

The Adolescent Coping  
With Stress Course

LEADER MANUAL



For the TEAMS/POD study, 2003-2005  
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**the TEAMS/POD Intervention Team**  
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The Adolescent Coping  
With Stress Course  
LEADER MANUAL

**An Eight-Session Curriculum  
Developed for the Prevention of  
Unipolar Depression in Adolescents  
with an Increased Future Risk**

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## INTRODUCTION

The *Coping With Stress (CWS) Course* is a psycho-educational, cognitive-behavioral intervention for the prevention of unipolar depression in high school adolescents who have an increased risk of depression. It is not meant to be a treatment for active episodes of depression. It is designed to be offered either in a healthcare setting, or in schools. In the school setting it may be offered as a class during regular school hours, as an adjunct to a health class, or as an after-school therapy group or workshop.

The target population for this intervention are adolescents who already carry some known increased risk of depression, such as (a) having had a past episode of depression; (b) reporting persistent subdiagnostic dysphoria and/or other depressive symptoms (Clarke et al., 1995); (c) having depressed parents (Clarke et al., 2001). Garber (2006) summarizes other known risk factors for depression, many of which might identify potential target groups for this preventive intervention.

This is the second generation version of the Coping with Stress program. An earlier, 15-session version was employed in two trials (Clarke et al., 1995; Clarke et al., 2001) both of which found positive preventive effects. This current 8-session version was modified from the earlier program and was employed in our most recent, multi-site youth depression prevention project (Garber et al., 2009).

The current version of the *Coping With Stress Course* consists of eight 90-minute sessions, nominally delivered once per week depending on site capabilities and needs. The first few sessions provide an overview of depression, its relationship to stressful situations, and an introduction to other group members. Subsequent sessions focus on training adolescents in cognitive-restructuring skills and techniques for modifying irrational or negative self-statements and thoughts which are hypothesized to contribute to the development and maintenance of depressive disorder.

The general approach has been modified from cognitive therapy for depressed adults, developed by Beck and colleagues (Beck, Rush, Shaw, & Emery, 1979) and Ellis (Ellis & Harper, 1961). More directly, the *Coping with Stress Course* is a direct descendant of the *Adolescent Coping with Depression Course* (Clarke, Lewinsohn, & Hops, 1990), a cognitive-behavioral treatment for adolescent major depression and/or dysthymia, which is itself a modification of the adult *Coping With Depression Course* (Lewinsohn, et al., 1985). For a more complete description of the development of these latter two therapy approaches, see Lewinsohn, Clarke and Rohde (1994).

### Theoretical Orientation

The theoretical orientation of the Coping With Stress Course is best represented by the multifactorial model of depression proposed by Lewinsohn, Hoberman, Teri and Hautzinger (1985). This depression model is multi-factorial; that is, increased dysphoria/depression is presumed to be the result of multiple etiological elements acting either in concert or in combination, including negative cognitions, stressful events, predisposing vulnerabilities/risk factors (e.g., being female, a previous history of depression, having depressed parents), and

immunities to depression (e.g., high self-esteem, coping skills, high frequency of pleasant events and activities). The intervention is based on the hypothesis that teaching individuals new coping mechanisms and strengthening their repertoire of current coping techniques and strategies provides them with some measure of "immunity" against the development of affective disorders, even if they may have several risk factors. In terms of Lewinsohn et al.'s (1985) theory, the aim of the proposed intervention is to supplement these adolescents' immunities in an attempt to offset their known vulnerability for affective disorder. To take one therapy skill area for example, these adolescents are presumed to be depressed at least in part because they may be predisposed to thinking depressogenic negative/irrational cognitions (Beck, et al., 1979). The interventions train these adolescents in cognitive-restructuring skills to permit them to reduce these negative cognitions, and thereby overcome their depression.

### Research Conducted With this Intervention

The original trial of this program (Clarke, Hawkins, Murphy, Sheeber, Lewinsohn & Seeley, 1995) consisted of a controlled outcome trial of the 15-session Coping With Stress Course with high school adolescents at risk for future depressive disorder by virtue of having elevated depressive symptomatology. Subjects were selected with a two-stage case-finding procedure. The Center for Epidemiological Studies - Depression Scale (CES-D) was administered to 1,652 adolescents enrolled in health classes; adolescents with elevated CES-D scores were interviewed with the Children's Schedule for Affective Disorders and Schizophrenia (K-SADS). Subjects with current affective diagnoses were referred to non-experimental services. The remaining 150 consenting subjects were considered at-risk for future depression, and randomized to either (a) a 15-session cognitive group prevention intervention; or (b) an "usual care" control condition. Subjects were re-assessed for DSM-III-R diagnostic status at post-intervention, and 6, 12, and 30-months post-intervention. Survival analyses indicated a significant 12 month advantage for the prevention program, with affective disorder total incidence rates of 14.5% for the active intervention, versus 25.7% for the control condition. No differences were detected for non-affective disorders across the study period.

We subsequently conducted a second randomized trial (Clarke et al., 2001) with adolescents reporting subsyndromal levels of depressive symptoms who were offspring of parents receiving treatment for depression in a Health Maintenance Organization (HMO). Potential participants were identified by reviewing the HMO pharmacy database and behavioral health records. Adults in treatment for depression who had children between 13- and 18-years old were sent letters signed by their health care providers informing them about the study. Interested parents were then interviewed to confirm their diagnosis of a mood disorder, and the children were evaluated with regard to their history and current level of depressive symptoms and disorders. A "demoralized" group was identified that had current subdiagnostic levels of depressive symptoms (i.e., a CES-D score >24) or a previous episode of major depression. These 123 adolescents were randomly assigned to either a "usual care" (UC) control condition or the 15-session, group depression prevention program, the 15-session Adolescent Coping with Stress Course. Survival analyses revealed a significant advantage for the CBP group (9.3%) versus the usual care control group (28.8%) in the cumulative incidence of major depression at the 12-month follow-up. The odds ratio of depression at 12 months was 5.64 (UC vs. CBP, 95%

CI=1.56 - 20.39) when adjusted for gender, age, CES-D score, and previous depression history (the latter two were the criteria for inclusion).

Our most recent study was a multicenter randomized controlled trial conducted in 4 US cities (Garber et al., 2009). We enrolled 316 adolescent ages 13-17 who were offspring of parents with current or prior depressive disorders were recruited. The adolescents themselves had a past history of depression, current elevated but subdiagnostic depressive symptoms, or both. Youth were randomly assigned to the 8-session CWS prevention program (followed by 6 monthly continuation sessions) or assigned to receive usual care alone. Through the post-continuation session follow-up (median of 9 months post-enrollment), the rate of incident depressive episodes were significantly lower for those in the CWS prevention program than for those in usual care (21.4% vs 32.7%). Adolescents in the CWS prevention program also showed significantly greater improvement in self-reported depressive symptoms than those in usual care ( $P = .03$ ). Current parental depression at baseline moderated intervention effects, such that among adolescents whose parents were not depressed at baseline, the prevention program was more effective in preventing onset of depression than usual care (11.7% vs 40.5%), whereas for adolescents with a currently depressed parent, the CB prevention program was not more effective than usual care in preventing incident depression (31.2% vs 24.3%).

## General Leader Instructions for Course Sessions

This section provides a detailed outline of the 8 sessions in the POD-TEAMS version of the Adolescent Coping with Stress Course. The sessions are highly structured and follow a rigorous agenda. In a research study, it is essential for group leaders to become familiar with the format, content, and pace of the course before attempting to conduct the sessions. The first step is to read through all of the sessions to develop a grasp of the various content areas and the progression of the material.

Several different methods of instruction are employed in the course to help the adolescents learn new material: lectures by the group leader, discussions, demonstration activities, group activities, team activities, role-playing exercises, and practice assignments. The following format conventions indicate the method of presentation:

**The text that is meant to be read out loud as a lecture is indented and appears in bold type. Leaders are welcome to modify the lectures, examples, and vary the exercises at their own discretion as they become more comfortable with the various content areas. HOWEVER ... please retain the major points made in the narrative.**

Leader: This tag is used to identify directions for the group leader. The text is set in regular type.

## **Group Activity**

Large headings mark the beginning of the various activities. We encourage leaders to create even more group activities than are explicitly described in the manual. For example, some of the lecture sections could be revised to make a group learning experience (e.g., divide up into small groups to generate lists of possible causes of depression; in Session 2).

**WORKBOOK**

This is a signal that adolescents need to turn to a specific page in their workbooks.

This box appears at the beginning of each session as a reminder to bring materials:

Materials needed for this session:

Text for the group leader to write on the blackboard is highlighted in this manner:

### **BLACKBOARD or FLIPCHART**

### **FLIPCHART**

We recommend writing all standardized blackboard text on a flip chart prior to each session, and using this instead of taking the time to write on the blackboard. Advantages of this are: (a) saves the time spent writing text and figures on the board; this is particularly important in sessions which are very busy, such as Session 8; (b) the class is unsupervised less often, and remains engaged with the leader more consistently; (c) the flipchart can be used over and over; and (d) colors, graphics and be used more easily to make more interesting displays.

The group leader should always arrive at least 15 minutes early to set up the room and write the agenda on the blackboard. If there is sufficient time, the leader should begin the session with a brief oral review of the agenda. It may be necessary to skip this review for some of the sessions in which there is an inordinate amount of material to cover and time is short.

### LEADER FREEDOM TO REVISE MATERIAL

This is always a difficult issue. For our research studies, our group leaders are asked to follow the general rules below. However, clinicians elsewhere may choose to use any or all of this intervention as they wish.

1. Retain the basic terms, teaching points as described in the manual.
2. Changes which encourage more student interaction are most desirable (e.g., group exercises; role-plays).
3. New exercises may be added if they provide an alternative method for teaching one or more of the skills already in the prevention course.
4. Remember, this is an only depression prevention intervention, and is not meant to provide skills or therapy for every problem these teens have.
5. Please record changes in your leader manuals, especially if the revision was well-received. We welcome feedback on revisions.

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## **Selecting and Training Group Leaders**

We have trained numerous instructors to lead groups for adolescents and parents during the several outcome studies that we have conducted. Because our program was designed as a research investigation, we have developed strict recruitment criteria and training goals for our staff. Some of these criteria may not be appropriate in other settings such as clinics, private practices, and schools. Nonetheless, we summarize these criteria here to identify significant training issues that should be considered by other mental health professionals who are using these materials. We believe that the success of our treatment program is due in part to the effort we have put into carefully selecting and training instructors, and that care providers in other settings will benefit from our experience.

### **Qualifications for Group Leaders**

Group leaders must have a certain amount of relevant experience and training before attempting to offer the course. The purpose of specifying the minimum qualifications that we believe are necessary to lead groups is to ensure that the course is conducted in a therapeutically responsible and effective manner. A broad range of mental health professionals would have the necessary skills, assuming they have had some prior training in the assessment and treatment of mood disorders in youth or adults. The list includes psychologists, psychiatrists, psychiatric social workers, psychiatric nurse practitioners, and counselors. Individuals who are not adequately trained for independent practice (e.g., students, and teachers who do not have a mental health background) should only conduct the course under the supervision of a licensed mental health professional.

Adolescents enrolled in the program often present many additional challenges beyond those addressed in the Leader's Manual. Many issues that are critical to the success of the intervention are not covered, such as suicide risk assessment, group dynamics, and normal adolescent development. It is important for group leaders to have supervised training and/or experience in the following areas:

1. Crisis assessment and intervention, especially with suicidal and substance-abusive youth.
2. Assessment of mood and non-mood disorders (e.g., DSM). Group leaders must be able to identify adolescents who have additional problems that are not addressed in this prevention program and may require a referral to other services.
3. Basic or intermediate training in any of the various cognitive-behavioral therapies, such as cognitive therapy, self-control therapy, rational-emotive therapy, dialectical behavior therapy, and/or acceptance and commitment therapy.
4. Experience leading psychotherapeutic groups, especially with adolescents and/or children.
5. Familiarity with basic relaxation techniques.
6. Experience with behavioral techniques to manage conduct problems in adolescents and/or children.
7. A developmental perspective regarding the cognitive and emotional changes that take place during adolescence—particularly for adolescents 12 to 18 years old.

## **Training Requirements**

The Leader's Manual is very detailed and provides scripted lesson plans for each session. The Youth Workbook is also very explicit and is well integrated with the lesson plans in the Leader's Manual. Nonetheless, therapists should not attempt to lead the course without some practice and/or supervised training. Because so much material is covered in each session, leaders need to acquire hands-on familiarity with the manual in order to complete all of the lectures, tasks, and exercises in the time allowed. The first time leaders conduct the course, they are often so overwhelmed by the material in the lesson plans that they find it difficult to track both the content of the course as well as the important clinical and process issues that come up during the sessions.

## **Recommended Training Models**

Of the several different models we have used to train new therapists, two approaches seem to work best. In the first model, a trainee therapist is paired with an experienced leader as a co-leader of the course. In the beginning, the experienced leader takes more responsibility for running the sessions, while the trainee therapist primarily observes. As the course progresses, however, the responsibility for conducting each session shifts as the trainee begins to take an increasingly active role. After each session, the experienced leader reviews the performance of the trainee and discusses possible solutions to the different clinical issues encountered during the session. Sometimes the sessions are videotaped so that the performance of the trainee can be examined in more detail. At the conclusion of the course, the trainee generally is ready to lead the course independently, provided that some ongoing supervision is available.

In the second training model, a “mock” course is conducted. An experienced therapist leads the group, and up to eight trainees assume the roles of adolescent participants. Each session is conducted in a start-stop manner to allow some additional time to review the rationale for specific aspects of the course, and to discuss problems or issues that commonly arise at different places in the sessions. After the first two or three sessions have been conducted in this manner by the experienced therapist, the trainees take turns running the group. Each trainee leads a minimum of two or more entire sessions.

The experienced leader continues to interrupt sessions when necessary to discuss key issues or to clarify certain points. Group feedback is provided to trainee leaders after each session; the purpose of this feedback is to identify positive aspects of the trainee's performance and aspects that could be improved.

We have found that there are advantages and disadvantages to each of these training methods. The co-leader method offers direct experience with adolescent participants and gives each trainee an opportunity to lead more supervised sessions. However, the quality of the training is almost entirely dependent on the ability of the experienced therapist who supervises the sessions. If the experienced leader misunderstands or misapplies aspects of the intervention, it is likely that the trainee will use the same faulty methods. Another disadvantage to this training model is that it only permits the training of one new leader at a time.

In contrast, the mock group has regular, in-session discussions of the protocol, which makes misinterpretations of the intervention less likely. The larger number of trainees also means there is more variety in the opinions and solutions that are offered during discussions of problem issues. Another obvious advantage to this model is that several new leaders can be trained at one time. The major drawback to this approach is that it does not provide any experience working with adolescent participants.

From the discussion above, it seems evident that the ideal situation would be to have trainees begin by participating in a mock therapy group and then co-lead a course with an experienced leader (that is, the second training method followed by the first). In reality, trainees will probably be exposed to only one of these approaches. Thus, it is important to provide regular (weekly or bi-weekly) supervision for new therapists to discuss the therapeutic issues that are not explicitly addressed in the Leader's Manual.

One other training resource exists. Paul Rohde and colleagues have recently produced a training DVD (available after August 2009 at [www.abspress.com](http://www.abspress.com)) for the CBT group treatment program (Clarke et al., 1990) from which our prevention group was modified. The DVD provides clips of group sessions, with expert commentary on the key sections of the program. While the treatment program covers a larger set of skills and techniques than are in our prevention program, the DVD demonstrates group implementation of the cognitive restructuring elements that are central to the CWS depression prevention program. No one yet knows whether or not such a training DVD improves therapist readiness to lead groups, but this is a resource for persons who would like to see a group CBT intervention for adolescent depression in progress.

### **How Important Is Leader Training?**

How important is leader training? Must candidate group leaders obtain formal training, or are the Manual and Workbook materials sufficiently explicit to permit otherwise experienced therapists to launch a program without additional training? A recent review of a similar youth depression prevention program (the Penn program) found that their intervention's success varied considerably across studies and settings. The researchers concluded that this variable success may be at least partially related to the level of training and supervision of group leaders (Gillham et al., 2007). The developers of the Penn program recommend group leaders receive high quality training and supervision in order to obtain positive outcomes. While not specifically studied for the other programs, it is reasonable to assume that this same recommendation is advisable across all the other prevention programs.

### **Is it Necessary to Follow the Manual Verbatim?**

When a therapist closely follows the structure and content of the intervention as presented in the manual this is referred to as high therapist fidelity. Beyond initial training there is some evidence suggesting that ongoing therapist fidelity to a prevention program is associated with better outcomes (Gillham et al., 2006). We cannot state with confidence that all elements of the prevention program are equally essential, or that insertion of 'foreign' elements may be detrimental. However, our best information to date is that therapists should strive to deliver the

content of the program as laid out in the manual, perhaps allowing modest paraphrasing that still retains the essential concepts. This is often a difficult implementation barrier, as mental health and allied professionals have a long history of personalizing their therapy approach. This often resulting in intervention sessions with blended, eclectic content culled from many different approaches.

We do acknowledge that it may also be possible to adhere to the manual too robotically, such that clinical responsiveness may be impaired. This is particularly a risk with manuals such as ours which are highly scripted and detailed (Clarke & Lewinsohn, 1995). Novice therapists who read the scripts verbatim certainly have high fidelity but may come off as wooden and unresponsive. It is often helpful the first few times someone uses these programs to prepare for the session by highlighting key phrases or words, and/or write your own examples in the margins. Some concepts may not translate across languages and/or cultures, and so therapists may need to paraphrase or substitute local terms or examples to facilitate a better cultural fit. The key is to convey the main concepts rather than the verbatim text. In our manuals the script is provided as a model or example; therapists are encouraged to paraphrase and thus make their delivery more genuine and relevant. Nonetheless, this customization of the program content should still retain the key concepts as these are assumed to be the curative elements of the program.

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**Session 1**  
**GETTING TO KNOW EACH OTHER (90 min.)**

Materials needed for this session:

1. Workbooks for all adolescents.
2. Extra pens and pencils.
3. Therapist's personal sharing activity for demonstration (*OR, a teen who has agreed in advance to do so; see page 12 for details*)

Leader: Write the Agenda on the blackboard at the beginning of each class session.

**AGENDA**

- I. GET-ACQUAINTED ACTIVITY (30 min.)
- II. WHAT IS STRESS? (15 min)
- III. WHAT IS DEPRESSION? (15 min)
- IV. PERSONAL GOALS (5 min.)
- V. MOOD DIARY (10 min.)
- VI. PRACTICE ASSIGNMENT (5 min.)
- V. SHARING ACTIVITY (10 min.)

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**I. GET-ACQUAINTED ACTIVITY (30 min.)**

**Welcome! I am very happy to see you all here. Before we start, I want to quickly review what this group is all about. Many of you have heard this before, but I just want to make certain we all hear it.**

- **We are going to have 8 weekly meetings with the goal of helping you all to learn skills that will help you deal with stress.**
- **This will be followed by 6 monthly sessions where we'll check-in, and learn some different skills to handle stress.**
- **In each weekly session we will learn skills that build on the previous week's skills, so it is important for you to come to all of the sessions.**
- **If for some reason you are unable to attend one of the sessions, I will be contacting you to help you "catch up," so that you will be prepared for the next week.**

- **If you ever have any questions or concerns during the course of the group, you can also contact me. You/your parents have my contact information from our pre-group meeting.**

**Because this is the first day of this group, we're going to spend some time getting to know each other. Each one of you is going to describe yourself to someone, and then listen to that person describe him- or herself. Here are some questions you can use to learn more about each other:**

BLACKBOARD or FLIPCHART

**Interview Questions**

1. Where are you from?
2. What do you like to do in your spare time?
3. What do you do well? What are you good at?
4. Who are the important people in your life? Pets?
5. What's your favorite music? Movie? Book?

WORKBOOK

These questions are on page 1.2, with room to write information.

Leader: The goal in this exercise is for adolescents to learn more about each other; the adolescents will introduce one another to the rest of the class. Model this process by briefly introducing yourself (less than 1 minute), touching on as many of the interview questions written on the blackboard as possible.

**Now you and your partner are going to *TAKE TURNS INTERVIEWING EACH OTHER*. Remember to use the questions on the board and on Page 1.2. When you have finished, you will introduce your partner to the rest of the group.**

**Next session we will go over several guidelines for the group, but right now the one that is most important is confidentiality: please do not discuss personal information from these group sessions with people who aren't part of the group (your parents, friends, brothers/sisters).**

Pair off adolescents. Give the first teen in each pair 5 minutes to interview their partner, writing answers in the spaces provided on page 1.2. Warn them 1 minute before time is up. Teens then switch roles, with the second teen interviewing the first adolescent. This should take a total of 10 minutes, leaving 15 minutes for introductions. As the adolescents participate in the exercise, make sure you reinforce and praise them (particularly the shy and withdrawn adolescents) for their use of the interview questions. If there is an unpaired youth, either create a triad or therapist should interview and introduce the “left-over” teen.

