b. Be unmarried or married but estranged leading to a feeling of isolation.
- c. Have two or more children under 14 years (the percentage increases for mother's of children under 5 years).
- d. Be unemployed, or work at home. Employment outside home is often seen as protective against depression.

Three Main Reasons Why People Get Depressed Are;

- 1. Biological & physiological reasons e.g. a hormone imbalance following pregnancy.**
- 2. Psychological factors e.g. relationship problems.**
- 3. Social / environmental problems e.g. being unhappy about where you live.**

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Helping You Feel Better

Explanations of the causes of depression influence how it is treated. If we support the idea that our biological and physiological makeup plays a part, then we in turn are more likely to consider treatments which influence these, e.g. drug treatments. In the case of depression, this will be antidepressants. On the other hand, if we believe that psychological and social factors influence depression, then we are more likely to be swayed by talking therapies or changing our environment in some way. However, we do not have to choose between these, we can try one, or other, or all three. Personally speaking, I would argue that the best option is to keep an open mind. Try and see what works for you because there is no right or wrong way through this but there will be things which will suit you better than others.

1. Drug Treatments

If antidepressants are something you wish to try, then your first port of call is your GP. Antidepressants aim to correct the chemical imbalance associated with depression. These do not work overnight, they take between two and four weeks of continuous use before you are likely to see any benefits. Unfortunately you cannot take them just when you feel particularly low, they need to be taken consistently in accordance with their prescribed dosage.

Antidepressants do sometimes cause some unpleasant side effects which affect some people. If you are considering taking antidepressants your doctor will be able to offer advice on this. Unfortunately sometimes the side effects are evident before the beneficial effects of the treatment kick in and so this leads people to sometimes stop taking them. However, often these side effects decrease over time as your body gets used to the treatment.

Also people often worry about becoming addicted or dependent, fearing that they will be taking their medication forever. If these are your concerns talk them through with your GP or psychiatrist, it may also help you to make a balanced decision if you weigh up the alternatives. Depressed people often have problems sleeping and whilst refusing antidepressants, use other means to self medicate through alcohol, illicit drugs, sleeping tablets etc. Is reliance on these non-prescribed mood altering substances any better?

People take antidepressants for varying amounts of time, sometimes years, but then they come off them often without any problems. What is important, is that when you decide to stop taking your medicine you do this slowly under the guidance of your GP or health professional and you do not just stop taking the medicine overnight.

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2. Psychological Therapies

Psychotherapists, counsellors, psychologists and some psychiatrists, use talking therapies to support people through depression. Which of these people you see will influence the type of approach they adopt in treatment. You can learn more about these on my website (www.karunatherapy.co.uk). What follows below are techniques taken from many different psychotherapy approaches.

I have tended to focus upon techniques which can easily be taught and readily picked up. However, in counselling and psychotherapy often the most important therapeutic influence is the therapy relationship. Whilst it would be ideal if everyone were able to have a professional to fulfil this role, this is not always possible for many reasons, or it may be helpful to talk to someone whilst you are waiting to see a professional. At the end of this section, under the heading relational therapy, I have also included some hints about areas which may be important for you to focus upon with a friend or relative, you may feel less lonely and isolated as a consequence.

3. Sociological Support

Many of the social factors listed above which can influence psychological well-being are raised and explored in psychotherapy. However, where people have little choice over their living arrangements, if it becomes evident that someone's physical environment, where and who they live with, is preventing the person from recovering, the professional may support the person by making a referral to an appropriate agency.

Three Things Can Be Tried To Help You Feel Better

- 1. Drug treatment e.g. antidepressant.**
- 2. Talking to a friend or therapist about what is upsetting you.**
- 3. Making changes to your living environment to try and improve it.**

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Psychotherapy Treatment

Cognitive Behaviour Treatment

Cognitive behaviour treatment, is one of literally hundreds of treatments and therapies. It has been widely researched and evidence demonstrates that it is effective in the treatment of some psychological problems in some people. It is particularly popular amongst health care practitioners because it offers people a number of accessible techniques or tools to try in order to help people feel better.

The basic tenet of cognitive behaviour treatment is that how we think, influences how we feel, which in turn influences how we behave. If we can change our thoughts, then we can similarly change our feelings and behaviour in relation to the thoughts we are having.