**Now you and your partner are going to *INTRODUCE EACH OTHER*. Remember to use the questions on the board. Because there are so many of you, try to keep your introductions short, about 1 minute long.**

Leader: Have adolescents introduce their partners to the rest of the class.

---

## **II. WHAT IS STRESS? (15 min.)**

**This group is meant to give you skills to deal with stress, and protect yourself from stress leading to more serious problems later: depression, as well as anger, tension or nervousness. But, let's start out by talking a little about stress.**



**WHAT IS STRESS? WHAT ARE SOME EXAMPLES? HOW MIGHT YOU FEEL IF YOU WERE EXPERIENCING STRESS? HOW MIGHT YOU ACT (BEHAVE)?**

Leader: Lead a BRIEF, 5-minute discussion on stress, different types, and how stress is individual; what is stressful for one person is not for another. Point this out when they generate examples.

**I'm going to read a short description to you. While you listen to this example, I want you to think about two things. First, what kinds of stressors are happening in this person's life? And, second, does his reaction seem believable?**

***EXAMPLE:* Mark was a 16-year-old sophomore. His father had been depressed off and on for several years, and had always talked about how he was a failure and would never be successful at anything. Mark had always been an average student, getting mostly B's and a few C's. Then, one report card Mark got mostly C's, and one D – clearly not as good as usual, but also not a complete disaster. However, after that Mark began to believe that he was doomed to be a failure just like his father, and that he would never be successful at anything. Over the next few months, he started withdrawing from his friends and spending more time alone in his room, thinking that no one liked him or wanted to spend time with him. His friends tried calling him, but after a while they just stopped trying to get him to go out, because he would always turn them down. He began feeling down, gloomy, and tired. He also found that he had difficulty concentrating, and his grades got even worse. He started skipping school several days a week, and he spent the days alone, unhappy and confused, thinking things like “I must be really stupid!”**



**WHAT KINDS OF STRESSORS WERE HAPPENING IN MARK'S LIFE?**

*A: Depressed parent, bad grades and not seeing friends will be listed most often. Mark's withdrawal might also be identified as one of the stressors. If appropriate, point out that each small negative belief led to withdrawal, which led to more negative thoughts, which led to ... In essence, the negative spiral on workbook page 1.4.*



**DOES THIS SITUATION SEEM REAL TO YOU? COULD YOU SEE THIS HAPPENING TO SOMEONE YOU KNOW?**

**In this example, Mark became depressed. Feeling depressed is not abnormal or crazy. In fact, it is one of the most common problems in people of all ages. This means that people try to cope with the stressors and problems in their lives, but sometimes they are overwhelmed by them and become down.**

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### **III. WHAT IS DEPRESSION? (20 min.)**

**Experiencing stress and feeling “stressed out” is very common. However, when stress is too great, or lasts too long, one reaction could be feeling depressed (as in the Mark example).**

**Now, feeling sad once in a while is normal. Everyone feels this way sometimes. Because of this, it's hard to know when feeling depressed and down is just a passing phase, and when it is more serious.**



**WHAT IS SERIOUS DEPRESSION? DO YOU KNOW ANYONE WHO HAS BEEN SERIOUSLY DEPRESSED? HOW IS IT DIFFERENT FROM “EVERYDAY” DEPRESSION?**

Leader: write answers on the board.



**WHAT DO YOU CALL IT WHEN YOU ARE IN A SAD MOOD? WHAT'S YOUR WORD FOR IT?**

Leader: write answers on the board. You are looking for words that the group can agree on that stand for serious depression, as well as subsyndromal depression or the “blues.”

Examples include sad, blue, down, crummy, and tearful.

**We think that depression is serious when three things happen:**

Leader: these symptoms are also on Workbook page 1.3

Serious Depression

1. Sadness lasts more than two weeks (and typically longer).
2. Sadness *or irritability* is the most common feeling.
3. Changes in sleep, eating and energy level about the same time, usually too much or too little of each of these



**WHAT DO YOU THINK *CAUSES* MOST DEPRESSION? WHAT THINGS SEEM TO “TRIGGER” THE FEELING OF SADNESS?**

Leader: Try to elicit youth ideas before listing these. Write the groups' answers on the board. Be sure to include most of the following:

1. Stressful situations which don't seem to have any clear solution.
2. Losing contact with someone who is close to you (e.g., deaths, divorce, moving away, breaking up, fights with friends and family, graduating).
3. Thinking a lot of negative thoughts about yourself, your situation, and your family.
4. Having no one to confide in; not having good friends.
5. Being around other depressed people.
6. Inherited tendencies (similar to the way that your eye and hair color is inherited).
7. Changes in brain chemistry

**You would all make good researchers, since those are basically the main theories that scientists are studying.**

**In many cases, depression is the result of several different “causes” all happening at about the same time. For example, depression might develop as a result of several stressful situations followed by fighting with parents, having a depressed parent, in combination with breaking up with a girlfriend or boyfriend. Any one of these things might be enough to trigger depression in some cases, but often it may take several different situations happening one after another to trigger depression.**

**The Depression Spiral**

WORKBOOK

Ask adolescents to turn to Workbook page 1.4 (*remark that we'll come back to page 1.1 later*).

**The spiral figure on workbook page 1.4 shows how depression can start small, with a few stressful situations, maybe withdrawing just a bit from friends, but then these changes in mood and behavior (withdrawing) may lead people to feel even sadder, and think unhappy thoughts about themselves and their situation. This can lead to even greater sadness, and so on down the spiral.**

**? CAN YOU ALL SEE HOW EACH SMALL CHANGE IN MOOD, WHAT YOU THINK ABOUT YOURSELF, AND WHAT YOU DO (OR USUALLY STOP DOING, LIKE NOT BEING WITH FRIENDS) CAN LEAD TO WORSENING DEPRESSION (STARTING A DEPRESSION SPIRAL)?**

**? DOES THIS SEEM FAMILIAR TO ANY OF YOU? HAVE YOU EVER KNOWN SOMEONE WHO WAS CAUGHT IN A DEPRESSION SPIRAL?**

**Also on page 1.4 is a triangle figure – it shows that your mood (sadness, anger, irritable) and thoughts and behavior (your actions) are all related to one another. Small or big changes in any one of these can result in changes in the other two.**

**? CAN ANYONE THINK OF AN EXAMPLE OF HOW CHANGES IN WHAT YOU DO (YOUR BEHAVIORS) CAN RESULT IN CHANGES IN MOOD?**

**? HOW ABOUT AN EXAMPLE OF HOW CHANGES IN THINKING COULD RESULT IN CHANGES IN MOOD? CHANGES IN BEHAVIOR?**

**These two figures show how depression can start small, and “snowball” until it is much bigger and harder to control.**

**However, it is also possible for people to stop the downward spiral early on and either do more fun activities, or change their negative thinking – and this can interrupt the depression spiral BEFORE it gets out of control.**

**THIS IS THE MAIN POINT OF THIS GROUP: we will be teaching you how to examine your thinking, *and change your thoughts if you want to*, so that you can keep yourself from falling into a depression spiral. These same skills are also useful for dealing with anger, nervousness, guilt, and other negative emotions.**

**You will learn how to examine your beliefs, and ask yourself if your thoughts are too negative or not completely true. Sometimes our thoughts are true, but sometimes each of**

us has thoughts that are too negative and too hard on ourselves – like “*I’m a failure at EVERYTHING I do.*” When those thoughts happen, you will have the skills to turn them around ... and interrupt any depressive spiral. This will include:

1. Learning to test whether your negative thoughts about yourself and your situation are accurate, or whether they may not be as completely true as they seem at first. This may include negative thoughts about stress in your family, at school or with friends.
2. If these thoughts are unrealistic, then you will learn how to substitute more realistic and accurate thoughts about yourself and your situation. These thoughts will often be more positive.

This may seem an unusual way to help you deal with stress, but there is a connection.



**CAN ANYONE THINK OF A CONNECTION BETWEEN CHANGING YOUR THINKING AND CONTROLLING YOUR REACTIONS TO STRESS? HOW COULD MARK (FROM THE EXAMPLE) HAVE CHANGED HIS THINKING?**

*A: Refer teens to the figures on Workbook page 1.4: particularly the triangle connecting thoughts, feelings and behavior, and the positive spiral.*

*When you change your negative thoughts, or interpretations, about stressful situations, you will feel less upset. The stress has not changed, but your reaction has. Of course, the stressful situation may still need some work, but you feel less blue, less angry, more willing to connect with people, etc.. Remember the positive spiral.*

**Look at the second spiral on page 1.4. This is the reverse of the negative spiral and is called a “positive spiral.” Can you see how small positive changes in thinking and behavior lead to small improvements in mood? And these lead to even more positive thinking, more fun behaviors, and even better mood. This is what you’ll have the ability to do by the end of the group.**

## Depression in Families

**A bit ago we came up with a list of things that might cause depression. One of these was having at least one parent who is coping with feelings of sadness and depression.**



**WHY MIGHT HAVING A DEPRESSED PARENT MAKE A TEENAGER OR CHILD MORE LIKELY TO BECOME DEPRESSED THEMSELVES?**

Leader: Encourage discussion of inherited, modeling (social learning), and stressful situation aspects of having a depressed family member. Conclude with the following:

**Right now, we can't say exactly why having a depressed parent creates a risk of depression in other family members. None of these theories have been studied enough to be certain about. Many experts believe that a combination of all these things increases your risk.**

### AM I “DOOMED” TO BE DEPRESSED?

**When people hear that part of the risk for depression may be inherited, they often say, “Why bother doing anything to help myself? Aren't I going to become depressed whether or not I try anything new?”**

**This is a common belief, but this is probably not correct. Many people believe that if a characteristic (like depression) is part or totally a result of inherited tendencies, that it is inevitable and nothing can be done to avoid it. But that isn't necessarily true. For example, even if one twin becomes depressed, there is only about a 25% chance that their identical twin (who has exactly the same genes) will also become depressed. This suggests that there are ways to reduce an inherited risk of depression.**

Leader: You might also want to point out that the same logic holds for patterns that are modeled or learned. “*Just because your parents have learned things that lead them to be depressed (or model beliefs and behaviors that might lead the people around them to become depressed) does not mean that you have to fall prey to the same patterns or beliefs.*”

**Here are some examples where it is possible to do something to overcome an inherited risk of a bad outcome.**

### Bad Teeth

- 1. Part of the risk of “bad teeth” can be inherited. You can have an increased risk for getting cavities.**
- 2. However, you are not “doomed” to have cavities. By brushing your teeth and flossing regularly, you can reduce this risk to an acceptably low level.**
- 3. You may even have as few cavities as people who inherited “good” teeth, but you will have to work harder to reduce your risk, by changing your BEHAVIOR.**

**In this group, you will learn that more realistic thinking is a proven way to overcome depression. We've done this before several times with other groups of teenagers and have found that it really works!**

Leader: use the next example (skin cancer) only if adolescents don't appear to understand the concept of reducing risk through changing behavior. Refer back to the Triangle (p. 1.4) if relevant.

**Skin Cancer Example (*Optional, if youth don't grasp the concept*):**

- 1. Some people are born with the tendency to burn very easily from too much sun. This is mostly inherited.**
- 2. Because they burn so easily, they are at increased risk for getting skin cancer.**
- 3. What changes in their BEHAVIOR could “easy-burning” people do to reduce their risk?**

Leader: Write answers on the board. Look for the following suggestions: wear sun screen; stay out of the sun; get tanned gradually; wear a hat with a wide brim.



**DO THESE EXAMPLES MAKE YOU THINK DIFFERENTLY ABOUT DEPRESSION, PARTICULARLY IF IT IS IN THE FAMILY?**



**HOW COULD YOUR RISK FOR DEPRESSION BE REDUCED? WHAT CHANGES COULD YOU MAKE?**

Leader: Try to link suggested changes that teens could make to skill training sections of the group. For skeptical individuals, ask them if they are willing to test it out “scientifically” by learning and using the skills and seeing if their depression levels go down.

**We believe that by using the skills taught in this group, you CAN reduce your depression levels, and prevent it from recurring in the future. What do you think?**

**In this group, we are going to focus on how YOU can deal better with many parts of your life, even if that seems impossible right now. You can learn to manage how you feel, and how you react to the stressful things in your life.**

**A lot of people believe they have no control over their problems, and how they feel. In this group you will learn SKILLS that you can use to change the way you react to stress—how you think about it and what you do about it. With these skills YOU CAN CHANGE THE WAY YOU FEEL AND HOW WELL YOU COPE.”**

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**IV. PERSONAL GOALS (5 min.)**

As we discussed a few minutes ago, our goal for you is to learn how to cope with stress in your lives, manage feelings of sadness and irritability, and avoid future depression. However, we also hope each of you has a personal goal for this group.



**DOES ANYONE HAVE A PERSONAL GOAL FOR THIS GROUP THEY'D LIKE TO SHARE?**

Leader: if no one shares, say “*That's OK. We'll come back to this once you have had a chance to think about it.*” There is a brief revisit of this topic in Session 3.

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## V. MOOD DIARY (10 min.)

WORKBOOK

Ask adolescents to turn to Workbook page 1.1.

In this class, we're going to keep track of how we feel by filling out a Mood Diary. The Mood Diary uses a **SEVEN-POINT SCALE**. A rating of 7 is the **BEST YOU HAVE EVER FELT IN YOUR LIFE**. Write a description of this time in your Mood Diary to remind you of what a 7 rating feels like.

**Remember:** this kind of feeling happens pretty rarely. Most regular “good” days should get ratings of 5.5 or maybe a 6. An average day would get a rating of 4, because that number is right in the middle of the 7-point scale.

Now think of the **WORST YOU HAVE EVER FELT**. This equals a rating of 1. Write a short description of this situation on your Mood Diary to remind you of this moment.

Leader: Try to determine whether the adolescents know how to use a seven-point scale. If they seem confused, go through several more examples; e.g., How warm is it at the North Pole? How warm is it in the desert? How warm is it in Oregon on the average? How warm is it today (more or less than the average?) Keep doing this until all adolescents know how to use the scale.

Now compare how you feel today with the **BEST** and **WORST** feelings you just wrote down. Give today's feeling a number, and write the number in the correct box on page 1.1 in your workbook. Then circle the same number above the box.

Leader: Model this process with a personal example.

Every day you should compare how you feel with the worst and best moments of your life and with how you felt the day before, too. Then write a number in the box for that day. **IT'S IMPORTANT TO DO THIS AT THE SAME TIME EVERY DAY.** Usually, the end of the day is best, because then you can look at the entire day, and average how you felt.

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## VI. PRACTICE ASSIGNMENT (5 min.)



Ask adolescents to turn to the practice assignment on page 1.5

Notice that the practice assignment for this session is described on page 1.5.

1. **Keep track of how you feel by filling out your Mood Diary (page 1.1).**



**HOW OFTEN SHOULD YOU FILL OUT THE MOOD DIARY?**

*A: Every day.*



**WHAT TIME OF THE DAY SHOULD YOU FILL IT OUT?**

*A: As close to the end of the day as possible. Use reminders so you don't forget: keep it under your pillow, on your nightstand, or ???*

**Also, remember to write down any stressful situations that happened that day that seemed to “trigger” a worsening or improving of your mood.**

### Preview the Next Session

Next session, we'll start learning some ways to check out the accuracy of our thoughts and beliefs.

I'll also be talking less next time and asking each of you to talk more.

Finally, you don't have to talk if you don't want to. But, I hope you will and sometimes I'll ask you if you have any comments or reactions to what I've said.

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## VII. SHARING ACTIVITY (10 min.)

Leader: It may be possible that during the “pre-group” meetings with individual adolescents you may identify one or two teens who are willing to share something about themselves. If so, set this up in advance so that these teens have brought their sharing materials with them. Otherwise, proceed with the therapist sharing.

**We're going to end most groups with some fun activity we can do together. Next session, I'll need two volunteers to bring in something that's important to them to share with the group. This is a way to get to know one another better.**

**Examples of Activities: You could:**

- a. **Bring a cassette tape with your favorite song, especially one that helps you feel better when you're feeling down. All music is acceptable, except for anything that you couldn't play at school in a classroom.**
- b. **Bring a musical instrument and play us a tune.**
- c. **Bring an example of a hobby you enjoy; art work, photography, sports, music, poetry or writing, collections, etc.**
- d. **Photographs of yourself as a baby or a young child, or photos of someone or some place important to you.**
- e. **Anything else? Any suggestions?**

**Some guidelines are:**

1. **No really loud activities (remember, we share this building).**
2. **Nothing that could harm anyone.**
3. **Most important, something positive that you are proud of, happy about, and that you are already doing to improve your mood.**



**Before I begin today's sharing, who would like to do next session?**

**O.K., I'll start out this first session myself. I've brought in ....**

Leader: This is up to you. Obviously nothing too personal or revealing (e.g., your videotape of your first child being born is a “no-no”), or too boring (e.g., your slides of recent home improvement projects). Think about what would appeal to teenagers. A good previous example was to bring in drums, bongos, etc., and have a short percussion “jam session.” Other examples might include pictures of your pet, or of a nice vacation spot that you can talk about.

**Session 2**  
**COPING WITH STRESS (90 min.)**

Materials needed for this session:

1. Workbooks for all adolescents.
2. Extra pens and pencils.
3. A pack of 3" x 5" index cards
4. Group Cohesion Questionnaires
5. Beginning of Group Mood Questionnaires

Leader: Write Agenda on the blackboard at the beginning of each class session.

**BLACKBOARD or FLIPCHART**

AGENDA

- I. REVIEW (10 min)
- II. GUIDELINES FOR THIS GROUP (10 min)
- III. IDENTIFYING NEGATIVE THOUGHTS (40 min)
- IV. FEELINGS ABOUT THE GROUP (7 min)
- V. MOOD QUESTIONNAIRE (7 min)
- VI. PRACTICE ASSIGNMENT (5 min)
- VII. SHARING ACTIVITY (10 min)

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**II. REVIEW (10 min.)**

Leader: General principle: Always review some of their practice assignment. If they didn't do it, then have them do it there. Reinforce those who do it between sessions. Try to help problem solve what might be getting in the way of those who did not do it, but don't get into a struggle or guilt trip.



**HOW WAS IT, FILLING OUT THE MOOD DIARY? DID YOU GET ANYTHING OUT OF IT?**

**?** DID ANYONE HAVE ANY TROUBLE REMEMBERING TO DO THIS? WHAT GOT IN THE WAY?  
ANY SUGGESTIONS FOR REMINDING YOURSELF TO FILL THIS OUT?

Leader: write down the suggested reminders on the board.

**If you haven't completed your Mood Diary yet, take a few moments to do this. Make a mood rating for today. If you can remember how you felt yesterday and possibly the day before, make those ratings too.**

**?** ANY PATTERNS TO YOUR MOOD? BETTER DAYS, SADDER DAYS? CAN YOU THINK OF ANY REASONS FOR THE PATTERNS YOU SEE?

**?** WERE THERE ANY PARTICULARLY GOOD OR EVEN GREAT DAYS? IF SO, WHAT MADE IT GREAT? WAS THE SITUATION THAT MADE YOU FEEL REALLY HAPPY UNDER YOUR CONTROL? COULD YOU HAVE ANOTHER HAPPY DAY IF THAT SAME THING HAPPENED AGAIN?

**?** DID ANYONE NOTICE ANY STRESSFUL SITUATIONS THAT SEEMED TO “TRIGGER” A WORSENING OR IMPROVING OF YOUR MOOD? WOULD ANYONE LIKE TO SHARE?

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## II. GUIDELINES FOR THIS GROUP (10 min.)

Last week, I talked about maintaining confidentiality in the group – not sharing the things that people say with your friends or other people. This is the first rule of the group, but there are a few more rules that can help the group run more smoothly.

**?** WHAT WOULD BE SOME GOOD GUIDELINES (OR RULES) FOR HOW WE SPEND TIME TOGETHER AS A GROUP?

Leader: Write the teens answers down on the board.

**WORKBOOK**

Ask adolescents to turn to page 2.1 in their workbooks. If appropriate, have teens take turns reading guidelines from their workbook.