Cognitive Behaviour Treatment (CBT)

- *CBT is one type of therapy of which there are literally hundreds.*
- *What we think can influence what we feel, which in turn can influence how we behave.*
- *Change what you think and how you feel and behave may also change.*
- *Also you can change how you behave first and what you think and feel may change too.*

I offer the following techniques from cognitive behaviour theory with one reservation. If having tried these approaches you are still suffering, do not assume that either therapy is not for you, or that you have failed in some way. This is but one of hundreds of different therapies and I believe it is very much a case of what may suit one person, may not suit another. Similarly, many people need supporting in a number of ways not just one, therefore these tools will not work for everyone and may not work in isolation. It is really a matter of finding what suits you best.

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Try Some of the suggestions which follow but DO NOT BLAME YOU if they do not work. They do not work for everyone. Many people need more help than what a few techniques can provide.

How We Interpret Situations Influences How We Feel About Them

When we are depressed we tend to see the world in a different way, one coloured by our sadness. We are more likely to interpret events in ways that fit our low mood. The trouble is, it then becomes difficult to see the good things in life, and things we would once have seen as normal everyday hassles, become catastrophic due to the way we have interpreted them. Cognitive behaviour therapists argue that how we interpret a situation, influences how we feel about it and also how we subsequently behave. They use the phrase negative thinking. What they suggest does not involve you just saying nice things to yourself, or ignoring the bad things that happen but it does involve checking out what you are thinking and ensuring you're not jumping to conclusions.

What We Think Influences How We Feel & How We Behave.

Challenging Your Thoughts Can Sometimes Help You

Negative Thinking

Example 1.

Sally has arranged to see her friend Amy for lunch but Amy does not show up.

Negative Thoughts

"I knew I said something to offend her last time we met, I have blown it."

"She does not like me anymore."

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“I am not worth bothering with. I have no friends, never have had, no-one likes me, everyone always lets me down.”

How is this likely to make Sally feel and behave? What is the evidence Sally is basing her assumptions on? Is it sound evidence or is she jumping to conclusions without really knowing what has happened? How likely is it that she will contact Amy based on these thoughts?

**Jumping To Conclusions
Can Be Unhelpful
Because Often These
Conclusions Are Wrong**

Fact Finding

Now consider how Sally would feel if her thought processes involved fact finding. There are several ways Sally could embark on finding out why Amy did not meet her. She may follow a number of different theories.

“Perhaps there has been a mix up over times or dates.”

“Maybe she got held up.. she does not normally miss our appointments.”

“Perhaps her mother has been taken ill and she did not have time to phone.”

“She has been so busy maybe she just forgot. We did arrange it a while ago.”

How is Sally likely to feel now? Through searching through several theories she can find out the real reason and is more likely to reach a decision based on that, rather than on her automatic assumptions. In this second scenario, it is also more likely that Sally will telephone her friend and find out what happened. In phoning she can make a rational decision based on hard evidence rather than on her fantasy. Of course Sally’s fear may be real, Amy may not want to see Sally anymore. She may have offended her last time they met. This would obviously upset Sally but this would not necessarily mean that Sally was not liked by anyone for ever more and as Sally was already upset, in finding out the real reason, what has she got to lose?

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*Fact Finding Involves
Searching Through
Alternative Reasons Until
The Truth is Found*

Thoughts Influence Feelings Which Influence Behaviour

We can see in this first example, that how Sally thought about Amy not meeting her, influenced her feelings and could potentially influence her subsequent behaviour, reducing the likelihood of her telephoning Amy. Therefore, our thinking not only influences our feelings but it also influences how we will behave in the future. When Sally follows her thinking without checking this out, she is less likely to bother getting back in touch with Amy because she has assumed she does not want to be her friend. This feeling may generalise to other friends so that she contacts no-one. This increases her sense of isolation and loneliness. She may also seek out instances which confirm her theory that no-one likes her, so that she discounts all or part of future experiences which do not fit her belief that she is not likeable.

*We Tend To Seek Out
Instances Which Confirm
Our Beliefs Even If We
Have Not Checked Them*

Over-Generalising

Notice how in this first example, Sally begins with something specific, a friend not showing up and generalises her belief to all friends, past and present and all situations.

“I have no friends, never have had, no-one likes me, everyone always lets me down.”

These are common thought processes when we are depressed. However, it is important to check out these conclusions. Watch out for words such as always,

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never, everyone, no-one, everything, nothing. Situations usually are less clear and in most cases it is more likely to be sometimes, some people, some things.

Mind Reading

Example 2.

Sally receives a phone call from Jay. Instead of thinking;

“I do have Jay as a good friend, he has telephoned.”

Instead Sally discounts this idea because it does not fit with her theory that she is unlikeable. Instead she may say to herself;

“He only phoned because..”

“..he is being nice and is nice to everyone.”

“..he feels sorry for me.”

Mind reading the thoughts and feelings of other people without good evidence is likely only to lead us into trouble. Whilst these kind of thoughts are evident in everyone from time to time it is particularly important to stick to the facts when you are depressed because often your judgement is overshadowed by your low mood. Forcing yourself to look at alternative explanations can help you to reach a more reliable conclusion based on the facts.

***Look at Alternative
Explanations. This Can
Help You Reach More
Reliable Conclusions
Based on Facts.***

The Impact of Negative Automatic Thoughts

Example 3.

Before finding out the real reason for Amy not showing for their date, Sally began to beat herself up for offending Amy. The conversation goes around and around in her head. I said this, Amy said that, I should have said...It seems to turn in her head like an endless wheel.

“You are stupid you should not have said X to Amy.”

“Why can't you ever manage to say the right thing.”

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Again this will have a negative impact on how Sally views herself, her self esteem is already likely to be low and this self berating is only likely to worsen it.

Alternative Views

If Sally had not been down, would she have still said the same things to herself? How would her mum read the situation? Would she say that Sally was stupid or that she always said the wrong things? What about if a friend said this about themselves to you, would you see it the same way? Sometimes we have double standards, ones in which we are much harsher of our own mistakes than those of our friends.

Challenging Being Perfect

It is impossible to always get everything right and all the time. Depressed people often condemn themselves when something goes wrong. Sally blamed Amy's no show on herself, assuming it was her mistake. The impact of how she responds to this will be very different if she expects to be perfect, than if she is permissive of her mistakes. For example, saying;

"You are stupid you are always upsetting people."

This will have a more damaging effect on self esteem than if she can accept that we are human and human beings all can make mistakes sometimes. Don't we feel bad enough when we have made a mistake, do we really need a telling off as well?

**Do You Need A Telling
Off When You Have
Made A Mistake? Don't
You Feel Bad Enough
Already?**

Impact of Ruminating

When the inevitable happens and we do make a mistake, it is important to examine what the effect of dwelling on it has upon our feelings and subsequent behaviours. Again self berating is likely to be harmful not helpful. Few of us need reminding when we make a mistake. Therefore try and be forgiving and move on.

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Self Talk

Our self talk comprises of the things we say to ourselves habitually. The voice in our head which speaks a running commentary. There are several things to watch out for in this commentary the general aim is to be kinder to yourself.

a.) Do not ask yourself unhelpful questions

Some questions are simply unhelpful. "Why do I always get things wrong?" "Why can't I be like X?" "Why is everything so unfair?"

b.) Do not condemn yourself on the basis of one event

Shouting at the children on one occasion does not make you a bad mother. Failing to meet a deadline does not mean you will never be any good at work, or studying. Cognitive behaviour therapists call this type of thinking black and white because the individual can see no shades of grey. They are either good or bad, right or wrong, wonderful or awful. In reality this is seldom true, most people have both good and bad points. This is as true of people as it is of events and situations.

c.) Do remember the times when you succeed & celebrate them

There will be times when you coped well, passed the exam, said or did the right thing and so forth, recall these times too. Replay them at opportune moments like when you have just dropped a clanger.

d.) Do pay attention to the things which have gone right

It is all too easy to only see the bad events when we are depressed and assume that because one thing went wrong then the whole day was, or will be, disastrous. Try not to condemn the whole meal out because your main course was cold, when in reality you enjoyed the company, the change, the wine and so forth. Paying particular attention to things when they go right, directly challenges your negative thinking or self talk.

e.) Do not fortune tell

Depressed people often fortune tell, they say things like "I am not going to do "x" because I "know" it will be boring, unpleasant, etc. Try to stay open minded until you know something for sure.

f.) Experiencing some bad things is unavoidable

There will always be times when you experience something unpleasant. Seeing a disaster in the news, hearing from a friend about someone else's misfortune and so forth. However you do not have to dwell on these, focus instead on what you can do to make things better either for yourself, or others and remember you do not always

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have to watch the news, or listen to the sad songs, you can choose to do something cheerier instead or in addition.

g.) Believing something to be true does not make it true

Simply because you believe something to be true does not mean that it is true. Feeling inadequate does not mean that you are inadequate. Feeling that the whole world is against you does not mean that it is. Recall that when you are depressed this colours your whole perception, keep challenging your thoughts and feelings asking yourself how true they really are.