In addition to the ones you came up with, here are some rules that we'd like everyone to follow in this group so we can help each other:

1. **FOCUS ON POSITIVE.** Use the group for support, but focus on positive changes you want to make. Try not to use the group as a place to complain about how many bad things may be going on. Of course, we will want to know about your stressful situations, but we will work more on how to DEAL with those problems.
2. **EQUAL TIME.** Each of you should have an equal opportunity to share ideas, ask questions, and discuss any difficulties you have in using the techniques.
3. **THE PERSONAL THINGS WE TALK ABOUT IN GROUP SHOULD NOT BE SHARED OUTSIDE THIS GROUP.**
  - a. Any information discussed in your initial interviews will remain confidential and will not be shared with the group.
  - b. Everyone is expected to honor the confidentiality rule by not discussing personal material from their group sessions with people who aren't part of the group. Of course, there is always the possibility that someone will break this rule; if any of you have concerns about confidentiality, please feel free to talk to me about it.
  - c. Confidentiality is particularly important, since everyone in this group has at least one parent who is receiving treatment for depression. While we will talk about this issue, and what it is like to have a depressed parent, please remember to keep confidential everything you hear about each other's parents.
  - d. It is fine to talk to your parents about the general things you are learning in the group but please do not discuss what specific people say or have experienced.
4. **GROUP RULES.** These have to do with running the group smoothly.
  - a. **FRIENDS CANNOT ATTEND GROUP.** This relates to confidentiality. No one can attend these group sessions except those of you who were invited.
  - b. **DON'T ARRIVE TOO EARLY.** We look forward to having you here, but we also have to share these rooms and buildings with many projects besides our groups. So, we have to ask that you come no earlier than 30 minutes before group begins.
  - c. **AFTER GROUPS.** When these groups are over, the building is usually empty. We have been asked by the building manager that everyone leaves fairly quickly after groups are over. This means making sure your parents are here to pick you up, if you're not driving yourself.
  - d. **PLEASE TURN OFF YOUR CELL PHONE DURING THE GROUP.**

Leader: Depending on the members of the group, you may also wish to add additional rules about acting out behaviors. If your group has one or more members who have diagnoses at

intake of either Attention Deficit Hyperactivity Disorder (ADHD), Oppositional-Defiant Disorder, or Conduct Disorder, then you may need to generate additional rules to keep the group on-task. If appropriate, ask teens themselves what behaviors would be disturbing to the group (yelling, hitting each other, interrupting, etc.). This may be too early to bring CONSEQUENCES for acting-out behavior (e.g., talking with parents, etc.). Bring consequences up only after problems first occur (hopefully this won't be necessary). A point program may also be introduced; see the CWDA course for example.



**ARE THERE ANY *OTHER* RULES YOU WANT AS A GROUP? IF EVERYONE AGREES TO A PROPOSED RULE, WRITE THEM DOWN ON PAGE 2.1 IN YOUR WORKBOOK.**

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### III. IDENTIFYING NEGATIVE THOUGHTS (40 min.)

#### Objectives

1. To help each student identify his or her most frequent negative and positive thoughts.
2. To have each student determine his or her ratio of positive to negative thoughts.
3. To have adolescents record daily (for the following week) their worst negative thoughts, and the number of times they catch themselves thinking negatively.

**Today we're going to start learning how to look at our THINKING. When people are stressed, they tend to have more negative thoughts and fewer positive thoughts. When this happens, it tends to be AUTOMATIC—it happens without you planning for it to happen, and often without you noticing it.**



**DO YOU BELIEVE THAT YOU CAN CHECK OUT, AND POSSIBLY CHANGE, YOUR THOUGHTS?**

*A: (if the response is **NO**) We often believe that we can't change our thoughts, but it is possible. We'll be learning techniques to help us do this during the next sessions.*

*A: (if the response is **YES**) Ask adolescents to suggest some specific techniques. Be brief in collecting answers. Confirm that yes, it is possible to control our thinking. We're going to learn several ways to do this.*



**HAVE YOU EVER CHANGED YOUR MIND ABOUT SOMETHING? HOW DID THIS HAPPEN? WHAT INFORMATION OR CHANGE OF SITUATION LED YOU TO CHANGE YOUR BELIEFS?**

Leader: Write down responses. If possible, point out that many teens are already familiar with examining the accuracy of their beliefs. If relevant, identify that they use techniques we will discuss and practice later ... such as evidence for and against beliefs.



**WHAT KIND OF GOALS WOULD YOU EXPECT TO HAVE FOR CHANGING YOUR THINKING?**

*A: Goals that involve increasing positive thoughts and decreasing negative thoughts. Briefly remind youth about the spiral and Triangle figures (workbook page 1.4) so that they can see the relationship between changing thinking and mood and behavior.*

### **OPTIONAL Mindfulness Technique: If time allows**

**For the rest of this group we will be asking you to keep track of your thoughts, as well as what was happening when you had certain types of thoughts. The reason for this is to understand the connection between your thoughts (particularly negative ones), what triggered those thoughts, and how you feel when you have those negative thoughts (remember the triangle from the first group?). Being aware or “mindful” of how all these are connected is the first step to beginning to examine your thoughts, and possibly changing the way you feel.**

**For many people this isn’t easy to do. So, we’re going to do a short exercise to help us be more aware of what we are thinking. This will help us become more mindful about thoughts that happen very fast ... often called “fleeting” thoughts. These thoughts are also “automatic.” That is, we don’t really plan to have those thoughts ... they just “pop into our minds.” This exercise will set up a chance for you to examine your automatic thoughts.**

Leader: Mindfulness techniques are psychological and behavior meditation techniques from Eastern spiritual training. They have been adopted and integrated into many forms of psychotherapy in an attempt to increase one’s awareness of one’s thoughts, feelings, and behaviors. Often times when we are under great stress or feeling overwhelmed by particular emotions (e.g., sadness, anger, etc.), we tend to behave or think in ways that are not in our best, long-term interest (e.g., thinking about suicide, isolating ourselves from friends and family, or using drugs or alcohol to dull the pain). Many of these behaviors or patterns of thinking come very naturally to us because they are the methods we have used to cope with stress or distress in the past.

For example, some of you bite your fingernails and often don’t notice that you are biting them. However, if you kept a log as to when you catch yourself biting your nails, what you are doing at the time, where you were at the time, and what you were thinking about when you caught yourself biting your nails, you might notice that you tend to bite your nails when you are sitting in a classroom thinking about your homework or the upcoming test. These thoughts may lead to feelings of anxiety and one relief might be to bite your nails; however, you might not notice that you are even biting your nails because this behavior has become an automatic or a habit. You would not necessarily notice a link between those thoughts and your nail biting unless you were able to be mindful of your thoughts.

The purpose of mindfulness is to help you slow down your thought processes and notice them so that

you can become more aware of how your thoughts can lead to particular behaviors. The way in which this goal is accomplished is by teaching you how to become more aware of these “automatic thoughts” we discussed earlier. Remember, earlier we talked about how sometimes we encounter an event, we have a fleeting, “automatic” thought (e.g., “I can’t do anything right.”), and before we know it, we are feeling sad and worthless, and then, we engage in a “habitual” behavior that we think is going to make us feel better (e.g., crying by yourself in your room). The goal of mindfulness is to increase your awareness that (1) such a cycle exists, and (2) if you can increase your awareness at any given point, you can exert some control and choose a different way or thinking or acting. By having the skills to catch your automatic thoughts and behaviors you can change these thoughts and behaviors, and either stop the negative feelings before they start or end them sooner.

**This is a mindfulness technique to help you increase your ability to notice your automatic thoughts and behaviors. We are going to do a simple breathing exercise. I want you to count your breath up to 10 and then count down from 10, so count 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 9, 8...so on and so forth, and when you reach one, then start counting again. Each full inhalation and exhalation is one breath. We are going to do this breathing exercise for five minutes.**

**As you are doing this exercise, your mind will naturally wander because it is very difficult to concentrate on one thing for five whole minutes. When you notice yourself wandering, try to bring yourself back to the breathing exercise and start where you think you left off.**

Leader: Do the exercise for 5 minutes. Then ask the following discussion questions.



**HOW MANY TIMES WERE YOU ABLE TO COUNT ALL THE WAY UP TO 10 AND COME BACK DOWN?**



**WHAT ELSE DID YOU FIND YOURSELF THINKING ABOUT? WHAT ELSE DID YOU MIND WANDER TO?**



**WERE YOU ABLE TO BRING YOURSELF BACK TO THE EXERCISE OR DID YOU JUST GO WITH WHATEVER THOUGHTS CAME TO YOUR MIND?**

Leader: In the space of five minutes, if the person only concentrated on their breathing and did the exercise perfectly, they should have gone up and down the scale about 4-5 times depending on how quickly they were breathing. If they were able to do this without deviation (by the way, this has been impossible for anyone who has ever tried this mindfulness task), then they were mindful of their breathing and might have noticed that they could control how fast or slow they breathed. If folks only went up and down the scale 1-2 times, then their minds did wander and the key is to see if they were aware enough to notice what other thoughts might have wandered through their minds (e.g., “*This is a stupid exercise,*” “*I can’t do this so I must be stupid,*” “*This is easy, now what number am I on?*”). Mindfulness in the second instance is the ability to notice when your mind wandered, what your mind wandered to, and then be able to bring yourself back to the task at hand. The first step which is the core mindfulness step is to be able to first notice your thoughts because if you don’t notice your thoughts you cannot make a decision as to whether you want to stay with this exercise, continue along whatever random thought your mind might have wandered to, or decide to think

about something completely different. In other words, the key to controlling your thoughts is to first notice your thoughts.

This exercise provided by Phan Y. Hong-Lishner, Ph.D., adapted from Zindel-Segal's DBT program.

### Group Exercise

Leader: Have adolescents start by picking a positive thought *first*, then “put it away” to come back to in a few minutes. The positive thought could be about pleasant experiences, their favorite places, positive things about themselves, etc. Provide some examples of positive thoughts.

Have adolescents WORRY COVERTLY (to themselves). They can worry about anything that typically bothers them. After about 20 seconds, ask them to stop. Ask them to do a mood rating at that point, using the same 1 to 7 ratings as they use for their mood diary.

Now have them THINK POSITIVE THOUGHTS for 30 seconds. Remind them to concentrate, recall the details of the situation they are remembering. At the end of 30 seconds, ask them to do another 1 to 7 mood rating.

Briefly ask them what they experienced. How did their mood change? *Presuming that at least some teens will have experienced a mood increase after positive thoughts, point out that they have just controlled their thinking –and by doing that, they also changed their mood.*

**Before we can test the accuracy of our thoughts and beliefs, we must first become aware of them. In particular, we need to know which negative thoughts we have most often. Everyone has negative thoughts sometimes, and there are understandable reasons for this. But NEGATIVE THOUGHTS CAN BECOME A PROBLEM IF THEY OCCUR TOO OFTEN because they can make us feel sad or down. The best way to work on negative thoughts is to identify the ones that we have most often.**



**WHAT IS THE FIRST STEP TO EXAMINING—AND MAYBE CHANGING—OUR THOUGHTS?**

*A: Becoming aware of our thoughts; identifying the negative thoughts we have most often.*

**When we become aware of our thoughts, we should notice whether we're thinking more positive thoughts or more negative thoughts. As a general rule of thumb, people who are**

**happy (i.e., not depressed) tend to have about TWICE AS MANY POSITIVE THOUGHTS AS NEGATIVE THOUGHTS (although this can vary somewhat from one person to the next). Also, this is a long-term GOAL—it often takes a while for to get there, but small increases in positive thoughts are still progress.**

**WORKBOOK**

Leader: Ask adolescents to answer questions #1 and #2 on page 2.2.

### Identifying Frequent Negative Thoughts

**WORKBOOK**

Ask adolescents to turn to pages 2.3 and 2.4.

**On pages 2.3 and 2.4 there is a list of negative thoughts that tend to occur frequently. Have you had any of these? Check the ones that are familiar to you. You do not need to share them with others if you do not want to.**

**At the bottom of page 2.4, write down any other negative thoughts that you have had.**

Leader: Give adolescents some time to work. Begin the next exercise when 80% of the adolescents seem to have finished.

**To help you identify other negative thoughts, I'm going to describe some situations. I want you to write down any negative or positive thoughts you might have in each situation, especially those ABOUT YOURSELF. Add these thoughts to the list you have started at the bottom of page 2.4.**

- a. **It's Monday, and you find out that some of your friends went to a movie on Saturday and didn't invite you.**
- b. **Your parents won't let you go to a special party on Friday night.**
- c. **You have just finished a very hard exam, and your best friend tells you that he or she thought the exam was fairly easy.**
- d. **You see some friends having fun together, and you're not with them.**

**Now look at your list of negative thoughts. Do you have some of these thoughts much more often than the others? Put a star or an asterisk by the most frequent thoughts. Put two stars or asterisks by the thoughts that are very frequent.**

**To help identify some of your own negative thoughts, try looking at your Mood Diary (workbook page 1.1) and look at those days where your mood was lower. Can you remember what was going on for you on those days? What might you have been thinking?**

Sometimes it helps to notice when our moods change for the worse as times to try to identify our negative thoughts.

### Identifying Positive Thoughts

**WORKBOOK**

Ask adolescents to turn to pages 2.5 and 2.6

**There is a list of positive thoughts the next two pages: pages 2.5 and 2.6. Read through the list and check the thoughts that you have had during the past month. At the bottom of the second page, list some other positive thoughts that you have had.**

### Comparing the Totals

**WORKBOOK**

Ask adolescents to turn to page 2.7

**Count the positive thoughts you identified on the list on pages 2.5 and 2.6, and write the total on the line provided at the top of page 2.7. Then count up the negative thoughts you identified from the list on pages 2.3 and 2.4 and write that total on the next line.**

**Now, I'm going to ask some general questions about what you found. Answer for yourself. If you would like to share, that would be great, but you don't have to.**



**WHICH OF YOUR TOTALS IS HIGHER: THE ONE FOR NEGATIVE THOUGHTS OR THE ONE FOR POSITIVE THOUGHTS?**



**DO YOU HAVE TWICE AS MANY POSITIVE THOUGHTS AS NEGATIVE THOUGHTS?**



**WHY DO MANY PEOPLE HAVE MORE NEGATIVE THOUGHTS? IS IT "EASIER" TO HAVE NEGATIVE THOUGHTS?**

**Some people think that negative thoughts about themselves provide them with some protection against being disappointed. That is, if you only have negative**

**thoughts about yourself and don't expect anything positive or don't really try, then it is very unlikely that you will feel disappointed in yourself.**

**The problem with this line of thinking is that it starts off as just something you tell yourself. However, over time it becomes a self-fulfilling prophecy and you start to believe all those negative thoughts about yourself.**

**When that happens, that once "protective" mechanism is no longer protective, but actually makes it more likely that serious depression will happen. The goal here is to learn to recognize when thoughts are useful in helping you deal with your life, and when they are putting you at a higher risk for stress, depression, anger and other problems.**



**IS IT O.K. TO HAVE POSITIVE THOUGHTS ABOUT YOURSELF? CAN YOU HAVE "TOO MANY" POSITIVE THOUGHTS ABOUT YOURSELF? HOW COULD THAT BE A PROBLEM? IS IT BRAGGING IF YOU THINK POSITIVELY ABOUT YOURSELF?**

Leader: Here is a place to discuss that we are not simply suggesting that they be "Pollyannaish" and think positively about everything, but that the idea is to try to check things out to see what is accurate. Sometimes it helps to start out less negatively, if not positively.

**Sometimes thinking positively, or optimistically, gives you the confidence to go ahead and try things even if you are not sure.**

**We are not saying simply replace negative thoughts with positive thoughts. However, we are suggesting that it sometimes makes sense to check out the accuracy of what you believe, and to maybe start out more positively than negatively.**

Leader: If someone in the group says s/he has more positive than negative thoughts, then say that is great, and s/he can be really helpful to others.

### Keeping Track of Negative Thoughts

**WORKBOOK**

Ask adolescents to turn to pages 2.8 and 2.9

**The form on pages 2.8 and 2.9 are for keeping track of how often you have negative thoughts. You will use this form to write down your MOST NEGATIVE THOUGHTS each day.**

**Every day for a week, we want you to RECORD AT LEAST ONE NEGATIVE THOUGHT, preferably the worst, most upsetting thought you had that day—if you had one. This will be hard to remember from one day to the next, so try to fill out the form every day. Try to focus on thoughts about yourself, not other people.**

**Your goal is to write down at least one thought each day. Another useful piece of information is HOW MANY TIMES you caught yourself thinking negatively. If you can, write this down in the space provided on the form. Leave the column marked “Activating Event” blank for right now. We’ll come back to that later.**

Leader: Emphasize that recording one negative thought each day is critical because the exercises in subsequent sessions are based on this information. The counting part is not as important, but it will also be helpful.

Discuss some ways to take notes on negative thoughts right after they occur. Hand out blank 3” x 5” cards, and suggest using the cards to record thoughts. Help adolescents think of a place in their notebooks or purses to carry the cards. Show some examples of good record keeping.



**DOES ANYONE HAVE ANY SUGGESTIONS FOR HOW TO REMEMBER TO WRITE DOWN YOUR NEGATIVE THOUGHTS?**

**If possible try to do this close to when it happened. However, if you can’t, then do it at the end of the day when you fill out your Mood Diary.**

**If you have a particularly bad day, then you can write down more than one thought for that day. If you have a good day with no negative thoughts that you can recall, then that is fine also. We don’t necessarily want you to have negative thoughts if they are not happening for you, but most people have some negative thoughts over the course of a week.**

---

#### IV. FEELINGS ABOUT THE GROUP (7 min.)

**Leader:** Please have teens complete the “Feelings about the group” questionnaire (also called the Group Cohesiveness Questionnaire). A pack of 12 blank forms is located in your Record Book. Use the set of forms with “Session 2” printed on the top. Please be certain to have teens record their first name and last initial on the tops of the forms. Collect the completed forms, and record adolescents' questionnaire scores in your Record Book.

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#### V. MOOD QUESTIONNAIRE (7 min.)

WORKBOOK

Ask adolescents to turn to the “Beginning of the Course” Mood Questionnaire provided in the Appendix of their workbooks.

**In this group you're going to learn some ways to manage your thinking, and also the way you feel. Before we start, we need to measure how you feel right now. At the end of the group, we will again measure how you feel to see how much change there is. Please fill out the Mood Questionnaire right now. This is the same questionnaire each of you filled out several weeks ago in your first study interview. Please answer the questions honestly; no one else in the group will see your answers.**

**Leader:** After everyone has finished, give instructions for scoring. Teens may notice that the numbers for the responses on four of the statements (#4, #8, #12, and #16) are listed in reverse order. This has been done on purpose, and the teens' score will be correct if they simply add up the numbers they have circled.

**To score the questionnaire, add up all of the numbers you have circled. If you have circled more than one number for a statement, add only the highest number to your score.**

**Please write your first name and last initial on the questionnaire before you turn them in.**

Leader: Collect the completed Mood Questionnaires from the adolescents. After the session, check the scores and record them in your Record Book. Return the Mood Questionnaires to adolescents during the next session.

---

## VI. PRACTICE ASSIGNMENT (5 min.)

**WORKBOOK**

Ask adolescents to turn to the practice assignment on page 2.10.

**Notice that the practice assignment for this session is described on page 2.10. Your assignment for this session is to do the following:**

1. **Keep track of how you feel by filling out your Mood Diary (page 1.1).**
2. **Keep track of your negative thoughts, using pages 2.8 and 2.9**

**Write down your worst negative thought for the day. Try using the 3" x 5" card to take notes right after the thought occurs, then transfer the notes to page 2.8. Keep track of your most positive, happy thought of the day as well.**

**Please REMEMBER TO BRING YOUR WORKBOOK TO EVERY SESSION!**

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## VII. SHARING ACTIVITY (5 to 10 min.)



**WHOSE TURN IS IT TODAY? WHAT DO YOU HAVE TO SHARE WITH US?**

Leader: if necessary, remind the group about guidelines:

1. No really loud activities (remember, we share this building).
2. Nothing that could harm anyone.
3. Most important, something positive that you are proud of or happy about.

You may also use this time for other activities or discussions, especially if the group consensus supports this. For example, if a “process discussion” begins earlier in the group but is prematurely terminated (e.g., to continue with the scripted exercises), this time could be used to extend this discussion. However, be sensitive to the adolescent whose turn it is to present their personal hobby/activity/objects. This person may feel rejected if their turn is “pre-empted” by

other group issues. Approach this in a diplomatic fashion, allowing the scheduled teen several options: to present today, to shift until the next session, etc.

Leader: You will want to start planning to allow each teen in your group to present a sharing activity at least once before the acute group ends (by Session 8). If you have more than 7 teens in your group you may want to start doubling up (2 teens sharing at each session) so that each teen will be able to present their personal sharing activity. Plan for 2 teens to share at each session, in case one person is absent, then you will have at least one person to do the sharing.



**WHO WOULD LIKE TO DO NEXT SESSION?**

Leader:

Please record the adolescents' scores on the Mood Questionnaire and the Feelings about the Group on the appropriate study data form.

Leader: **NOTE:** Prepare 1 or 2 positive statements about each adolescent for use in the exercise next session. Try to focus on good personality traits and habits (e.g., good sense of humor) rather than physical attributes (e.g., attractive). This provides a better model for adolescents.

### Session 3

## STRESSFUL SITUATIONS and THINKING (90 min.)

Materials needed for this session:

1. Extra workbooks
2. 3 x 5 index cards
3. Pencils or pens
4. One or two positive statements about each group member

### BLACKBOARD or FLIPCHART

#### AGENDA

- I. REVIEW (5 min.)
- II. IDENTIFYING ACTIVATING EVENTS (35 min.)
- III. INCREASING POSITIVE THINKING (30 min)
- IV. PERSONAL GOALS, REVISITED (5 min)
- IV. PRACTICE ASSIGNMENT (5 min.)
- V. SHARING ACTIVITY (10 min.)