Problem Solving

Recall Sally blamed herself for Amy not showing, she said it was because of something she had said. If Sally were to discover this was true, instead of ruminating Sally can begin problem solving.

“Now what am I going to think and do about this?”

“This does not mean that I always say the wrong thing.”

“This does not mean the friendship is necessarily broken, I can apologise to Amy and if the friendship is sound we will stay friends. If she wants to give up on our relationship, I have to ask how good was it in the first place if it ended after my sharing my opinion with her?”

“I could telephone her, apologise and see if this was the reason why she did not meet me.”

“What is the worst that will happen if I do this?”

“She will say I do not want to see you again.”

“What impact will this have on me?”

“I will feel angry and upset but I feel upset anyway, perhaps I do not have much to lose.”

I often talk to people about weighing up the pros and cons in situations such as these. What are the advantages and disadvantages in performing the behaviour and in doing nothing? Write down, with the help of someone else if you can (their view is less likely to be biased) the benefits and costs. Base your behaviour on a rational decision based on this information not on automatic assumptions arrived at by negative thinking. Below is a list of things that you could try when faced with a dilemma.

1. Brain storm ways to solve the problem. Exclude nothing on the grounds that you feel it may not be feasible or sensible. The idea is to think creatively initially. Write anything and everything that comes into your head.

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2. From your list, weigh up the advantages and disadvantages to each. This will help you to find out which is the best option. Repeat this for each choice.
3. Pick the option which seems to have the most advantages. Sometimes you may have to pick the least worst alternative. If all seem to be equally good then pick one at random.
4. Put the solution to the test. Do not feel you have to do this all in one go. It may be easier to break it down into smaller more manageable steps. Write the individual steps down beginning with the easiest and ending with your target.
5. After you have completed your first steps consider how it went. Was the solution effective or do you need to try a different solution?
6. If at first you do not succeed try a different way. See it as learning, rather than you failing at the first hurdle.

Problem solving by looking at the advantages & disadvantages to your options can stop you from feeling stuck

Example 4.

Problem Solving & Setting Yourself Tasks

Your task may be to socialise more but you feel fearful at the thought. You could begin by identifying one friend to meet. Perhaps initially you could ask them for a cup of tea, making it just the two of you and for a short time (time can be constrained by appointments either side). Next perhaps suggest lunch. Once you have done this with one person you know well, consider inviting someone you know less well, or go out somewhere instead. The important thing to keep in mind is that you break down your task into small manageable steps, ones in which you are confident you will succeed. It is upon these small successes that you will rebuild your confidence. Never criticise yourself. Think of yourself as a vulnerable child venturing into the world - be firm but fair. This is only one example, any task that you are finding difficult can be broken down into more manageable steps.

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Breaking activities down into small steps means that you are more likely to complete them

Behaviour Therapy

Behaviour therapists argue that it is by performing tasks we can influence our thoughts and feelings. We all know that sometimes when we have had a fun time we can forget our problems for a while. Working on this principle try to;

- Schedule physical activity, walking, swimming, cycling etc into your week. Physical activity raises your body's own feel good chemicals. Take advantage of this.
- Increase productivity by completing tasks which you find rewarding. This may simply be sorting and dealing with the post, tidying a room, getting washed and dressed or it can be taking on something long term, like a vocational evening course.
- Increase the amount of time you spend doing pleasant tasks. What did you used to enjoy doing? Return to a hobby for example, painting, drawing, playing a musical instrument, taking part in a sport, reading or writing.
- Time management. Allow yourself time to sit quietly in your sadness but also force yourself to have time to do something physical or practical. You can even set yourself a timetable if you are someone who finds it difficult to keep going. Some people allow themselves the length of a cd, or television programme. Some set an alarm. Some have someone to visit.
- Routine is very important because it provides structure to your day. Try and have meals and bed time fixed at set times each day. If you are sleeping poorly still try and rest at set times. Allocate the times in-between to do something productive. This could be taking some exercise, doing some house work or gardening, or reading or writing.
- If you find yourself ruminating, try distracting yourself. If you can not do any tasks at this time try to;
 - Count and name all the things in the room which begin with the letter "R."
 - Describe what you can see, feel, hear in minute detail.
 - Hear the words to a song in your head and repeat them to yourself.
 - Recall a funny moment or one which gave you pleasure.