---

### I. REVIEW (5 min.)

Let's quickly review some important points from the previous sessions.



**WHAT ARE 3 THINGS THAT DISTINGUISH SERIOUS DEPRESSION FROM ORDINARY SADNESS?**

*A: Serious depression: (a) lasts 2 weeks or more; (b) there are changes in eating, sleeping, energy level, concentration, and thoughts; and (c) sadness or irritability is the most common feeling during that time.*



**WHAT ARE SOME COMMON REACTIONS TO STRESS?**

*A: Sadness, depression, anger, tension, feeling sick, etc.*

**? IS IT POSSIBLE TO CHANGE THE WAY WE REACT TO STRESS? HOW?**

*A: Through changing our thoughts and behavior (how we act). Other answers involving skills such as relaxation, doing fun things, etc., are also acceptable.*

**? DID YOU REMEMBER TO FILL OUT YOUR MOOD DIARY (PAGE 1.1) EVERY DAY? HOW DID YOU REMIND YOURSELF?**

**? DID YOU HAVE ANY PROBLEMS ASSIGNING A NUMBER TO YOUR MOOD? IF YOUR MOOD FLUCTUATED, DID YOU REMEMBER TO TAKE THE AVERAGE?**

**If you forgot to rate your mood on a particular day, try to remember how you felt, and fill in the number. Remember, though, the ratings are much more accurate if you make them on a daily basis.**

**? DID YOU KEEP TRACK OF YOUR NEGATIVE THOUGHTS, USING PAGES 2.8 AND 2.9? HOW WAS THIS? DID YOU GET ANYTHING OUT OF KEEPING TRACK OF THESE?**

**? WERE YOUR MOODS BETTER OR WORSE ON SOME DAYS COMPARED TO OTHERS?**

**? HAVE YOU NOTICED ANY PATTERNS IN WHEN YOUR MOODS ARE BETTER OR WORSE?**

**? DID ANYONE THINK OF THE ACTIVATING EVENTS (STRESSFUL SITUATIONS) THAT TRIGGERED THESE NEGATIVE OR UNREALISTIC THOUGHTS? WHAT WERE SOME EXAMPLES? WE'RE GOING TO TALK ABOUT THESE NEXT.**

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## **II. IDENTIFYING ACTIVATING EVENTS (35 min.)**

**When you've been keeping track of your thoughts, you may have noticed several situations when you were thinking negatively. When you discover that you are thinking negatively, you will also need to figure out what situation or event triggered the negative thoughts. We call these situations ACTIVATING EVENTS, because they "activate" or trigger the negative thoughts.**

Leader: Write “Activating Event” on the blackboard.

**We're going to practice identifying Activating events by looking at some cartoons.**

**WORKBOOK**

Ask adolescents to read question #1 on page 3.1

Leader: First, provide a brief summary of who Wayne Newton is: “old style” Las Vegas singer, popular with retirees. Have 2 people play the part of the people in the cartoon, and someone be the narrator, and read the dialogue out loud.



**WHAT IS THE ACTIVATING EVENT? WRITE IT ON THE LINE BELOW THE CARTOON.**

*A: Humming a recent Wayne Newton hit (Wayne Newton is an old singer). Obviously this is a silly Activating Event ... but then, this is a silly cartoon!*



**WHAT DID YOU CIRCLE FOR THE NEGATIVE THOUGHT?**

*A: Opus the Penguin: “I’m as handsome as I’m gonna get . . . and that’s not too handsome.”*

**WORKBOOK**

Ask adolescents to turn to page 3.2.

Leader: Have someone read Jon’s dialogue in the cartoon. Ask teens to circle the negative thought, then describe the activating event on the line below the cartoon.



**WHAT IS THE ACTIVATING EVENT?**

*A: Finding Garfield (the cat) in shock in front of the TV.*



**WHAT DID YOU CIRCLE FOR THE NEGATIVE THOUGHT?**

*A: Jon says, “I feel like such an unworthy parent.”*

### Recording Negative Thoughts

WORKBOOK

Ask adolescents to turn to page 2.8

**You've been using the forms on page 2.8 and 2.9 to keep track of negative thoughts. You'll now use these forms to write down your MOST NEGATIVE THOUGHTS each day and the ACTIVATING EVENT that came before each thought.**

**Continue to keep track of AT LEAST ONE NEGATIVE THOUGHT each day. When you realize that you are thinking negatively, also try to identify the Activating Event that triggered you to begin thinking this way. Write down some notes about this as well.**

Leader: Emphasize that recording one negative thought each day is critical because the exercises in subsequent sessions are based on this information. The counting part is not as important, but it also will be helpful.

### Individual or Group Exercise

Leader: If group members appear to be comfortable revealing personal information to one another, then split the class up into small groups of 2 to 3 teens for this exercise. If they have been reluctant to share information, then conduct the exercise individually.

**Take the negative thoughts you've already written down on pages 2.8 and 2.9, and try to identify what the Activating Event was for each negative thought. Remember: the Activating Event is the stressful situation just before or right when you had that thought.**

Leader: Circulate around the class, helping teens who appear stuck.

---

### III. INCREASING POSITIVE THINKING (30 min.)

#### Objectives

1. To help each student come up with at least one positive statement about each person in the room.
2. To have each student write down the positive statements about him- or herself that are offered by others.

**When we think negatively about ourselves, we often think negatively about others. It's good practice to think realistic and positive thoughts about others and about ourselves. The goal for this session is to think realistic and positive thoughts.**

#### Group Exercise: Positive Statements About Each Other

**Now I want you to take a few minutes to write one or two POSITIVE STATEMENTS about each of the other people in the group. Here I have index cards, with each person's name written on the top of a card. I have already written a positive statement of my own on each card. Now I'll pass the card around, and when you get a card, please write a positive statement about that person. You don't need to write your name, just a positive statement. Try hard to write at least one positive statement for each person. When everyone is finished, I'll give each person his or her card, and we'll take turns reading the comments on our own cards. Before we start, I'll demonstrate by reading the comments I have written.**

Leader: Read the statements you have prepared – it might also be easier if you have written these on the board or a flipboard beforehand. Try to focus on good personality traits and habits (e.g., good sense of humor, caring about other people) rather than physical attributes (e.g., attractive). This provides a better model for adolescents.

**OK, it's your turn to think of some positive statements for each other. Your positive statements should be different from mine (although you can use some of the same ideas listed here). Try to think of things about each other that you like or admire. Include yourself on that list. Try to come up with at least one or two positive things to say about each person in the group—including yourself.**

Leader: While the adolescents are working, walk around the room, and help those who are having trouble by whispering some hints. Note that many adolescents will find this exercise difficult to do.

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### Reading Positive Statements About Yourself

**Take a moment to read your own card – what everyone else wrote about you.**



**HOW DO YOU FEEL WHEN YOU READ THESE STATEMENTS?**



**DO YOU FIND YOURSELF HAVING TROUBLE BELIEVING THESE STATEMENTS?**



**DID YOU NOTICE ANYTHING INTERESTING ABOUT THIS EXERCISE? WAS IT HARDER TO COME UP WITH SOMETHING NICE ABOUT YOURSELF OR OTHERS?**

Leader: tell youth that they can take their cards home. Some people might like to carry their card in their wallet or purse, so if they notice they are feeling down or thinking negatively about themselves, they can read the positive statements to try to feel better.

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#### IV. PERSONAL GOALS, REVISITED (5 min.)

**In the first session I asked about what personal goals each of you might want to work on. Because we were meeting for the first time, that might have been a difficult time to come up with a goal. I wanted to check-in and see if any of you had some new thoughts about personal goals to work on while in this group.**

Leader: just take a few minutes to go around the group and ask about goals. Record them, and as the group progresses you may try and tie the group skills training (particularly in the Continuation sessions) to the various goals of individuals.

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**WORKBOOK**

**ASSIGNMENT (5 min.)**

Ask adolescents to turn to the practice assignment on page 3.5

1. **Continue to fill out your Mood Diary on page 1.1.**
2. **Keep track of your negative thoughts, using pages 2.8 and 2.9. Write down your worst negative or unrealistic thought for the day, and the related Activating Event. Try using the 3" x 5" card to take notes right after the thought occurs, then transfer the notes to pages 2.8 and 2.9.**

Leader: Pass out 3" x 5" cards to adolescents, if not done earlier.

### Success Activity

Let's do our practice for today.

1. **Write down at least one of the worst negative thoughts you have had today on pages 2.8 or 2.9, plus the related activating event.**
2. **Fill out your Mood Diary for today.**

## VI. SHARING ACTIVITY (5 to 10 min.)



**WHOSE TURN IS IT TODAY? WHAT DO YOU HAVE TO SHARE WITH US?**

Leader: if necessary, remind the group about guidelines:

1. No really loud activities (remember, we share this building).
2. Nothing that could harm anyone.
3. Most important, something positive that you are proud of or happy about.

You may also use this time for other activities or discussions, especially if the group consensus supports this. For example, if a “process discussion” begins earlier in the group but is prematurely terminated (e.g., to continue with the scripted exercises), this time could be used to extend this discussion. However, be sensitive to the adolescent whose turn it is to present their personal hobby/activity/objects. This person may feel rejected if their turn is “pre-empted” by

other group issues. Approach this in a diplomatic fashion, allowing the scheduled teen several options: to present today, to shift until the next session, etc.



**WHO WOULD LIKE TO DO NEXT SESSION?**

Leader: You will want to start planning to allow each teen in your group to present a sharing activity at least once before the acute group ends (by Session 8). If you have more than 7 teens in your group you may want to start doubling up (2 teens sharing at each session) so that each teen will be able to present their personal sharing activity. Plan for 2 people to share next week, just in case one doesn't show up.

## Session 4 EXAMINING NEGATIVE THINKING (90 min)

Materials needed for this session:

1. Extra workbooks
2. A pack of 3" x 5" index cards
3. Set of colored markers
4. Supply of laminated "6 Helpful Questions" wallet cards

### BLACKBOARD or FLIPCHART

#### AGENDA

- I. REVIEW (5 min)
- II. PRACTICE IDENTIFYING UNREALISTIC THOUGHTS (25 min)
- III. CHANGING UNREALISTIC THINKING to REALISTIC THINKING (45 min)
- IV. PRACTICE ASSIGNMENT (5 min.)
- V. SHARING ACTIVITY (10 min)

### I. REVIEW (5 min.)

Let's quickly review some important points from the previous sessions.



**WHAT IS A HEALTHY NUMBER OF REALISTIC OR POSITIVE THOUGHTS TO HAVE, COMPARED TO NEGATIVE OR UNREALISTIC THOUGHTS?**

*A: A healthy ratio of positive to negative (or + to -) thoughts is roughly two to one.*



**WHAT ARE SOME COMMON UNREALISTIC OR NEGATIVE THOUGHTS, ESPECIALLY THOSE YOU MIGHT HAVE IN REACTION TO SOME STRESSFUL SITUATION (A BIG TEST, FIGHTING WITH FRIENDS, ARGUING WITH PARENTS)?**



**IS IT POSSIBLE TO CHANGE THE WAY WE REACT TO STRESS? HOW?**

*A: Through changing our thinking and behavior – this can lead to improvements in our mood (briefly remind youth of the Spiral and Triangle figures on page 1.4).*



**DID YOU REMEMBER TO FILL OUT YOUR MOOD DIARY (PAGE 1.1) EVERY DAY? HOW DID YOU REMIND YOURSELF?**



**DID YOU NOTICE ANY PATTERNS IN YOUR MOODS? ARE YOUR MOODS WORSE ON SOME DAYS THAN OTHERS? WHAT IS GOING ON FOR YOU DURING THOSE DAYS?**



**DID YOU KEEP TRACK OF AT LEAST ONE NEGATIVE THOUGHT EVERY DAY (PAGES 2.8 OR 2.9)? DID YOU HAVE ANY PROBLEMS THINKING OF A NEGATIVE THOUGHT?**



**DID YOU KEEP TRACK OF THE ACTIVATING EVENTS THAT TRIGGER YOUR NEGATIVE THOUGHTS?**



**ARE THERE SOME NEGATIVE THOUGHTS YOU ARE HAVING MORE THAN OTHERS? ARE THEY RELATED TO PARTICULAR ACTIVATING EVENTS?**



**DID ANYONE WONDER WHETHER THEIR NEGATIVE THOUGHTS WERE ACCURATE AND REALISTIC?**

**If so, this is a good lead-in to what were going to talk about today.**

---

## **II. PRACTICE IDENTIFYING UNREALISTIC THINKING (25 min.)**

### Objectives

1. To provide feedback as adolescents identify negative or unrealistic beliefs in cartoon sequences and suggest more positive, realistic beliefs.
2. To help each student develop positive/realistic counterthoughts and beliefs for his or her unrealistic/negative thoughts.

WORKBOOK

Ask adolescents to turn to page 4.1

**Let's look at how negative thinking affects some cartoon characters. These are some examples of negative beliefs that involve unrealistic EXAGGERATIONS. The cartoon characters notice one wrong thing and then believe that EVERYTHING is wrong with themselves or with some other situation. Read the Garfield cartoon at the top of the page.**



**DO YOU REMEMBER THE NEGATIVE THOUGHT FOR THIS CARTOON?**

*A: "I feel like such an unworthy parent."*

**Optional**

**This isn't the WHOLE thought. Sometimes there is more to the whole belief that can be discovered just beneath the surface issues. What do you think is the UNDERLYING belief that makes this a depressing situation for Garfield's owner?**

*A: "If Garfield has a bad experience just once because I make a mistake, I'm an unworthy parent." Or, "I'm TOTALLY RESPONSIBLE for what happens to my cat. Even if he's the one who chooses to watch TV, I'm responsible for the consequences. I must always do everything for my cat."*

**We call this the WHOLE belief, or UNDERLYING belief. It often requires more "digging" and thinking about the underlying MEANING of your thoughts. This is difficult, but we'll practice this several more times later.**

Leader: There are two analogies that are useful here if some group members do not clearly understand the concept of underlying beliefs. Drawing pictures (or having them prepared on a flipchart) may help the discussion:

1. First is the tip of the iceberg representing the "surface thoughts," with the underwater portion of the iceberg representing the underlying beliefs—which may not be immediately obvious and take some effort to discover.
2. The second analogy is that of an onion, with surface thoughts representing the outer layer, and underlying beliefs represented by the inner layers—which need to be revealed by "peeling away" the outer, more surface thoughts (layers). The movie "Shrek" may be a useful visual/media reference ("Ogres have layers.").

Leader: Ask adolescents to fill in the Activating Event and Belief boxes on page 4.1.

**Once you have identified the negative automatic thoughts and the underlying beliefs, you now can begin to examine their accuracy and come up with more realistic alternatives, or counterthoughts.**

**These alternative and more realistic ways of thinking have several names. Sometimes they are called Disputes, Rational Responses, or Alternative Responses. Your workbook refers to them as Counterthoughts.**

? WHAT DO YOU WANT TO CALL THESE NEW, MORE ACCURATE THOUGHTS? WHAT SEEMS LIKE THE BEST NAME OR LABEL?

? WHAT ARE SOME POSSIBLE COUNTERTHOUGHTS [USE THE LABEL ACCEPTABLE TO THE GROUP] THAT MIGHT BE MORE ACCURATE HERE?

? IF A GOOD FRIEND WERE HAVING JOHN'S REACTION (IN THE CARTOON), WHAT MIGHT YOU SUGGEST AS POSSIBLE OTHER WAYS OF THINKING ABOUT THIS SITUATION?

*A: Accept the ideas offered by participants for countering this belief.*

? WHAT ARE SOME POSSIBLE COUNTERTHOUGHTS THAT WOULD BE MORE REALISTIC OR ACCURATE?

*Possible answers: "This was a bad experience for Garfield. I'll have to remember to send him to bed and make sure the TV is turned off next time." ...or... "I made a mistake leaving the TV on all night, but Garfield was also partly responsible because he stayed up watching it. We both need to be more careful next time."*

**NOTICE:** we did two big things here with this cartoon. First, we looked at the Underlying Belief that John (Garfield's owner) might have had. Second, we started to examine whether these beliefs were accurate. That is, were there other ways to look at the situation?

**GOOD JOB!**

Leader: Ask adolescents to fill in the box for Positive Counterthoughts on page 4.1.

### Optional (if time permits): Small Group Activity

Another category of negative beliefs is having UNREASONABLE EXPECTATIONS of someone else. An example of this type of belief is "I'm embarrassed and irritated because my parents often want to know where I'm going."

**WORKBOOK**

Ask adolescents to turn to page 4.2.

Leader: Do this only if you have time. Have adolescents divide into small groups, and ask them to work together to fill in the thought diagrams for the Cathy cartoon (page 4.2). If the task is too difficult for the adolescents to do in small groups, have everyone work together as a whole group. Help the adolescents arrive at something similar to the following conclusions.

Negative Belief (Unreasonable Expectation):

**“If my boyfriend doesn't think the way I expect him to, his brain is warped, he's bizarre, not normal, etc.”**

Positive Counterthought:

**“My boyfriend and I don't agree on this. Each person is entitled to his or her own opinion.”**

**“It's okay for me to have a different opinion from him. We can disagree and still be okay.”**

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### **III. CHANGING NEGATIVE THINKING TO REALISTIC THINKING (45 min.)**

#### **Objectives**

1. To discuss how to use realistic/accurate thoughts to counter negative thoughts.
2. To help each student develop positive counterthoughts and beliefs for his or her unrealistic, negative thoughts.

#### **Identifying Negative Thoughts**

**Many—but not all—of our negative thoughts are inaccurate or unrealistic. They are often OVERREACTIONS to a situation.**

**EXAMPLE:** Two different girls, Linda and Julie, both ask their friends to go out on Friday night. Both girls' friends say they can't make it because they have too much work to do.

Linda feels rejected and thinks, “*Because my friend won't go out with me tonight, she doesn't like me, and she'll never want to go out with me again.*”

On the other hand, Julie thinks, “*Well, my friend is busy tonight, but we can go out some other night. She's still my best friend.*”

The same situation happened to both girls, but their reactions were very different. It's not **WHAT HAPPENED** but **WHAT THEY TOLD THEMSELVES** about what happened that made the difference in how they felt. One girl's thoughts were unrealistic, and the other girl's thoughts were more positive and more realistic.



**WHICH GIRL HAD THE NEGATIVE THOUGHTS?**

A: *Linda (the first girl).*



**HOW DO YOU DISCOVER IF YOUR THOUGHTS ARE INACCURATE OR UNREALISTIC?**

The basic approach is to **EXAMINE YOUR OWN THOUGHTS**—and put them to a sort of test. Instead of blindly accepting that all your thoughts are true, you “check-out” just **HOW TRUE** your thoughts really are—examine the evidence. If they aren't true, or possibly aren't true **ALL THE TIME**, then they may be unrealistic.

Keep in mind these three points:

**BLACKBOARD or FLIPCHART**

1. Thoughts are not facts
2. Thinking something doesn't necessarily make it so
3. If someone else says something, it doesn't necessarily make it so

If you aren't certain if your thought or belief is accurate, then ask yourself the following questions:

**BLACKBOARD or FLIPCHART**

1. Check it out. What is the evidence for or against this belief? Am I exaggerating?
2. Are there other possible interpretations of, or explanations for, this situation?
3. Even if this is true (or partly true), will this make a big difference to me in a week, month, year? Will I be okay, even if this is the case?
4. What are the odds? How likely is it that this (*awful thing I'm anticipating*) will really happen?
5. What would happen if I didn't believe this anymore? What would change?
6. How useful is it for me to think this? Is this getting me what I want?

**Inaccurate or unrealistic thoughts don't stand up to a challenge. Don't be fooled if some part of unrealistic thoughts is HALF TRUE; the conclusions are often not true.**

**For example, imagine you think “*If Bill won't be my friend, my life is over.*” If Bill won't be your friend it may be realistic to feel sad for a while. However, leaping to the conclusion that your life is over is very exaggerated.**



**CAN ANYONE THINK OF A NEGATIVE THOUGHT THAT IS PARTLY TRUE, BUT HAS AN EXAGGERATED CONCLUSION?**

**Example:** “*If I fail this test I'll never get into the college I want.*” Failing a single test is certainly an understandable reason to feel upset or down, for a while. However, by itself it won't lead to college failure. You can also point out that Linda (in the prior example) had an exaggerated reaction to her friend not calling her up (“*...she'll never want to go out with me again!*”).

### Examining and Testing Your Overly Negative Thoughts

**Negative or unrealistic thoughts can lead you to feel depressed and unhappy. When you think realistically about yourself and the world, you often feel better.**

**Part of examining your negative thoughts is to come up with more accurate beliefs in stressful situations. *Why would this be important?* More accurate and realistic beliefs help you feel less upset, so that you can deal with your thoughts and the situation more effectively.**

**When you catch yourself thinking negatively, challenge those beliefs and replace them with more accurate and often more positive “counterthoughts.”**

**Definition: A COUNTERTHOUGHT relates to the SAME TOPIC as the negative thought, but it's MORE REALISTIC and OFTEN MORE POSITIVE.**

### Six Helpful Questions

**Coming up with realistic counterthoughts may be hard for you to do at first, especially if you haven't examined your particular belief before.**

**In this next exercise, we'll try coming up with some rules or suggestions about how to best create positive counterthoughts.**

Leader: this is a “bottom up” approach to try and generate the 6 Helpful Questions from the group participants' own suggestions.



**WHO CAN GIVE ME EXAMPLES OF NEGATIVE THOUGHTS THEY'VE NOTICED LATELY?**

Leader: Do this quickly in list format, with no details on the activating events. List these thoughts in one column on the board. If teens fail to generate recent thoughts, let them use historical thoughts or have them turn to the Session 2 checklist of negative thoughts.



**ARE THESE THOUGHTS HELPFUL OR REALISTIC? IF NOT, WHAT WOULD BE A MORE HELPFUL OR REALISTIC THOUGHT ONE MIGHT HAVE?**

Leader: List the suggested helpful or realistic thoughts in an opposite column.

**You are very good at recognizing when thoughts are unrealistic or negative! This is one of the main skills we want to teach to keep you from getting depressed. But what about when you can't come up with a new thought so easily, or what if you're really not sure if your negative thought is realistic or not? Let's try and figure this out.**



**HOW DID YOU GOT FROM THE MORE NEGATIVE OR UNREALISTIC THOUGHTS (COLUMN**

**1), TO THE MORE REALISTIC THOUGHTS (COLUMN 2)?**



**IS THERE ANY KIND OF PATTERN OR RULE WE CAN SEE HERE, THAT WE MIGHT BE ABLE TO USE TO COME UP WITH A REALISTIC THOUGHT IF WE ARE STUCK?**

Leader: Their responses to these questions *should* generate a rough draft of the 6 helpful questions.

**That’s great! Your ideas, rules, patterns look a lot like this list of “6 Helpful Questions” I have here, that you can use if you are trying to figure out if a thought is realistic or not. Let’s look at them. They are on page 4.3 in your workbook.**

**These questions not only help you decide whether your belief is accurate or not, but they usually help suggest a more realistic and positive counterthought.**

**It also is sometimes helpful to think about what you might suggest to a good friend if she or he was having these thoughts.**

**WORKBOOK**

Ask adolescents to read the Questions on page 4.3. For each of the six questions, ask teens in small groups or pairs to come up with an example of how it can be used to address a negative thought.

Leader: Hand out the “wallet” laminated cards that contain the 6 questions. Point out that these can be used to remind themselves what to ask to decide if a negative thought is realistic and accurate, or not. Some teens have wanted extra cards to give to friends/parents/teachers; this is fine, and you may want to have extras to accommodate this.

Alternative: you can also provide them with index cards and colored markers to make their own “6 Helpful Questions” wallet cards. The writing of the questions may help teens to integrate the ideas presented. This approach also gives them the opportunity to express any lack of understanding about the phrasing of the questions, or modify the phrasing to their own language (e.g., “*Check it out. Is this real?*” instead of “*Check it out. What is the evidence for or against this belief? Am I exaggerating?*”).

**Use the “6 Helpful Questions” to help come up with positive counterthoughts to the following negative or unrealistic thoughts:**

**Negative Thought: “*Why are so many bad things always happening to me?*”**

Leader: For each negative thought: if group members spontaneously come up with counterthoughts try to show how these are related to one of the 6 questions. If they cannot generate counterthoughts, lead them through the 6 questions until a counterthought is

generated. Allow adolescents to come up with some alternative answers before using part or all of the possible answer below. It may be helpful to focus mainly on the first 3 questions, which seem the most useful, because running through 6 for every example may be cumbersome.

**Possible counterthought:** *“Are bad things really happening to me all the time? [ASK QUESTION: WHAT IS THE EVIDENCE FOR AND AGAINST THIS BELIEF?] Not really, although sometimes it feels like that. I can think of at least a few good things that have happened lately, like \_\_\_\_\_. Maybe not everything in my life is going bad.”*

**Negative Thought:** *“I have no control over the way I react to stress. I tried to change yesterday, but I couldn't! I'll never understand how to do it!”*

Leader: Use the 6 Helpful Questions – allow teens to generate their own counterthoughts FIRST, before using part or all of the possible answer below.

**Possible counterthought:** *“Maybe I don't have to change all at once. It isn't realistic for me to expect to handle my stress really differently all at once. Last week, I was able to keep track of my negative thoughts. That's a small start. Maybe I'll just have to take it slowly at first. It might be hard to do this, but that doesn't mean I won't eventually learn how to do it.”*

**This example reminds us that in this group, we don't expect 100% improvement all at once. Small changes and improvements over time are more realistic. Sometimes there may be small setbacks, but we can overcome them.**

Leader: Have adolescents generate challenges and counterthoughts to the following examples of totally or partly unrealistic thoughts. Note how it is difficult to tell if some thoughts are unrealistic. Practice challenging the more subtle thoughts with the Six Helpful Questions on page 4.3 *“Is this really true? Is this a reasonable conclusion?”* It may be helpful to point out that sometimes it is a matter of DEGREE of being unrealistic, rather than completely realistic or completely unrealistic.

### EXAMPLE #1

**Thought:** *“If I don't get a date for Friday night, I'm a total failure forever.”*

Leader: Use the 6 Helpful Questions.

**Possible questioning:** *“Is this really true? Are you a failure in everything if you don't get a date on one particular night? [ASK QUESTION: WHAT IS THE EVIDENCE FOR OR*

AGAINST THIS; IS THIS AN EXAGGERATION? (E.G., “TOTAL FAILURE”)] *Is it possible that you might get a date sometime in the future? Are there other areas in your life (other than dating) where you are succeeding?”*



**Is this original thought accurate?**

A: *Not completely, no.*

### EXAMPLE #2

**Thought:** “**Either I’m a wonderful person that everyone likes, or I’m a real loser.**”

**Possible challenge:** *“Is this really true? Are there any other possibilities? Could you be somewhere in between? Maybe you’re neither a loser nor everybody’s best friend, but different things to different people?”*



**Is this thought unrealistic?**

A: *Yes.*

**WORKBOOK**

Ask adolescents to turn to page 4.4.

**Leader:** This is a VERY busy session, with a lot of material. If you are running out of time, feel free to shorten this exercise using one or more of the following methods:

- a. Preselect a smaller set of the thoughts on page 4.4 as most pertinent to your group, and focus just on these.
- b. Split teens into small groups or pairs and have each smaller group/pair focus on just a few questions. Afterwards, have the small groups share their responses with the whole group at the end of the exercise.

Note that many of the adolescents will have a difficult time recognizing that these are inaccurate or unrealistic thoughts. Use the comments below to help guide discovery that these are in fact unrealistic beliefs. Also, you may wish to remark to the participants that these thoughts may seem extreme. However, they should pay attention to whether they ever have thoughts like this, even if not so extreme.

**The statements on this page are negative and unrealistic beliefs. Let's come up with some beliefs that are more accurate and realistic to replace them. What are some challenges to these statements?**

Leader: Solicit ideas for thoughts that are more realistic, and have adolescents write them down in their workbooks. Allow adolescents to generate their own challenges to these thoughts. Use the answers given below only if no one generates their own answers. In each case below, have them use the 6 Helpful Questions to come up with the counterthoughts to these beliefs, and identify the particular question used.

1. **“All the important people in my life (especially my parents and/or my friends) must always approve of what I do.”**

*Why is this unrealistic?* It's not really possible to always have the approval of everyone in your life, in every situation. Even though most important people in your life will care about you, not everyone in your life will always approve of what you do. That doesn't mean they dislike you, only that they don't approve of some of the things you do.

**Positive Counterthoughts:** “They may not always approve of what I do, but I know that they care about me. I guess they get upset because they are concerned.” [ARE THERE OTHER POSSIBLE INTERPRETATIONS OF OR EXPLANATIONS FOR THIS SITUATION?]

2. **“I have to be popular or smart (the smartest) all the time in everything I do in order to feel like I'm worth something.”**

*Why is this unrealistic?* It's just not possible for anyone to be the smartest or most popular in everything. This is setting too high a standard for yourself. Give yourself a break! If you want to be good at something, at least limit yourself to one or two main things, but not everything!

**Positive Counterthoughts:** “Even if I'm not the best at everything, I can do \_\_\_\_\_ pretty well. I'm as good or better at it than lots of other people who are O.K. people.”

3. **“People (including me) who do even one thing that I disapprove of should feel guilty, and should be punished severely.”**

*Why is this unrealistic?* It's not possible to avoid all mistakes all the time. Making lots of the same mistakes over and over may be worth being concerned about, but even that doesn't merit severe punishment. And certainly doing just one or two things wrong is no reason to feel extraordinarily guilty. Everyone makes mistakes; give yourself a break!

**Positive Counterthoughts:** “Am I really making more mistakes than other people? Maybe I'm judging myself too harshly. I'm a normal human being, who makes occasional mistakes. I'll try harder next time, but I won't beat myself over the head with this one mistake!” [IS THIS USEFUL FOR ME TO THINK THIS?]

**4. “My unhappiness is someone else's fault. I can't help feeling the way I do.”**

**Why is this unrealistic?** While it is true that other people will do things that you don't like, the way you feel about it is something that you control. That's the basis of the Coping With Stress class: you can choose how upset or unhappy you want to feel. With time, you can learn to control how you react, too.

**Positive Counterthoughts:** “When other people do things I don't like, maybe it's O.K. for me to get upset for a while. But when I'm down and depressed for a long time, I'd rather change the way I feel. In the long run, it only hurts me when I stay depressed (angry, hurt, upset, etc.). I can't control what others do, but I can control how I react to what they do.” [IS THIS USEFUL FOR ME TO THINK THIS?]

**5. “It's terrible when things aren't the way I'd like them to be.”**

**Why is this unrealistic?** It may be upsetting, but is it really terrible? Who else would find this terrible? This seems like an over-exaggeration. Some things really are terrible, such as someone dying, or an auto accident. But most problems are usually much smaller than that, and are not really terrible or horrible. Are your problems “horrible”, or mostly just annoying, upsetting, or inconvenient?

**Positive Counterthoughts:** “It's annoying when things aren't the way I like them, but it's not the end of the world.” [SO WHAT? WILL THIS MAKE A BIG DIFFERENCE TO ME IN A WEEK, MONTH, YEAR? WILL I BE OKAY, EVEN IF THIS IS THE CASE?]

**6. “When something seems dangerous or something could go wrong, I must constantly worry about it.”**

**Why is this unrealistic?** Again, this is a matter of degree. It may make sense to worry a little bit, and everyone does this sometimes. But it is no good to worry constantly; that only makes you feel tense and miserable, and usually doesn't solve the problem.

**Positive Counterthoughts:** “I'll probably worry about this for a while, but then I'll

take some time to think about how to solve the problem. Worrying all the time will just make me feel worse.” [HOW LIKELY IS IT THAT THIS (AWFUL THING I'M ANTICIPATING) WILL REALLY HAPPEN?]

**7. “There must be a perfect solution to human problems (including mine). I can't settle for less than the perfect solution.”**

*Why is this unrealistic? Unfortunately, there are no “perfect” solutions. Perfect solutions are not possible because of two reasons. First, some solutions which are “perfect” are just not humanly possible. For example, everyone wants an end to world famine, but it is impossible to completely erase it (although we can certainly work towards reducing it a great deal). The second reason is that so many people want different things, it is never possible to come up with a solution that fully satisfies everyone. If we waited for a “perfect” solution to every problem, we'd never solve anything: we'd always be waiting.*

**Positive Counterthoughts:** “I'm may not be totally happy with this solution, but I can live with it. If possible, I'll keep working towards a better solution.” [WILL I BE OKAY, EVEN IF THIS IS THE CASE?]

**Optional, if time allows**

**There is an expression that may be useful here:**

**BLACKBOARD or FLIPCHART**

**The perfect is the enemy of the good**



**DOES ANYONE HAVE AN IDEA WHAT THIS MEANS? HOW MIGHT THIS APPLY TO THIS**

<b>REVIEW Main things learned today</b>
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**The first or automatic thought is often just the tip of the iceberg. There typically are more thoughts underlying this.**

**Negative thoughts can be examined for their accuracy and usefulness. Asking yourself the 6 questions can be helpful ways of countering negative thoughts. It also sometimes can be helpful to respond to your thoughts as if you would if you were talking to a good friend.**

Leader: if it comes up, acknowledge that there are realistically bad things that do happen (deaths, parental divorce, abuse, etc.). We want to acknowledge that bad things do happen and they are understandably disturbing, but they do not have to inevitably lead to a serious depression. Foreshadow that we will come back to dealing with these situations in a later session ((related to the discussion of coping strategies in Session 6). We try to control and change the things we can, and the things we can't change, then we control how we respond to them. Some things are really difficult (e.g., death, abuse) but they do not mean that there is something wrong with them or that their future has to be terrible.



**ARE THE 6 HELPFUL QUESTIONS USEFUL FOR YOU? WHEN MIGHT YOU USE THEM?**

Leader: It helpful to reiterate frequently that often it's easy to come up with a counterthought when we are working on it as a group. What's harder is to do it right as you're having the thought, or right when you're feeling down – that's when you might need the 6 questions. We talk about them as a “tool” that you may or may not need, but it's nice to have around (rather than as a necessary step for countering every negative thought). Otherwise, teens seem to think that the whole “countering your thoughts” process is just too cumbersome to do in their real lives.

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### III. PRACTICE ASSIGNMENT (5 min.)

<b>WORKBOOK</b>
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Ask adolescents to turn to the practice assignment on page 4.5.

- 1. Continue to keep track of negative thoughts and activating events, using pages 4.6 and 4.7. If you can, try creating a realistic, positive counterthought for each one, writing it down in the right-hand column.**

**2. Continue to fill out your Mood Diary on page 1.1.**

**Success Activity**

**Let's do our practice for today.**

- 1. Write down at least one of the worst negative thoughts you have had today on page 4.6. Describe the situation or event that made you think this way.**



**WHEN YOU CATCH YOURSELF THINKING NEGATIVE OR UNREALISTIC BELIEFS THIS WEEK, WHAT WILL YOU DO?**

*A: ask yourself the 6 Helpful Questions and think of some more accurate thoughts instead. Fill this in the “positive counterthought” column on page 4.6 or 4.7.*

**Pay particular attention to whether your mood changes after you have come up with a counterthought (compared to when you first had the negative thought).**

- 2. Fill out your Mood Diary for today.**

**V. SHARING ACTIVITY (5 to 10 min.)**



**WHOSE TURN IS IT TODAY? WHAT DO YOU HAVE TO SHARE WITH US?**

Leader: if necessary, remind the group about guidelines:

1. No really loud activities (remember, we share this building).
2. Nothing that could harm anyone.
3. Most important, something positive that you are proud of or happy about.

You may also use this time for other activities or discussions, especially if the group consensus supports this. For example, if a “process discussion” begins earlier in the group but is prematurely terminated (e.g., to continue with the scripted exercises), this time could be used to extend this discussion. However, be sensitive to the adolescent whose turn it is to present their personal hobby/activity/objects. This person may feel rejected if their turn is “pre-empted” by

other group issues. Approach this in a diplomatic fashion, allowing the scheduled teen several options: to present today, to shift until the next session, etc.



**WHO WOULD LIKE TO SHARE NEXT SESSION?**

## Session 5 Is It Really About Me? (90 min.)

Materials needed for this session:

1. Extra workbooks.
2. Extra pens and pencils.

### **BLACKBOARD or FLIPCHART**

#### AGENDA

- I. REVIEW (5 min.)
- II. DISCOVERING UNDERLYING NEGATIVE BELIEFS (35 min)
- III. IS IT REALLY ABOUT ME? (35 min)
- IV. PRACTICE ASSIGNMENT (5 min.)
- V. SHARING EXERCISE (10 min)

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### **I. REVIEW (5 min.)**

**WORKBOOK**

Ask adolescents to turn to pages 4.6 and 4.7



**DID YOU RECORD AT LEAST ONE OF YOUR UNREALISTIC OR NEGATIVE THOUGHTS EACH DAY?**



**DID YOU RATE YOUR MOOD IN RESPONSE TO THE NEGATIVE THOUGHT?**



**DID YOU RECORD THE ACTIVATING EVENT FOR THAT THOUGHT?**



**DID YOU USE THE 6 HELPFUL QUESTIONS? HOW DID THOSE WORK FOR YOU?**



**HOW ABOUT A REALISTIC COUNTERTHOUGHT? DOES ANYONE WANT TO SHARE A GOOD ONE?**



**DID YOU RATE YOUR MOOD IN RESPONSE TO THE COUNTERTHOUGHT? DID YOU NOTICE A CHANGE IN YOUR MOOD?**



**WHAT ABOUT YOUR MOOD DIARY (PAGE 1.1)? HOW HAS THAT BEEN?**



**DID ANYONE LEARN ANYTHING UNEXPECTED FROM THIS PRACTICE?**

**We'll look more closely at your negative thoughts in a couple of sessions. Today, however, we'll talk more about realistic, positive thoughts.**

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## **II. DISCOVERING UNDERLYING NEGATIVE BELIEFS *or* TYPES OF UNREALSTIC BELIEFS (20 min.)**

### **Objective**

1. To identify the negative beliefs in cartoon sequences and replace them with realistic, positive counterthoughts.
2. Alternative: to review the different types of unrealistic beliefs (starts on page 57).

### **Negative Beliefs and Realistic Counterthoughts**

**Over the last few sessions, we identified some unrealistic thoughts in cartoons. These unrealistic thoughts had to do with exaggerations and expectations of others. Let's practice that again.**

**It's often easier to recognize unrealistic thinking when we can identify the whole thought. The whole thought is called the BELIEF. These are the beliefs that are below the surface of the tip of the iceberg, or the inner layer of the onion (remember those ideas?). Remember: your beliefs can influence how you feel.**

Ask adolescents to look at the Cathy cartoon on page 5.1.

WORKBOOK

**I want you all to notice the three boxes just below the cartoon. They are labeled the Activating Event, the Belief and the Consequence (emotions and/or behaviors). Together the initials form A-B-C ... which is why we call this the ABC method.**

Leader: Have adolescents identify the Activating event and unrealistic Belief in the Cathy cartoon. Then ask them to replace the negative belief with a realistic, positive counterthought, using the 6 Helpful Questions if necessary. Have adolescents write their answers in the appropriate boxes at the bottom of the page. Ask teens to share and compare their answers. Possible answers are provided below. Note that there are many different possible unrealistic thoughts to each of these cartoons. Permit adolescents a great deal of leeway in identifying and countering a number of negative thoughts per cartoon.

### Sample Answers to Page 5.1 (Cathy cartoon):

*ACTIVATING EVENT*: Irving is spending money on some faddish things.

*NEGATIVE BELIEF*: “If Irving really loved me, he would spend his money on me, his girlfriend, instead of on faddish stuff for himself.”



**WHAT COULD BE THE UNDERLYING OR WHOLE BELIEF HERE?**

**Remember, this is the theme, the main underlying negative belief, and the core of the ideas about being bought things and love. The “Irving” thought above is just one example brought on by this particular activating event.**

*UNDERLYING BELIEF*: “The only way you know people love you is if they buy you lots of things.” Teens may have other interpretations, but the key is to get them to look for an underlying theme.

*POSITIVE COUNTERTHOUGHT*: “Irving has the right to spend his money on whatever he wants; it doesn't mean he loves me any less.” [IS THERE AN ALTERNATIVE EXPLANATION?]

OR ... “Real love doesn't need to be proven by gifts. There are other ways that I know people love me (e.g., what they say, caring behavior). Presents are nice, but if I don't get them all the time it doesn't mean that I am unloved.”

**Another common type of unrealistic belief is jumping to conclusions. An example of this type of underlying, unrealistic belief is “If I look and act like everyone else my age I’ll be popular, and being popular will make me happy.”**

<b>WORKBOOK</b>
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Ask adolescents to look at the Garfield and Spiderman cartoons on pages 5.2 and 5.3, and ask them to complete the worksheets.

Leader: Page 5.3 (Spiderman) is optional, depending on how much time you have and how well the group seems to be understanding the concepts. Correct and compare answers after the adolescents complete the worksheets on both pages. Possible answers are provided below. *Alternatively*, if teens are bored or tired of cartoons, you may use the “Problem Solver” letters on Workbook pages 5.4 and 5.5 to examine more negative thoughts.

### **Sample Answers to Page 5.2 (Garfield)**

*ACTIVATING EVENT:* Garfield has to go somewhere with his owner, who is dressed in goofy clothes (Note: Teens may need some help to see that Jon's clothes are “nerdy.”. This might remind them of how they think and feel when they are with their parents: “I’m embarrassed to be seen with my dad because he dresses like an old man.”)

*UNREALISTIC BELIEF:* “I’m ashamed to be seen with John. Anyone who sees me spending time with someone who looks different, or like a “geek,” may think that I’m a geek too.”

*POSITIVE COUNTERTHOUGHT:* “The people who really know me know that I’m not a geek. People who jump to that conclusion are probably not worth knowing.