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- **Try To keep Busy By Doing Activities You Used To Enjoy.**
- **Build Routine Into Your Days.**
- **Avoid Over Thinking By Distracting Yourself.**

Relational Therapy

Whilst the above are all things you can try on your own, relational therapy requires another person, someone with whom you can relate, or talk to. Some therapists believe that the most effective element in counselling and psychotherapy is the relationship you have with your therapist. However, this does not mean that you need a therapist in order to get support, sometimes people have a close friend, a relative or colleague with whom they can offload some of their concerns. Of course this may not be sufficient for everyone but talking to someone while you are waiting to see a professional may make a big difference.

When considering who to talk to, there are some things to have in mind. This person needs to be;

- a.) Someone who you can trust to keep what you say to themselves.
- b.) Someone who you feel you can show your vulnerable side and not feel embarrassed, ashamed or awkward afterwards. It may be someone who has turned to you in the past.
- c.) Someone who will not judge you, tell you what you should do, or condemn you but just support you.
- d.) Someone who cares about your well-being irrespective of what you can or cannot do.
- e.) Someone who you feel will not become overwhelmed themselves but will take what you say in their stride and stay calm and level headed.

Often people come to therapy with some specific incident that is causing them distress. Below is a list of things that it may be helpful for you and your friend to think about when you tell them what is wrong.

Exploration

Go through the incident or incidents in as much detail as you can. Look at what has happened from every angle. Who was there? Who said what to whom and why?

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What do other people feel or think about it? How has this influenced you or other people? Are you behaving differently now?

If there is not a set event, talk about the thing that is bringing you down. Can you describe it even if you can not label it? How does it make you feel? What does it stop you doing? How is it affecting how you behave? When does it happen? With whom and in what situation? Can you determine when you first felt low? What was happening at that time?

Clarification

Ask your friend to keep clarifying what you are saying, even if they know that they have understood, it is important for YOU to know that they have understood. Get them to keep checking out what you are saying. Occasionally ask them to summarise in their own words what you have said.

Analyse & Interpret

Try and take yourself out of what has happened and look at it as if you were an onlooker. Look at why other people may be thinking, feeling, or behaving the way they are. Check out your thoughts, feelings and behaviours with your friend.

Encourage Expression of ALL feelings

There are two main emotions which are deemed socially unacceptable to express, particularly in public, these are sadness and anger. Hence, often we learn as children not to do either, or show either, in front of others. Nonetheless, it is important that if you can, you allow yourself the freedom to express all your emotions at safe times. This can be difficult not only because of how you feel about it but also how your friend feels too. So try to ignore the old messages which said "do not cry" "dry your eyes" "get a grip" "mind your tongue" "calm down" or whatever were your or your friend's particular stock phrases. If you can not express your emotions in front of your friend, then try and do it alone. I often use the analogy of us representing dustbins. Carrying a lot of rubbish around with us, namely old hurts and anger about events in our pasts. However, we all have a particular level which we can tolerate but then any more added after this, may cause the lid to blow and the rubbish to seep out. Think of crying yelling, moaning, releasing your emotions, as a way of tossing some of your rubbish out of your bin, you may feel lighter as a result.

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We are like walking dustbins. Through life we accumulate rubbish, old hurts and anger about events in our pasts. Crying, moaning yelling are ways to empty this rubbish and stop the lid blowing off our hin.

If you are grieving, your tears may come in waves, where sometimes you feel you can not contain your crying. Try and go with the feelings of loss at times when they arise and when you feel safe or okay to do so. Allowing yourself time to grieve means that you will have time when the sadness subsides a little for a while, or becomes less all consuming. Initially the spells of feeling okay will be short but gradually the waves of sadness become shorter and the spells of feeling okay last longer. If you find it difficult to stop crying and it has lasted more than an hour or so, you may need to distract yourself by doing something practical. Initially this can feel quite forced and you may want to just stay in your sadness but try now and again to force yourself to do something and try and make it something you used to enjoy.

When we are grieving it can feel like the tears will never stop. Try and allow yourself to let go to them when it feels safe. Grief tends to come in waves where you feel bad for a while but for a short time after crying you can feel emptier.