OR... “Its not what you wear, but who you are and how you treat other people that really matters.”

### **Optional, if time allows and teens will benefit**

#### **Sample Answers to Page 5.3 (Spiderman)**

It helps to give a hint that Spiderman is already giving himself some positive counterthoughts.

*ACTIVATING EVENT:* Spiderman told MJ his secret identity.

*UNREALISTIC BELIEF:* “MJ should fall into my arms, hopelessly in love, when she finds out my true identity.”

*POSITIVE COUNTERTHOUGHT:* “I don't know how MJ will react. She may be shocked or need some time to adjust to my true identity.”

**Optional, if time allows and teens will benefit**

**WORKBOOK**

Ask teens to read aloud the letters on pages 5.4 and 5.5.

Leader: have group members read aloud the letters from fictional teenagers on Workbook Pages 5.4 and 5.5. As a group, identify the negative thoughts. Have youth split up into pairs or triads and ask the “6 Helpful Questions” about these negative thoughts. If these thoughts are not realistic (most of them are not), then the small groups should use the A-B-C forms to generate the Activating Event, the Belief, the Consequence and Counterthoughts.

Another option is to have the teens underline every negative thought, but only do the A-B-C form on 2 thoughts. They may not have enough time to counter every negative thought in the letters. You may assign half the group to one letter, half to the other.

*Optional Exercise instead of Discovering Underlying Beliefs:*

**Different Types of Unrealistic Beliefs**

Leader: this section is not required, but is an alternative to the preceding section. Some therapists have found the “Discovering Underlying Beliefs” section difficult to teach, while others have found that it helped some participants. If you believe that it will not be helpful, we suggest instead reviewing types of unrealistic beliefs in this section.

**While each unrealistic thought or belief is different, they do tend to come in a few basic “flavors.” We’ve already identified one version—exaggeration—on workbook page 4.1 and elsewhere.**



**CAN ANYONE THINK OF OTHER DIFFERENT TYPES OF UNREALISTIC BELIEFS?**

Leader: Give the participants a chance to come up with the basic types themselves. Write down their answers on the flipchart or blackboard. One hint would be to have the youth look at the “6 Helpful Questions” in their workbook (page 4.3) and see if this suggests basic types of unrealistic thoughts.

After the youth have generated their ideas about types of unrealistic beliefs, you may also introduce the other remaining types: Jumping to conclusions, over-reactions, All-or-None thinking, unreasonable expectations, catastrophizing. Ask adolescents to generate examples of each of these – and if time permits, counterthoughts for each example.

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### III. IS IT REALLY ABOUT ME? or ... CONVERTING NONPERSONAL THINKING TO PERSONAL THINKING (10 min.)

#### Objective

1. To help each student convert nonpersonal thinking to personal thinking by identifying the Activating event and describing his or her personal reaction to it.

#### Finding the Personal Belief “Behind” Nonpersonal Negative Thoughts

Sometimes when we react to a particular Activating event, we have a negative thought that involves someone or something else, but not ourselves. Here's an example.

#### BLACKBOARD or FLIPCHART

**Activating Event**

Getting poor grades at school.

**Nonpersonal Belief**

“School sucks! I have bad teachers!”

**Consequences**

Getting mad, angry, upset, or maybe depressed.

If nonpersonal thoughts make us feel down, they may be **PERSONAL THOUGHTS IN DISGUISE** – personal beliefs underlying the nonpersonal thoughts. Last session, we looked at our personal negative thoughts. Now we're going to look at nonpersonal negative thoughts to see why they make us feel negative or down. We're going to look at the part of the iceberg that is underwater (or peel back the layers of the onion) to see if there are any personal thoughts behind them.

### Look at Your Own Nonpersonal Negative Thinking

You might have nonpersonal negative thoughts such as “Fred is a jerk” or “Sally is rude” or “School sucks.” These thoughts are the likely result of some Activating event or events. If you can identify the event that triggers this thinking, you can uncover the hidden personal thought.

For example, Fred might have failed to do something you expected him to do in a certain situation, or Sally forgot to introduce you to someone you really wanted to meet. The next step is for you to consider whether your expectation was unrealistic.

Often when we feel anger, it is because someone else did not do something we wanted or did not live up to our expectations.

When you hear yourself saying “*He or she SHOULD have...*” that is often a clue that you have an expectation about someone else’s behavior—an expectation that might be unrealistic.

At these times, it can be useful to remind yourself that you can change your own reactions, but not the behaviors of others. Although it would be nice and preferable if other people acted the way we wanted them to, this is not always possible.

This may be a time to consider finding other ways to get what you want if you can’t get it from this other person.

#### WORKBOOK

Ask group to look at the Calvin & Hobbes cartoon sequence on page 5.6.

Let's work on the Calvin & Hobbes cartoon together. I want you to fill out the thought diagram as we discuss the cartoon.

**1. What is the nonpersonal negative thought?**

A: “*You never let me do anything.*”

**2. Identify the Activating Event.**

A: *Calvin's mom won't let him drive the car.*

**3. What is the disguised personal belief?**

A: “You think that I’m not responsible enough to drive the car. You don’t trust me!”

**4. What would be a more accurate or realistic way to think (positive counterthought)?**

A: “It’s illegal for me to drive the car right now, but mom will let me drive when I’m old enough.” [ARE THERE OTHER POSSIBLE INTERPRETATIONS OF OR EXPLANATIONS FOR THIS SITUATION?] ...**or...** “My mom trusts me to do things that are appropriate for my age, even if she doesn’t trust me to drive the car. It doesn’t mean she disrespects me, it is just her way of making sure I’m safe.”



**DO YOU HAVE A VERSION OF THIS “TRUST” SITUATION WITH YOUR OWN PARENTS OR TEACHERS? ARE YOUR THOUGHTS ABOUT YOUR SITUATION ACCURATE?**

**WORKBOOK**

Ask adolescents to look at the thought diagrams on pages 5.7 and 5.8.



**DO YOU HAVE ANY EXAMPLES OF NONPERSONAL THOUGHTS FROM YOUR OWN EXPERIENCES?**

**Choose two of the negative thoughts that you listed on pages 2.8 or 2.9 (Negative Thoughts Baseline) or pages 4.6 or 4.7 that are nonpersonal: that is, not clearly about yourself, but about someone else. Pick ones you would be willing to share. Write one of them at the top of page 5.7, and write the other one at the top of page 5.8. Then fill in the A-B-C thought diagram on both pages.**

Leader: Have adolescents work on page 5.8 later if there isn't enough time to do it now. If time permits, go over discussion and debriefing as described below.

**Now, pair up in twos or threes, and go over your A-B-C thought diagrams of your nonpersonal thoughts.**

Leader: After discussion in pairs/triads, bring group back together for overall discussion.



**ANY SURPRISES? ANY SIMILARITIES? WHAT ARE SOME TRICKS TO RECOGNIZING THE PERSONAL THOUGHTS THAT MAY BE THERE “BENEATH” THE NON-PERSONAL BELIEFS?**

### III. PRACTICE ASSIGNMENT (5 min.)

**WORKBOOK**

Ask adolescents to turn to the practice assignment on page 5.15.

1. Continue to use the tracking forms 4.6 and 4.7 to record negative thoughts, activating events, and realistic, positive counterthoughts.
2. Optional: if you want you can use the A-B-C forms on pages 5.7 through 5.14 to help write out your beliefs and counterthoughts.
3. Continue to fill out your Mood Diary on page 1.1.



Are there any questions?

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### Success Activity

Let's do our practice for today.

1. Pick one negative thought on page 4.6 or page 4.7 and come up with a realistic counterthought.
  2. Fill out your Mood Diary for today.
- 

### V. SHARING ACTIVITY (5 to 10 min.)



WHOSE TURN IS IT TODAY? WHAT DO YOU HAVE TO SHARE WITH US?

Leader: if necessary, remind the group about guidelines:

1. No really loud activities (remember, we share this building).

2. Nothing that could harm anyone.
3. Most important, something positive that you are proud of or happy about.

You may also use this time for other activities or discussions, especially if the group consensus supports this. For example, if a “process discussion” begins earlier in the group but is prematurely terminated (e.g., to continue with the scripted exercises), this time could be used to extend this discussion. However, be sensitive to the adolescent whose turn it is to present their personal hobby/activity/objects. This person may feel rejected if their turn is “pre-empted” by other group issues. Approach this in a diplomatic fashion, allowing the scheduled teen several options: to present today, to shift until the next session, etc.



**WHO WOULD LIKE TO DO NEXT SESSION?**

**Session 6**  
**COPING WITH ACTIVATING EVENTS (90 min.)**

Materials needed for this session:

1. Extra workbooks.
2. Extra pens and pencils.

**BLACKBOARD or FLIPCHART**

**AGENDA**

- I. REVIEW (5 min)
- II. MORE A-B-C PRACTICE or SOURCES OF BELIEFS (30 min)
- III. USING PROBLEM SOLVING TO COPE WITH ACTIVATING EVENTS (35 min)
- IV. PRACTICE ASSIGNMENT (5 min.)
- V. SHARING ACTIVITY (10 min)

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**I. REVIEW (5 min.)**

**WORKBOOK**

Ask adolescents to turn to pages 4.6, 4.7, 5.8 or 5.9



**WERE YOU ABLE TO EXAMINE ANY OF YOUR UNREALISTIC THOUGHTS ON THESE PAGES?**



**DID YOU FIND THAT ANY OF THESE WERE NOT ACCURATE? DID YOU USE THE 6 HELPFUL QUESTIONS?**



**FOR THE UNREALISTIC OR INACCURATE THOUGHTS, DID YOU CREATE A REALISTIC COUNTERTHOUGHTS? HOW DID THIS WORK FOR YOU?**

Today we'll start looking more closely at your unrealistic thoughts.

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## II. A-B-C PRACTICE or SOURCES OF UNREALISTIC BELIEFS (25 min.)

### Objective

1. To either practice using the A-B-C method by analyzing a cartoon sequence, or
2. Identify sources of unrealistic beliefs, and how to counter-act them

Leader: At this point, you may chose one of two alternative topics, or some blend of the two. Some groups (particularly those with fewer members) may feel that a review of the A-B-C method is redundant and boring. However, groups with more adolescents may need this extra practice because not all teens were able to discuss their situations in previous sessions. Using your discretion, you may skip or shorten the A-B-C review and use the extra time to introduce another topic: *Sources Of Unrealistic Beliefs (which begins on page 57)*.

### ALTERNATIVE TOPIC 1: MORE A-B-C PRACTICE

WORKBOOK

Ask adolescents to turn to pages 6.1 and 6.2.

Look at the Garfield cartoon on page 6.1. Notice that Garfield has two different feeling reactions in this cartoon.



What are Garfield's two feelings?

A: *He's happy at first, then embarrassed or humiliated.*

Use the A-B-C method to analyze the Garfield cartoon. Since there are two feelings, you will need to use two thought diagrams. Fill in the two empty boxes at the bottom of page 6.1. Then turn to page 6.2 and fill in the two boxes at the bottom of the page.

Leader: When most of the adolescents have finished, briefly discuss the answers.

**Sample Answers to Garfield (page 6.1):**

*CONSEQUENCE*: Amusement at someone else looking silly, “ha ha” feeling.

*ACTIVATING EVENT*: Odie (the dog) is wearing a coat to go on a walk.

*POSSIBLE BELIEFS*: “Anyone who looks different is funny-looking.” ...or... “I’m better than you because I don’t have to conform.”

**Sample Answers to Garfield (page 6.2):**

*CONSEQUENCE*: Feeling humiliated, embarrassed

*ACTIVATING EVENT*: Garfield is wearing an outfit that he thinks is ridiculous.

*POSSIBLE BELIEFS*: “If your appearance isn’t cool [or ] then people will think that you aren’t worth knowing.” ...or... “Anyone who looks different is funny-looking.” ...or... “Anyone who sees me wearing these funny-looking clothes will automatically think that I am [a geek, a nerd, not cool, ...]”

**In this cartoon, two different Activating events cause two different feelings (Consequences) as a result of the SAME underlying belief (“Anyone who looks different is funny-looking.”).**



**Is the belief at least partly unrealistic?**

A: Yes.



**What would be a more realistic belief?**

*Sample answer*: “Feeling comfortable with the way I look is more important than what other people think.” ...or... “Anyone who jumps to the conclusions that I am a [geek, nerd] just because of the clothes I wear may not be someone whose opinion really matters, or who I’d like to have as a friend.” ...or... “Clothes do not make the person – I’ve known mean or unpleasant people who dress great, and wonderful people who dress very plainly or even oddly. Anyone who thinks that how you dress is a sign of how good a person you are is shallow and only into appearances. Their opinion doesn’t really matter in the long run.”

### Small Group A-B-C Exercise

#### WORKBOOK

Ask adolescents to turn to pages 6.3 and 6.4.

Leader: Have teens break into small groups of 2 or 3, and as a group complete at least one A-B-C form for each adolescent, based on a personal negative thought that may have occurred in the past few days (perhaps drawn from pages 2.8, 2.9, 4.6 or 4.7). Use teen workbook page 6.3 or 6.4.

### ALTERNATIVE TOPIC 2: SOURCES OF UNREALISTIC BELIEFS

**Let's talk about where unrealistic beliefs come from.**



**WHERE DO YOU THINK NEGATIVE OR UNREALISTIC BELIEFS COME FROM? WHAT ARE SOME OF THE SOURCES?**

Leader: ask teens to generate sources. Typical answers include peer group, media (TV, movies), society, and especially parents. Ask teens to give examples of negative thoughts they have which they believe originated from one or more of these sources.



**WHY WOULD THIS BE IMPORTANT? HOW WOULD KNOWING THE SOURCES OF YOUR NEGATIVE BELIEFS BE HELPFUL?**

Possible Answers: knowing where these unrealistic and overly negative beliefs come from may help counteract them (“just because other people believe this doesn’t mean I have to ...”). Also, you may find that family, friends or teachers “push back” when you start thinking in more realistic and optimistic ways. Knowing this in advance may prepare you for how you want to deal with this.



**HOW DO THESE BELIEFS MAKE THEIR WAY FROM [PARENTS, TV, PEERS] TO YOU? ARE YOU ALWAYS AWARE THAT IT IS HAPPENING?**

A: Try to lead group to the theme that the transfer of beliefs is both intentional and unintentional, and that we are often unaware that it is happening.



**IS IT REASONABLE TO BE MAD AT PARENTS OR FRIENDS WHEN YOU DISCOVER THAT THEY MAY BE A SOURCE OF AN UNREALISTIC OR NEGATIVE BELIEF? DO YOU THINK THIS IS INTENTIONAL OR ACCIDENTAL?**

A: CAREFUL! A first reaction is often to get mad. But, this may be a belief that your parents or friends also believe in. They may not even question whether it is true or not. If you look carefully, you may see signs that parents, friends and/or teachers believe very similar ideas about themselves or the world. Blaming parents, friend or others isn't productive. You're here now—let's work on the part you have control over: you own reactions.

**You may discover unrealistic or negative beliefs that you would like to change. However, if these beliefs are shared by other important people in your life, changing these beliefs may be very difficult to do.**



**HAS ANYONE TRIED TO CHANGE AN UNREALISTIC BELIEF, BUT HAD YOUR COUNTERTHOUGHT CHALLENGED BY FAMILY, FRIENDS? WHAT CAN YOU DO ABOUT THIS? ANY TIPS, SUGGESTIONS?**

Leader: Lead discussion about ways to change negative beliefs that are shared and/or reinforced by other important persons. Before providing solutions listed below, encourage teens to generate their own solutions. Here are some possible solutions to provide if not generated by teens:

1. Find other persons (e.g., in this group; new friends) who support your more realistic and positive beliefs about yourself and your situation.
2. Have a discussion with [family, friends] about your attempts to challenge your negative thoughts, and ask for their support in being more realistic and positive. How do you think this will go?
3. Yell at family members and tell them how stupid they are. This is not such a good idea, is it? What other ways could you say this that would be less likely to start a fight?
4. What if you've tried solution #2 (or #3) without success? You may have to accept that you must take care of your beliefs by yourself; you can't change everyone. Now is a good time to find others who support your more positive outlook.
5. Your realistic counterthought may have to be amended with “...*although my family or friends doesn't agree with this, I believe that ...*”

6. If negative beliefs come from society or the media (e.g., “*To be happy you must be thin*”), you might start a campaign to change these overall beliefs. You're probably not alone; join a group that is trying to change these unrealistic ideas, or start your own group.



**WHAT HAVE YOU LEARNED FROM THIS DISCUSSION? WHAT WILL YOU TAKE AWAY AND APPLY TO YOUR LIFE?**

**What we just did together was an example of “problem solving.” That is, we all tried to brainstorm solutions to a problem, and then we thought through which of these solutions seemed the most likely to work. People solve problems and make decisions this way every day.**



**FOR EXAMPLE, HOW MANY OF YOU HAVE EVER MADE A LIST OF “PROS AND CONS” ABOUT SOMETHING? WHO HAS AN EXAMPLE THEY’D BE WILLING TO SHARE?**

Leader: Ask teens to generate one or two non-threatening examples and be prepared to share a brief example yourself (like when you bought a car).

**Exactly. Thinking through pros and cons like this is a big part of developing good problem solving skills.**

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## **II. USING PROBLEM SOLVING SKILLS TO DEAL WITH ACTIVATING EVENTS (30 min.)**

### **Objectives**

1. To present a brief overview of problem solving skills
2. To discuss four types of solutions that may be helpful in dealing with activating events.
3. To have students practice using problem solving to handle activating events in cartoons and other examples.

**For the next half hour or so, we are going to talk about how to use problem-solving to deal with activating events. We’ve already talked about one good solution for coping with activating events, that is, by changing how we think about events. This is a really powerful skill, but it isn’t the only way to deal with things.**

WORKBOOK

Ask students to read the Shoe cartoon on page 6.5

**Take a look at the cartoon on page 6.5. Let's read it quickly. Who wants to be Shoe (the dad)? Who wants to be Skyler?**



**WHAT IS THE ACTIVATING EVENT OR PROBLEM HERE? WHAT DOES SKYLER DO TO COPE WITH THE ACTIVATING EVENT? WHAT ARE THE PROS AND CONS OF THE SOLUTION HE PICKED?**

Leader: Help the group see that the activating event is the poor grade on the test (and/or telling his Shoe about the bad grade). The “solution” in this case is exactly what we’ve all been working on – Skyler changed how he thought about his bad grade in order to feel better about it and to make his Dad feel better about it. The main pro of this approach is that Skyler doesn’t feel too depressed, but, on the con side, he might not feel too motivated to study.

**Now, let's try to think of some other ways that Skyler could have dealt with the problem of getting bad grades. Problem solving has three main steps:**

#### BLACKBOARD

1. **Brainstorm.** Think of as many solutions as you can, even silly ones.
2. **Pros and cons.** Evaluate which solution is the “best.”
3. **Try and try again.** Try it out and decide if it worked. If not, go back to brainstorming.

**Again, a lot of people use this method for making decisions without even really thinking about it. But, when we are upset or problems seem very hard to solve, it can be a good idea to remind yourself of these three steps to get your problem solving skills going.**

Leader: at this point you will conduct a mock problem solving with the group. You can either focus on Skyler’s problem of getting bad grades (Workbook page 6.5), or return to the problem situations described in the letters on Workbook pages 5.4 and 5.5.



**WHAT ARE SOME OTHER WAYS THAT \_\_\_\_ COULD DEAL WITH THEIR PROBLEM?**

Leader: Try to get the group to make a very long list of good and bad solutions to this problem. These might be good to write on the board (or to have one of the teens write for

you). If teens start evaluating solutions as they are generated, stop them and ask everyone to hold off with evaluating until a large solutions list has been created.



### WHAT SOLUTIONS SEEM LIKE THE BEST ONES? WHAT ARE THEIR PROS AND CONS?

Leader: Quickly review one or two solutions, including a bad one, focusing on whether the solution is likely to fix the problem (effective) and not cause other problems (safe).

**Sometimes, just changing our thinking about a stressful situation doesn't really do enough. It may be useful to think how you might be able to deal with the Activating Event, or the stressful situation itself. Besides examining our thinking, there are four general ways we can deal with stressful Activating Events:**

#### BLACKBOARD or FLIPCHART

1. Don't respond, or change the way you respond to the Activating Event
2. Predict and prevent the Activating Event.
3. Change the Activating Event.
4. Accept both the Activating Event and the Consequence (emotions)

#### DON'T RESPOND, OR CHANGE THE WAY YOU RESPOND to the stressful situation

**In the next session, we'll learn some thought interruption techniques that will help us NOT RESPOND to activating events.**

**We have already learned how to CHANGE the way we respond to activating events by using the A-B-C method to make our thoughts less negative.**

#### PREDICT and PREVENT the stressful situation

**We can also simply prevent activating events from ever happening, especially those stressors that we can predict in advance. How can we do this?**

*A: Schedule your time so that you steer clear of problem situations; make decisions in advance to spend less time with people who are mean or treat you badly; make other necessary preparations in order to prevent stressful or negative situations from happening in the first place-- such studying as to keep from failing tests , etc.*

Leader: Ask adolescents to offer some specific examples. Try to get the group to problem solve a strategy for predicting problems, and then what can be done to prevent them from happening – or at least make them have less impact.