Improve Your Physical Well-Being With Your Diet

You are already under psychological stress. By nurturing your body through eating healthy meals at regular intervals, you can prevent putting your body under physical stress in addition. This can also stop you from becoming irritable and weary due to a poor or inconsistent diet. Eating breakfast is particularly important because

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people who are depressed find it difficult to get started on a morning. Breakfast can signal the beginning of your daytime routine. It is also helpful to reduce your intake of sugar and refined carbohydrates which people often crave when they are feeling low. Hence, try not to follow cravings for sweet snacks or comfort food but eat foods which contain complex carbohydrates. These can boost your mood for a longer period of time, these include eating things like bananas, jacket potatoes, brown pasta or rice or cereals. These boost your serotonin levels, a hormone important in regulating mood. Deficiencies in B vitamins, such as folic acid and vitamin B-12, can also sometimes trigger depression. You can increase your intake of B vitamins by eating more green vegetables, beans, chicken, and eggs. If you cannot manage to eat these then consider taking a vitamin B-complex supplement. Lastly, foods rich in omega-3, oily fish such as sardines, mackerel and salmon, play a role in stabilising mood.

Regulate Your Mood With Food

- *Eat breakfast.*
- *Have three meals a day.*
- *If you are eating less eat healthy snacks in-between.*
- *Minimize your intake of sugar & refined carbohydrate.*
- *Focus on complex carbohydrates.*
- *Boost your B vitamins.*
- *Eat foods rich in Omega-3 such as oily fish.*

Your mood can also be influenced by sunlight or daylight. Make sure you get outside every day if you can, this can help regulate your sleep-wake cycle. Also take on some form of relaxation activity such as yoga, meditation, self hypnosis or Tai Chi. Also note that whilst cannabis may make you feel relaxed, regular use, particularly in teenagers, can bring on a depressive episode. Lastly, there are also a number of groups for people suffering from depression. Some of these are on-line where you can chat, others you meet people face to face. Groups which are local to you, can be found by entering self help group into your research engine or by asking someone at your GP surgery.

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- *Go outside everyday. This can help regulate your sleep.*
- *Take up an activity just for relaxation e.g. yoga or Tai Chi.*
- *Attend a group for people who are suffering from depression or have similar problems.*

Suicide Risk

Some depressed people have a feeling they would rather not be around or exist. Whilst unpleasant, this is not usually life threatening. However, it is still important to take action when these feelings emerge or are persistent because a minority of people die through overdose. These people may have taken a cocktail of alcohol and drugs (licit or illegal) because they are experiencing unpleasant thoughts and want to blot them out. This may lead to accidental suicide. It is therefore important that if you begin to feel overwhelmed by your thoughts and feelings you do not stay alone with them. Whilst some people find it difficult to share how they are feeling at these times with family and friends, they may be able to offload to someone outside their normal circle of friends. Whoever you can turn to at these moments, do. A list of numbers of local organisations are outlined below, should you find it easier to turn to them.

If you have thoughts about ending your life and have begun to make plans about how you would carry this out, then you should talk to your GP or a mental health practitioner as a matter of urgency. I have worked alongside many people who have felt like this but have hung on and later been glad. Be one of those.

If you are feeling particularly desperate;

- a.) Is there anyone you could talk to now? A friend, a colleague a family member or someone from a voluntary professional organisation (see below).
- b.) Distract yourself, as much as possible, with tasks you used to enjoy. Paint, draw, listen to music, watch a favourite film, have a relaxing bath, burn incense or candles, potter in the garden, window shop, walk

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- the dog or look at photographs of happier times. Do anything which will keep you occupied for short periods of time.
- c.) Go outside of the house to somewhere busy if you can, this will be more distracting. Try and focus on other people and what they are doing.
 - d.) Phone me or a voluntary organisation. Never feel you are wasting someone's time.

Organisations

Alcoholics Anonymous	0113 245 4567
Cruse Bereavement	0113 234 4150
Eating Disorder Association	0845 634 1414
Harrogate Alcohol and Drugs Agency	01423 525 999
*Karuna Psychotherapy & Counselling	01423 502 622
Leeds Addiction Unit	0113 295 1340
Leeds Samaritans	0113 245 6789
Mind	01423 503 335
The Market Place, Leeds	0113 246 1659
Relate	01423 502 173
Samaritans	01423 525 352
Women's Counselling service	01423 527 615

*Whilst I cannot guarantee if you telephoned I would be available to talk to you, if you were able to leave a message, I would return your call as soon as I could. I would give you the opportunity to talk and we could sort out a plan together of how and where you can get further support in the future. I would not ask for payment from you for this initial contact and would never feel like you were wasting my time.

Jo. Ringrose