For example, have teens identify re-occurring situations that provoke sadness, anger, etc. (e.g., fights with parents about practice). What can they do to *predict and prevent* these situations? Use brain-storming techniques to generate a list of alternative strategies. In this example, some strategies might include: doing practice so parent won't bother you; changing the topic when parents bring it up; avoiding being home when parents are there; etc. Ask teens to rank the effectiveness of the solutions; which would they use? How well would it work? Would using this solution make them feel better? Continue with several other problem situations if time allows.

### **CHANGE the stressful situation**

**We might also be able to directly CHANGE the stressful situation or activating events that are upsetting. First, though, in some cases we won't be able to change the stressful situation, either because we couldn't PREDICT it (e.g., when an accident happens), or because we have VERY LITTLE CONTROL over the people or circumstances which are part of the stressful situation (e.g., parents, teachers, school, etc.).**

**When you're a teenager, it's difficult to change a stressful situation like having to take tests. Can anyone think of other stressful situations that would be difficult to change?**

Leader: Ask adolescents to offer some specific examples. Make two columns on the board: HARD TO CHANGE and EASY TO CHANGE, and list their responses under either column. NOTE: Teens may be overly pessimistic about their ability to change (or at least modify) certain stressful situations with teachers, parents, etc..

The group may re-examine stressful situations initially placed under the HARD TO CHANGE column, to see if the BELIEFS about the teen's helplessness in these situations are realistic or unrealistic. One common unrealistic teen response is “all or none” thinking, in which they do not see intermediate solutions where both they and their parents/teachers each make some changes in the Activating Event (stressor). Instead, they view the situation(s) as either entirely their way, or entirely their parents' way.

If appropriate, use the A-B-C techniques to challenge these thoughts. Ask, “*Are you **totally** unable to change this stressful situation? Is there anything **YOU** could do differently? How would that change how your parent, teacher, etc., reacts?*”

If time permits, return to the CAN CHANGE column and use group brainstorming to generate solutions for these.

### ACCEPT the stressful situation

**Finally, we also can ACCEPT that some situations stink, and we are probably going to be upset by them.**

**Accepting the stressful situation and our reaction—particularly those we really cannot change—makes the most sense when our reaction is reasonable: for example, when we are sad when a friend moves away. Unless that sadness is excessive or lasts so long it starts to become a problem for you, your reaction is understandable and reasonable. Accepting that your sadness is realistic may be the first step towards healing and recovering from this understandably upsetting situation.**

**Of course, even if you accept a stressor or activating event and your emotional reaction to it, you still can do things to help yourself feel better.**



**WHAT COULD YOU DO TO HELP YOURSELF FEEL BETTER? TO “TAKE CARE OF YOURSELF?”**

Possible answers: hang out with other friends, talk with someone about how you feel, or keep in touch with the friend who moved away (all of which are examples of the other ways of dealing with stressors).

Do things that make you feel good like listening to music, going out with friends, playing sports, take a shower, etc.

Talk to people you admire and ask them how they dealt with similar situations or other kinds of tough times.

### Optional: If time permits

**WORKBOOK**

Ask adolescents to look at the examples on page 6.6

**On page 6.6, there are examples of some problems you might encounter when you use the A-B-C method to change your thinking. Decide which of the four ways to deal with activating events would be best to use in each of these examples.**

Leader: Time limit: 2 or 3 minutes for each situation.

**WORKBOOK**

Ask adolescents to turn to page 6.7.

**Now I want you to analyze one of your own situations. Think of a time this week when you were upset, down, bothered, but you believe your reaction was reasonable. Use the A-B-C method to diagram the situation.**

**If you decide that your beliefs are realistic, think about which course of action would be best for you.**



**HOW WOULD YOU DEAL WITH THE PROBLEM SITUATION?**

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#### **IV. PRACTICE ASSIGNMENT (5 min.)**

**WORKBOOK**

Ask adolescents to turn to the practice assignment on page 6.8.

- 1. Try to meet your session goal, which is to analyze a personal situation by using the A-B-C method and filling out a thought diagram once each day (there are four copies of the thought diagram in your workbook on pages 6.9 through 6.15).**
- 2. Continue to fill out your Mood Diary (page 1.1). Make certain you bring your Mood Diary next week, because we will be going over it during group.**
- 3. Next session we'll talk about prompts, or reminders, for remembering to use the A-B-C techniques in everyday life. For some people this might be how they feel, or how other people are reacting to them, or certain reminders like songs. For your practice, please think about what might be good reminders for you. We'll ask you to share these next session.**

Are there any questions?

### Success Activity

1. **Fill out your Mood Diary for today.**
2. **If time permits, fill out page 6.9 with a personal A-B-C situation.**

#### V. **SHARING ACTIVITY (5 to 10 min.)**



**WHOSE TURN IS IT TODAY? WHAT DO YOU HAVE TO SHARE WITH US?**

Leader: if necessary, remind the group about guidelines:

1. No really loud activities (remember, we share this building).
2. Nothing that could harm anyone.
3. Most important, something positive that you are proud of or happy about.

You may also use this time for other activities or discussions, especially if the group consensus supports this. For example, if a “process discussion” begins earlier in the group but is prematurely terminated (e.g., to continue with the scripted exercises), this time could be used to extend this discussion. However, be sensitive to the adolescent whose turn it is to present their personal hobby/activity/objects. This person may feel rejected if their turn is “pre-empted” by other group issues. Approach this in a diplomatic fashion, allowing the scheduled teen several options: to present today, to shift until the next session, etc.



**WHO WOULD LIKE TO DO NEXT SESSION?**

**Session 7**  
**TECHNIQUES FOR STOPPING UNREALISTIC THOUGHTS (90 min.)**

Materials needed for this session:

1. Extra workbooks
2. Extra pens and pencils
3. Balloons

**BLACKBOARD or FLIPCHART**

**AGENDA**

- I. REVIEW (5 min)
- II. TECHNIQUES FOR INTERRUPTING UNREALISTIC THOUGHTS (20 min)
- III. USING A-B-C IN YOUR LIFE (15 min)
- IV. PROMPTS or *OTHER ACTIVITY* (15 min)
- V. BALLOON EXERCISE (20 min)
- VI. PRACTICE ASSIGNMENT (5 min)
- VII. SHARING ACTIVITY (10 min)

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**I. REVIEW (5 min.)**

**WORKBOOK**

Ask adolescents to turn to page 6.9.

**? DID YOU WORK THROUGH AT LEAST ONE PERSONAL SITUATION USING THE A-B-C FORM?**

Leader: Get examples from teens. Work through one or two of their real situations.

**? DID YOU COME UP WITH A REALISTIC COUNTERTHOUGHT FOR THE NEGATIVE BELIEF?**

Leader: If adolescents have had difficulty coming up with counterthoughts for their negative beliefs, spend 5-10 minutes at this point helping teens to generate counterthoughts. Especially steer them towards using the “6 Helpful Questions.” Using the entire group to generate possible counterthoughts can be very helpful.

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## II. TECHNIQUES FOR INTERRUPTING NEGATIVE THOUGHTS (20 min.)

### Objectives

1. To present three techniques that can be used to stop negative thinking.
2. To help each student select one of these techniques to try out during the coming week.

### Thought Interruption Techniques

**During the last few sessions, we've been working on ways to counter or argue with negative and unrealistic thoughts. Here are some additional techniques we can use to interrupt negative thinking (remember “Don't Respond” as a choice for coping with Activating Events?).**

**These are very different techniques – not related to challenging unrealistic thinking. However, some people find them useful because they are quick and easy. We like to think of these as additional “tools” in your toolbox of techniques to deal with negative or unrealistic thoughts.**

**Being able to use these thought interruption techniques depends on your being aware of your negative or unrealistic thoughts as you have them. Are you?**

Leader: This can lead to a helpful, although brief, summary of how teens are progressing with paying attention to their thoughts.

### BLACKBOARD or FLIPCHART

1. Thought stopping.
2. The rubber band technique.
3. Set aside some “worrying time” for negative thoughts

**THOUGHT STOPPING.** When you're alone and catch yourself thinking negatively, yell “STOP” as loud as you can. Then say, “I'm not going to think about that any more.” Gradually change from yelling out loud to thinking “Stop” to yourself. Then you can use the technique in public.

**THE RUBBER BAND TECHNIQUE.** Wear a rubber band on your wrist and snap it every time you catch yourself thinking negatively. This will help to prevent negative thoughts. If you don't want to wear a rubber band, then lightly pinch yourself to make yourself stop thinking about it at that moment.

**SET ASIDE SOME WORRYING TIME.** If you need to think about certain negative things, then schedule a time for it once each week. Make an appointment with yourself for worrying or thinking negatively; fifteen minutes should be plenty. Only allow yourself to worry about negative things during that period of time. When you worry/think negative, don't do anything else—don't talk, eat, drink, work, or play. Save up your worries or negative thoughts during the rest of the week; you might want to write them down on 3 x 5 index cards that you keep in your wallet or purse, or your nightstand. **ONLY** worry about them during this scheduled time (this can work with **THOUGHT STOPPING**, the first technique).

**Why use these techniques?** Thinking is both automatic (happens without planning to) and deliberate (happens by choice). If something is bothering us it will tend to pop into our mind automatically when we get tired or stop thinking about something else. If we set aside time to deliberately think about our concerns, it comes under conscious voluntary control (deliberate) and it is less likely to pop into awareness automatically.

In general, try not to do your worrying/thinking negatively before bed time. Pick a time before you are about to do something fun (e.g., Friday afternoon before you are going out for the evening with friends.)

### Group Discussion



WHAT DO YOU THINK OF THESE THREE TECHNIQUES?



WHICH ONE OF THESE SEEMS LIKE IT WOULD WORK THE BEST FOR YOU?



**DO ANY OF THESE TECHNIQUES SEEM “SILLY” TO YOU? WOULD YOU USE IT ANYWAY?**



**WHY DO YOU THINK “WORRY TIME” MIGHT WORK?**

**WORKBOOK**

Ask adolescents to turn to page 7.1



**IF YOU WERE TO USE “WORRY TIME”, WHAT WOULD BE A GOOD TIME FOR YOU TO USE IT?**

Use the schedule on page 7.1 to “make an appointment with yourself” to worry. A good time to schedule “Worry Time” would be just before or just after a stressful situation that is predictable (that is, you know roughly when it might happen). Or also schedule it before you are going to do something fun, so it will be easier to end the “worrying.” Of course you only need to set aside this “worry/negative thinking” time if you find that you are doing a lot of worrying or negative thinking and you want to gain control of it, rather than it happening to you at times you would prefer it not.

**WORKBOOK**

Ask adolescents to turn to page 7.2

At the top of the page, list the three techniques we have just discussed for stopping negative thinking. Then choose the ONE you would like to try for the next week. Write this as your answer to question #2. If this technique doesn't seem to work, you'll need to try one of the other techniques on the list. Choose which technique you'll use as a back up, and write it on the second line for question #2.

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### **III. USING A-B-C IN YOUR LIFE (15 min.)**

#### **Objective**

1. To discuss how teens might use the A-B-C method in real-life situations.

**This group will be ending soon, so we need to think about how you can make these skills work for you in your everyday life. In this section, we will discuss what could go wrong,**

**how negative thoughts might sneak up on you, and what you can do to prevent these problems from getting worse.**

### Group Discussion



**HOW WILL YOU KNOW WHEN IT IS A GOOD TIME TO “CHECK YOURSELF” FOR NEGATIVE THOUGHTS?**

*A: Usually, when you are under a lot of stress, or you expect to be.*



**LOOK OVER THE MOOD DIARY FOR THE LAST 7 WEEKS. ARE THERE ANY PATTERNS? ANY DAYS YOU TENDED TO HAVE A WORSE MOOD? WHAT WERE THE ACTIVATING EVENTS THOSE DAYS?**



**DO YOU THINK THAT YOU WILL NEED REMINDERS? WHAT KIND OF REMINDERS WOULD HELP THE MOST? OTHER PEOPLE? CERTAIN KINDS OF SITUATIONS? TIMES OF THE YEAR?**



**ARE UNREALISTIC THOUGHTS HARD FOR YOU TO IDENTIFY? COULD YOU USE A FRIEND AS A “SOUNDING BOARD”? IS THERE ANYONE YOU COULD DISCUSS YOUR BELIEFS WITH, TO CHECK THEM OUT?**

*A: If appropriate, suggest that they may “check-in” with one another outside of this group, if that is comfortable. Teens will often want to share phone numbers, etc., at this stage. However, allow them to do this on their own, to avoid pressuring anyone into giving their phone number to someone who they really don't want to give it to.*



**HAS THE A-B-C TECHNIQUE BECOME AUTOMATIC FOR YOU? OR, DO YOU HAVE TO REMEMBER TO USE IT? WHAT WOULD HELP IT BECOME MORE “AUTOMATIC”, SO THAT YOU USE IT WHENEVER A NEGATIVE THOUGHT OCCURS?**

*A: Whenever they catch themselves worrying, or feeling upset is a good clue. Also, whenever anything stressful happens.*

**Try to notice your negative thoughts when you have a mood shift for the worse. That is an excellent time to use the A-B-C method. Notice the activating event; identify your negative thoughts, and then try to counter them.**



**DO YOU FEEL COMFORTABLE EXAMINING YOUR THOUGHTS? DOES IT FEEL “NATURAL” TO YOU NOW?**



**HAVE YOU FELT MORE “IN CONTROL” OF YOUR THOUGHTS AND BELIEFS? HAS THAT LED YOU TO FEEL BETTER, OR WORSE, WHEN DEALING WITH STRESS? HOW COULD YOU FEEL EVEN BETTER?**

Leader: The above questions are just samples, to start the conversation. If teens raise other important, relevant questions, pursue them in a group discussion.

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#### **IV. PROMPTS or OTHER ACTIVITY (15 min.)**

Leader: you have several choices here, depending on your judgment of what the group needs and would enjoy. You can use this time to catch up on sections that the group did not finish in earlier sessions. Or, you can conduct some other group activity, such as a sharing or “cohesion-building” exercise (samples listed below). Finally, you can review cues, “quotes” and musical lyrics which help remind or prompt adolescents to think more positively.

#### **PROMPTS TO THINK MORE REALISTIC, ACCURATE and POSITIVE THOUGHTS**

**Remembering to use these techniques is sometimes difficult. It helps to have a reminder. Sometimes that can be a prompt in your life, like brushing your teeth each night. Other people find remembering lyrics to a favorite song will remind them to think more accurately and positively. Also, there are some quotes that might help.**



**WHAT WORKS BEST TO HELP YOU REMEMBER? THIS WAS PART OF YOUR HOME PRACTICE ASSIGNMENT LAST WEEK.**

Leader: write four headings on the board: “Cues”, “Lyrics”, “Quotes”, and “Other”. Write ten answers under these headings. Brainstorm other solutions if one or more categories are left blank. Other cues are: the bell between classes at school; alarm going off each morning; riding home on the bus after school.

Here are some sample quotes about positive thinking and goal setting (a related topic). These may be too outdated for adolescents – use these sparingly. Better sources are current adolescent music.

Quotes and Exercises courtesy of Steve Berg-Smith, from Kaiser Permanente Center for Health Research:

*Positive Thinking Quotes:*

We are what we think... With our thoughts we make our world.....Buddha  
Change your thoughts and you change the world .....Norman Vincent Peale  
You feel the way you do right now because of the thoughts you're thinking at this moment .....D. Burns  
If you think you can, you can. And if you think you can't, you're right ..... Mary Kay Ash

*Goal Setting Quotes*

“You can't hit a home run unless you step up to the plate. You can't catch a fish unless you put your line in the water. You can't reach your goals if you don't try” ..... Kathy Seligman  
If your ship doesn't come in, swim out to it ..... Jonathan Winters  
A person who aims at nothing is sure to hit it.....Dr. J (Julius Erving)  
A journey of a thousand miles starts with a single step ..... anonymous  
Rome wasn't built in a year ..... anonymous

**V. BALLOON EXERCISE (20 min.) – OPTIONAL, if time allows****Objective**

1. An alternative, more concrete method for getting rid of negative thoughts. (*This activity courtesy of Steve Berg-Smith, Kaiser Permanente Center for Health Research*)

Leader: Give each person a balloon. Have them stretch it out, then hold it in their hand.

**FINDING THE NEGATIVE THOUGHT:**

1. Make yourself comfortable.
2. Breathe in and out, slowly and deeply. Close your eyes.
3. Focus your attention inward, to your “*minds eye*”. This is the place where in your mind where you can see images \_ the “*movies*”.
4. Think about one negative thought that is a problem for you; the main negative thought that brings your mood down.
5. Ask yourself these questions, but save your answers for later:
  - a. What is this negative thought?
  - b. What happens when you think this negative thought?
  - c. How do you feel? What do you end up doing?
  - d. What does the negative thought feel like?
  - e. How much room does it take up, in your life or your mind?
  - f. How heavy is it? Does it have sound, or color? What does it look like?

**Optional Balloon Exercise, Continued****ELIMINATING THE NEGATIVE THOUGHT:**

6. Now, take three deep breaths. With each breath move this negative thought toward your lungs until your lungs are completely full of it.
7. When you can't hold it any longer in your lung, blow it all out into the balloon. Do whatever it takes to empty your lungs. Blow the negative thought into your balloon!
8. Open your eyes and tie the balloon.

**DEBRIEF:**

1. What do you want to do with your balloons?
  - a. Pop it?
  - b. Stomp it?
  - c. Throw it away?
  - d. Hang it someplace?
  - e. Give it to someone?
2. *Optional:* What's in the balloons?
3. *Optional:* Where did you find it in yourself? In your body? Your mind?
4. *Optional:* What did it look like, sound like, feel like?
5. What is most important is that you've got the power to let go of negative thoughts.

**6. How did this exercise work for you? Could you use it at home? At school? Is there any way to do it without a balloon?**

**REPLACING IT WITH A POSITIVE THOUGHT:**

**9. Now that you've let go, you can replace the negative thought with a positive one. What is a positive thought (a counterthought?) to put in place of the old, negative belief?**

---

**VI. PRACTICE ASSIGNMENT (5 min.)**

**WORKBOOK**

Ask adolescents to turn to the practice assignment on page 7.3.

- 1. Continue to fill out your Mood Diary (page 1.1).**
- 2. Use at least one of the three Thought-Stopping techniques between now and next session. Choose which one you will use.**
- 3. Fill out an A-B-C form when you catch yourself thinking a negative thought or when you start feeling depressed (pages 7.4 through 7.10). Try to do this at least once a day.**

**Success Activity**

**1. Fill out your Mood Diary for today (page 1.1).**

**If you can remember having a negative thought or feeling depressed earlier today, fill out an A-B-C form.**

---

**VI. SHARING ACTIVITY (5 to 10 min.)**

**? WHOSE TURN IS IT TODAY? WHAT DO YOU HAVE TO SHARE WITH US?**

Leader: if necessary, remind the group about guidelines:

1. No really loud activities (remember, we share this building).
2. Nothing that could harm anyone.
3. Most important, something positive that you are proud of or happy about.

You may also use this time for other activities or discussions, especially if the group consensus supports this. For example, if a “process discussion” begins earlier in the group but is prematurely terminated (e.g., to continue with the scripted exercises), this time could be used to extend this discussion. However, be sensitive to the adolescent whose turn it is to present their personal hobby/activity/objects. This person may feel rejected if their turn is “pre-empted” by other group issues. Approach this in a diplomatic fashion, allowing the scheduled teen several options: to present today, to shift until the next session, etc.

**? WHO WOULD LIKE TO DO NEXT SESSION?**

**Session 8**  
**STRESSFUL EVENTS, PREVENTING THE BLUES,**  
**ENDING THE WEEKLY MEETINGS (90 min.)**

Materials needed for this session:

1. Extra workbooks.
2. Extra pens and pencils.
3. Copies of:
  - a. 8<sup>th</sup> Session Mood Questionnaire
  - b. Group Cohesiveness Questionnaire
  - c. Boston Rating Scale

**BLACKBOARD or FLIPCHART**

**AGENDA**

- I. EMERGENCY PLANNING (35 min)
- II. MAINTAINING YOUR GAINS (25 min)
- III. QUESTIONNAIRES (10 min)
- IV. LAST SHARING ACTIVITY (10 min)
- V. ENDING THE WEEKLY MEETINGS (10 min)

---

**I. PLANNING FOR EMERGENCIES (35 min.)**

**Objectives**

1. To have each student generate a list of major stress events that may occur in the future.
2. To help each student consider how these events will affect his or her behavior, and then come up with a prevention plan.

**In this last weekly meeting, we're going to work on plans to deal with both big and small stressors. This will involve thinking ahead about how you might use the skills you've learned in this group (the "tools" in your "toolbox") to help yourselves during stressful times.**

Even if we practice our skills and try to maintain our gains, there will be times when we begin to feel depressed, nervous or irritable again. When this happens, it's important to remember that you can still do something to **HELP YOURSELF**.

The first step is to recognize the kinds of things that can “set off” your depression. For most people, **MAJOR LIFE EVENTS** and life changes often lead to depression. These are more than just everyday hassles. Here are some examples:

**BLACKBOARD or FLIPCHART**

Major Life Stressors

1. SOCIAL SEPARATIONS
2. HEALTH PROBLEMS
3. NEW RESPONSIBILITIES
4. SCHOOL and JOB PROBLEMS
5. FINANCIAL CRISES
6. MAJOR PROBLEMS FOR SOMEONE CLOSE TO YOU

1. **SOCIAL SEPARATIONS** such as friends moving away, divorce, or the death of someone close to you.
2. **HEALTH PROBLEMS** such as getting sick or injured.
3. **NEW RESPONSIBILITIES AND ADJUSTMENTS** such as a new job or transferring to a different school.
4. **SCHOOL and JOB PROBLEMS** such as stress from a job or too much work at school.
5. **FINANCIAL CRISES** such as not having enough money to pay the bills or losing your job (or your parents losing their jobs).
6. **MAJOR PROBLEMS HAPPENING TO SOMEONE CLOSE TO YOU** such as a good friend moving away, or someone you enjoy working with getting fired.

Life changes don't necessarily have to be negative to **BE STRESSFUL** and/or cause depression. For example, moving, getting married, and graduating from high school can affect your mood. Even **POSITIVE CHANGES** can feel like a major upheaval in your life.

**WORKBOOK**

Ask adolescents to turn to page 8.1



**WHAT ARE THE MAJOR STRESSFUL EVENTS THAT MIGHT AFFECT YOU IN THE NEAR FUTURE?**

**Some events are PREDICTABLE (for example, graduation), but others may occur without warning (for example, someone stealing your car). Try to list some of the events that are relatively predictable.**



**WHICH ONES MIGHT SET-OFF NEGATIVE THOUGHTS FOR YOU AND LEAD TO FEELING DOWN?**

Leader: Ask each student to list potential situations that set off his or her depression in the first column on page 8.1. Solicit examples and write them on the blackboard. Are there some triggers that several adolescents have in common? Ask adolescents how they can learn to recognize trigger events early. Are there ways to avoid the major life events that are unpredictable? Stress that early recognition of depressive symptoms is critical.

**Now that you know what can start you feeling depressed or stressed, you are ready to anticipate and plan for them. The next step is to think about how each situation *may* AFFECT YOUR THINKING.**



**FOR EXAMPLE, WHAT KINDS OF NEGATIVE OR UNREALISTIC THOUGHTS MIGHT YOU HAVE IN THESE SITUATIONS?**

Leader: Ask adolescents to fill out the middle column on page 8.1

**Now look at the last column on page 8.1. In this column, develop a PREVENTION PLAN for each of the major life events you listed in the left-hand column. How can you keep from getting depressed, given the major life events you expect in the near future? Use the problem solving skills steps discussed in session 6. Write your plans for preventing depression in the right-hand column. Try to use the A-B-C method, the Thought-Stopping techniques, or Worry Time to deal with these problems. However, there may be other**

**things you will need to do to deal with your problems (such as taking some type of action, problem-solving, accepting your reaction). Write these other things down as well.**

### Team Activity

Leader: If there is enough time, have adolescents pair up or get together in groups of three. Ask them to give their teammate suggestions about how to deal with the stressful events they are anticipating. Circulate among the groups, offering comments and making suggestions regarding the skills they have learned in class that might be useful. After each adolescent has had a chance to discuss his or her major life events, bring the whole group back together to share ideas.

## II. MAINTAINING GAINS (25 min.)

### Objective

1. To help each student identify everyday problem areas and select skills to cope with them.

**Each one of you has put a lot of work into practicing new skills and trying NEW WAYS OF THINKING in this group. I hope that you have found something that will help you gain control over the stress in your life, and your reactions to that stress.**

**Earlier we talked about how to deal with BIG STRESSORS. Now we want to talk about dealing with small stressor, or HASSLES. We all experience everyday hassles or problems from time to time. This is normal. However, these SMALL THINGS CAN OCCASIONALLY OVERWHELM US and make us feel depressed, irritable, angry or nervous.**

**Some examples are: Getting a speeding ticket, being grounded for bad grades, getting into an argument with a girlfriend/boyfriend, having too much homework.**

**If you use the skills you've learned, you can reduce the effects of these everyday hassles. Remember—it's easier to PREVENT problems than it is to get rid of them once they get started.**

WORKBOOK

Ask adolescents to turn to page 8.2

Assign priorities to your problem areas using the worksheet on page 8.2. Which ones are most important for you to work on?

**?** WHAT ARE YOUR MAJOR “EVERYDAY” PROBLEM AREAS THAT YOU EXPECT MIGHT COME UP IN THE FUTURE? **DON'T INCLUDE MAJOR CATASTROPHES OR MAJOR STRESSORS. JUST LIST HASSLE SITUATIONS (E.G., POSSIBLE ANTECEDENTS).**

**?** HOW DO THESE SITUATIONS MAKE YOU FEEL?

**?** WHAT NEGATIVE THOUGHTS COME UP IN THESE SITUATIONS? **(THINK A-B-C).**

**?** HOW CAN YOU COPE WITH THESE EVERYDAY PROBLEMS? **CAN YOU USE THE A-B-C SKILLS FOR DEALING WITH THESE EVERYDAY ISSUES? ARE THESE SKILLS ONES THAT YOU CAN USE EVERY DAY? HOW ABOUT EVERY WEEK?**

**?** **DECIDE HOW YOU CAN REMIND YOURSELF TO USE THESE SKILLS ON A DAILY OR WEEKLY BASIS. WHAT KIND OF REMINDERS WORK BEST FOR YOU?**

In order to prevent depression, try to **BUILD THESE TECHNIQUES INTO YOUR DAILY LIFE** so that you can deal with everyday hassles effectively.

Think of the various skills you have learned as having a tool box that you can turn to when something needs to be fixed.

Leader: Ask adolescents which techniques work best for them in dealing with everyday hassles and problems.

### Optional: Team Activity

Leader: **If there is enough time**, have adolescents pair up or get together in groups of three. Ask them to give their teammate suggestions about how to deal with the hassles they are anticipating or experiencing. Circulate among the groups, offering comments and making suggestions regarding the skills they have learned in class that might be useful. After each student has had a chance to discuss his or her hassles, bring the whole class back together to share ideas. Remember to leave **30 minutes** for the next three sections.

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## II. QUESTIONNAIRES (10 min.)

### Objectives

1. To have each student complete the Mood Questionnaire, the “Feelings About the Class” Questionnaire (Group Cohesion), and the Boston Rating Scale.
2. To compare Mood Questionnaires from the beginning and end of the group, and to look for changes over time in Mood Diary scores.

### Mood Questionnaire

<b>WORKBOOK</b>
-----------------

Ask adolescents to turn to the “End of the Group” Mood Questionnaire provided in the Appendix of their workbooks.

**You all remember that at the beginning of this group we asked you to fill out a short questionnaire about how you felt. Today, we will again measure how you feel to see how much improvement there is. Please fill out the Mood Questionnaire right now. Please answer the questions honestly; no one else in the group will see your answers.**

Leader: After everyone has finished, give instructions for scoring. Teens may notice that the numbers for the responses on four of the statements (#4, #8, #12, and #16) are listed in reverse order. This has been done on purpose, and the teens' score will be correct if they simply add up the numbers they have circled.

**To score the questionnaire, add up all of the numbers you have circled. If you have circled more than one number for a statement, add only the highest number to your score.**

**I hope that many of you notice a decrease in your scores. If you don't see any decrease, however, don't feel too discouraged. Some people experience a *DELAYED REACTION* to the course, and their moods don't improve until several weeks later. That is one reason why we will have you come back over the next few months to see if we can continue to practice, refine, and expand on the skills you learned here so far.**

Leader: Collect the completed Mood Questionnaires from the adolescents. After the session, check the scores and record them on the appropriate study data form. Return

the Mood Questionnaires to adolescents before the group ends. You may want to dissuade teens from sharing scores.

### **“Feelings About the Group”**

Leader:

Please have teens complete the “Feelings About the Group” questionnaire (also called the Group Cohesiveness Questionnaire). A pack of 12 blank forms is located in your Record Book. Use the set of forms with “Session 8” printed on the top. Please be certain to have teens record their First Name and Last Name Initial on the tops of the forms. Collect the completed forms, and record adolescents' questionnaire scores on the appropriate study data form.

### **Boston Rating Scale**

Leader:

Please have teens complete the Boston Rating Scale. A pack of 12 blank forms is located in your Record Book. Because of privacy rules, do not turn in any forms with participant names on them. Instead, you can either lightly pencil teens' names on forms (and erase these before submitting them to the data center), or use sticky-notes to put teens' names on forms. Collect the completed forms, and record adolescents' questionnaire scores on the appropriate study data form.

## **V. SHARING ACTIVITY (5 to 10 min.)**



**Whose turn is it today? What do you have to share with us?**

Leader: if necessary, remind the group about guidelines:

1. No really loud activities (remember, we share this building).
2. Nothing that could harm anyone.
3. Most important, something positive that you are proud of or happy about.

---

### III. SHIFTING FROM WEEKLY to MONTHLY MEETINGS (10 min.)

#### Closing Remarks

Leader: It's important to tailor the message you give here to the group of adolescents. The specific words you use are less important than the process itself. The issues to think about are: Do the adolescents have a sense of hope and optimism? Are their goals specific and realistic? Have they had a chance to share their feelings about the class experience? Is there a sense of closure?

**The group is not ending, but we are spreading out the meetings (to once a month) so you have more opportunities to practice what you have learned.**

**During the monthly meetings, we will review what you have been doing, help you with any challenging situations that you have encountered, and teach you a few additional techniques for coping, problem-solving, and dealing with negative thinking.**

**This means there will be some review and some new material. It is very important for you to come to these meetings, so you can see how you have been progressing and using what you have learned.**

**It also is a chance to get back together with the people in the group and maintain the connections that we have made.**

**We have formed a cohesive, supportive group, and each of us has come to depend on the group and its regular meetings in some way. Perhaps you should expect somewhat of a let-down as the group moves from meeting every week to meeting just once a month. It may be important to develop a plan for dealing with that. For instance, you might want to plan some fun activities during the coming weeks and, in particular, include some extra social activities.**

**You might also want to use the time of the group meetings each week to practice what you learned and to deal with any negative thoughts you might have had over the week.**

Leader: Close with remarks about having enjoyed the group, being proud of the progress everyone has made, etc. Allow some time for others to make remarks, if they wish, and come to a sense of closure.



**DO ANY OF YOU HAVE ANYTHING YOU'D LIKE TO SAY TO THE REST OF THE GROUP?**

Use the remaining time for group socializing, making brief personal contacts with each adolescent.

If time permits, bring the parents into the room briefly at the end of teen Session 8. Use this as an opportunity to:

1. Said nice things about them attending/committing to this program
2. Anticipate concrete, specific problems to coming to monthly sessions
3. Remind about follow-up assessments

**Leader: remind teens (and parent, if present) that there will be “booster” group meetings monthly over the next 6 months. The sessions will also be 90 minutes long and will be focus on how to put these thinking and coping skills to use with actual life situations that have come up for teenagers, as well as teaching them some new coping and problem-solving skills. Give the group the date time and location of the first booster session.**

**Remind them about the assessments coming up in the next 2 weeks and that they are different from the group. Ask teens not to tell their interviewer whether or not they have been in these groups – explain that the interviewers aren't supposed to know if any teen has been in the groups.**

**GROUP LEADER NOTES:**

# LEADER MANUAL

## APPENDIX

**THIS IS TO CERTIFY THAT**

---

**Has Successfully Completed  
The Coping with Stress Course  
For High School Adolescents**

---

Group Leader

---

Date

## **GUIDELINES FOR PROBLEM BEHAVIORS**

### When to use these Guidelines

Problem behaviors can appear at any time during the group. So, suggestions for addressing them are not included in any one session, but are instead summarized here in the Appendix. In any event, *consult immediately* with your supervisor(s) if significant problem behavior occurs.

If you suspect that you may have problems while conducting your group, you may briefly review how problem behaviors will be dealt with, and ask for suggestions from teens. An appropriate place to review is while discussing “Group Guidelines” in Session 1.

### GUIDELINES

1. Address problem behaviors ASAP. If teens believe that problem behaviors will be tolerated, it is almost impossible to re-establish order. If possible, ask problem teens to stay after group for 10 minutes to discuss (see “Individual Interventions” below).
2. Session 1: Review of group rules: This section is rewritten with language re: problem behaviors, staying on task, etc..
3. **GROUP INTERVENTIONS:**
  - a. As needed, review these rules with the group.
  - b. Set up group consequences/rewards: e.g., a reward when group stays on task, and polices itself. This is described in more detail in Session 2 of the CWDA (Treatment) manual.
  - c. Problem solve with group how they can police themselves, using skills learned in the group. For example:
    - i. Define problem behaviors so that all Adolescents know what to avoid.
    - ii. Adolescents keep baseline of their own problem behaviors (PB’s).
    - iii. Each student contracts with the group to keep PB's at a low level
    - iv. Set reward for individuals, and for group.
4. **INDIVIDUAL INTERVENTIONS:**
  - a. After or before groups, meet with individual.
  - b. Review group solutions.
  - c. Teen-generated contract:
    - i. Consider teen a young adult, and ask them to contribute to their own solution.
    - ii. Ask teen to brainstorm with you re: potential solutions.
    - iii. Help teen feel ownership re: solution, but explain that if this “self-control” solution doesn't work, more drastic measures will be taken (e.g., parent + teen contract).
    - iv. Develop a written CONTRACT with teen, using contract form (e.g., CWDA Workbook p. 12.3).
    - v. Review contract each session.
  - d. Parent and teen contract:
    - i. Advance to this step only if the teen contract doesn't work.
    - ii. Ask parent to either arrive early or stay late, and have a brief (10-20 min) session with both.

- iii. Use brainstorming and contract steps (as above) to generate a parent and teen contract.
- iv. Describe the consequence that if this contract fails, teen will be removed from group. Explain to teen and parent that you do not want this to happen.

LEADER MANUAL  
APPENDIX

## Beginning of the Group Mood Questionnaire

For the following statements, circle the number for each statement which best describes how often you've felt this way <b>DURING THE PAST WEEK:</b>	Rarely or none of the time	Some or a little of the time	Occasionally or a moderate amount of time	Most or all of the time
1. I was bothered by things that usually don't bother me.	0	1	2	3
2. I did not feel like eating; my appetite was poor.	0	1	2	3
3. I felt that I could not shake off the blues, even with help from my family or friends.	0	1	2	3
4. I felt that I was just as good as other people.	3	2	1	0
5. I had trouble keeping my mind on what I was doing.	0	1	2	3
6. I felt depressed.	0	1	2	3
7. I felt that everything I did was an effort.	0	1	2	3
8. I felt hopeful about the future.	3	2	1	0
9. I thought life had been a failure.	0	1	2	3
10. I felt fearful.	0	1	2	3
11. My sleep was restless.	0	1	2	3
12. I was happy.	3	2	1	0
13. I talked less than usual.	0	1	2	3
14. I felt lonely.	0	1	2	3
15. People were unfriendly.	0	1	2	3
16. I enjoyed life.	3	2	1	0
17. I had crying spells.	0	1	2	3
18. I felt sad.	0	1	2	3
19. I felt that people disliked me.	0	1	2	3
20. I could not get "going".	0	1	2	3
<p>To score this questionnaire, add up the numbers you've circled. The total is your score. Notice that some of the questions (numbers 4, 8, 12, and 16) are scored in reverse. You should add the numbers as they are printed on the questionnaire.</p>	Your total is: <input style="width: 80px; height: 25px; border: 1px solid black;" type="text"/>			

## End of the Group Mood Questionnaire

For the following statements, circle the number for each statement which best describes how often you've felt this way <b>DURING THE PAST WEEK:</b>	Rarely or none of the time	Some or a little of the time	Occasion-ally or a moderate amount of time	Most or all of the time
1. I was bothered by things that usually don't bother me.	0	1	2	3
2. I did not feel like eating; my appetite was poor.	0	1	2	3
3. I felt that I could not shake off the blues, even with help from my family or friends.	0	1	2	3
4. I felt that I was just as good as other people.	3	2	1	0
5. I had trouble keeping my mind on what I was doing.	0	1	2	3
6. I felt depressed.	0	1	2	3
7. I felt that everything I did was an effort.	0	1	2	3
8. I felt hopeful about the future.	3	2	1	0
9. I thought life had been a failure.	0	1	2	3
10. I felt fearful.	0	1	2	3
11. My sleep was restless.	0	1	2	3
12. I was happy.	3	2	1	0
13. I talked less than usual.	0	1	2	3
14. I felt lonely.	0	1	2	3
15. People were unfriendly.	0	1	2	3
16. I enjoyed life.	3	2	1	0
17. I had crying spells.	0	1	2	3
18. I felt sad.	0	1	2	3
19. I felt that people disliked me.	0	1	2	3
20. I could not get "going".	0	1	2	3
<p>To score this questionnaire, add up the numbers you've circled. The total is your score. Notice that some of the questions (numbers 4, 8, 12, and 16) are scored in reverse. You should add the numbers as they are printed on the questionnaire.</p>	Your total is: <input style="width: 80px; height: 25px; border: 1px solid black;" type="text"/>			

*This Is To Certify That*

---

*Has Successfully Completed  
the Coping With Stress Class  
for High School Adolescents*

---

*Group Leader*

---

*Date*

## CONFIDENTIALITY CONTRACT

1. I agree to keep confidential all personal information I may discover about other adolescents in the Coping with Stress class.
2. I agree not to discuss confidential information about any adolescent with anyone not directly connected with the group.
3. I agree not to talk about class members in places where other people may overhear the conversation.
4. If I have questions about confidential information, I will talk with the class leader before doing anything.

---

Adolescent

Date

---

Class Leader

Date

SESSION \_\_

Date: \_\_\_\_\_

Subject ID# \_\_\_\_\_

FEELINGS ABOUT THE CLASS

Your class is made up of a small group of people. These questions ask how you feel about your experience with this group. Please do not discuss these questions with your instructor. Your answers are confidential.

1. How often do you think your group should meet?
  - a) Much more often
  - b) More often
  - c) No more often; about the same.
  - d) Less often
  - e) Much less often
  
2. How well do you like the group you are in?
  - a) Very much
  - b) Pretty much
  - c) It's all right
  - d) Dislike it a little
  - e) Dislike it very much
  
3. If some members of your group decided to quit the class, would you like a chance to talk them out of it?
  - a) I would try very hard to persuade them to stay
  - b) I would try to persuade them to stay
  - c) I would make a slight attempt to persuade them to stay
  - d) It would make no difference if they left or stayed
  - e) I would definitely not try to persuade them to stay
  
4. Do you feel that working with the group will help you to meet most of your goals about preventing depression?
  - a) Definitely
  - b) Likely
  - c) Uncertain
  - d) Unlikely
  - e) Definitely not
  
5. If you could replace members of your group with other "perfect group members", how many would you trade?
  - a) None
  - b) One
  - c) Two
  - d) Three
  - e) Four or more
  
6. How much do you feel that you are included in the group activities?
  - a) I am included in all the group activities
  - b) I am included in most of the group activities
  - c) I am included in some of the group activities, but not in others
  - d) I don't feel the group includes me in most of the activities
  - e) I don't feel that the group includes me in any of its activities

**PLEASE TURN THIS QUESTIONNAIRE OVER AND COMPLETE THE OTHER SIDE**

7. How do you feel about your participation in, and contribution to, the group work?

- a) I contribute a great deal
- b) I contribute a good deal
- c) I contribute a little
- d) I contribute very little
- e) I contribute nothing

8. What do you feel about the length of the class meeting?

- a) Should be much longer
- b) Should be longer
- c) The present length is about right
- d) Should be shorter
- e) Should be much shorter

9. How do you feel about the instructor?

- a) I am extremely satisfied
- b) I am satisfied
- c) I guess she or he is O.K.
- d) I am dissatisfied
- e) I am extremely dissatisfied

10. How do you feel about being in a class to treat or prevent depression?

- a) I am very comfortable
- b) I am comfortable
- c) Neutral
- d) I am embarrassed
- e) I am very embarrassed

11. In the group I have talked about the intimate details of my life:

- a) Very much
- b) Much
- c) Some
- d) A little
- e) Very little

12. Since the last session I have thought about the group:

- a) Most of the time
- b) Much of the time
- c) Some of the time
- d) Once or twice
- e) Not at all

13. The atmosphere in the group is:

- a) Very warm
- b) Somewhat warm
- c) Neutral
- d) Somewhat cold
- e) Very cold

14. This group works together

- a) Very much
- b) Much
- c) Some
- d) A little
- e) Very little

**THANK YOU. PLEASE GIVE THIS QUESTIONNAIRE BACK TO THE INSTRUCTOR.**