

NHS Foundation Trust

Depression and low mood

Your self help guide



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These are the thoughts of two people who are depressed:

"I feel so alone, I never see my friends now, I guess they have dropped me. They probably don't like me – who would? There is no point in making any effort. It doesn't pay off... I just hate myself"

"I feel like crying all the time, I am so tired and can't get interested in anything. In fact I don't even get started with jobs I should be doing, I can't even do basic things that seem so easy to other people..."

You may have had similar thoughts yourself. Depression is a very common problem and many people feel low or down in the dumps at times. This is often due to stresses such as bereavement, getting older, physical health problems, money or housing issues, or difficulties in relationships. For some people the problem becomes much worse and gets in the way of normal life.

How can this booklet help me?

It may seem that nothing can be done to help you feel better. But there are things that you can do to make a difference. There is also further help you can get if the depression does not seem to be getting any better.

This booklet aims to help you cope with depression and begin to get better. The approach is called Cognitive Behaviour Therapy (CBT). CBT uses methods that have been tried and tested and found to be effective. It involves looking at the way you think about things. We have included pen and paper exercises in the booklet to help you begin to understand and begin to deal with depression practically. You should find it helpful to complete these exercises.

What if I feel too depressed to read this booklet?

If you are depressed you will probably find it hard to concentrate or even read this booklet. Perhaps it looks too difficult and long? Don't worry. There is a lot of information so try taking a bit at a time. If some parts are harder to take in perhaps you could go through the text and discuss parts with your Primary Care Mental Health Worker or other health professional.

What does research tell us about depression?

Life is sometimes difficult and we know that factors such as low income, divorce or relationship problems and loss of work can make people more likely to be depressed. New research has helped us to understand depression more clearly. We now realise that **thoughts can also play an important role in depression**.

- The business man, who believes he is on the brink of bankruptcy
- The clever student who thinks he can't concentrate
- The caring mother who thinks she has lost interest in her children
- The ordinary man who thinks that he is useless because he has lost his job

Changes in feelings may occur gradually, but the way a person thinks about themselves when they are depressed is very different from how they thought before. Perhaps you can think about some examples of depressed thinking in yourself or in someone who has depression.

People who are depressed typically have these types of thoughts and at the time they believe them to be true. When someone's thoughts change like this, they also begin to experience other changes.

Signs and symptoms of depression

Emotions or feelings (tick if you feel like this)

- Feeling sad, guilty, upset, numb or despairing
- C Losing interest or enjoyment in things
- Crying a lot or unable to cry when a truly sad event occurs
- Feeling alone even if you are in company
- O Feeling angry and irritable about the slightest things.

Physical or bodily signs

- O Tiredness
- Restlessness
- Sleep problems
- Feeling worse at a particular time of day usually mornings
- Changes in weight, appetite and eating
- Loss of interest in sex.

Thoughts

- O Losing confidence in yourself
- O Expecting the worst and having negative thoughts
- O Thinking you hate yourself/feeling worthless
- Poor memory or concentration
- O Thinking that life is not worth living.

Behaviour

- O Having difficulty in making decisions
- Can't be bothered to do everyday tasks
- O Putting things off
- Not doing things you used to enjoy.

If you have ticked many of these boxes then you may be experiencing low mood or depression. When you're depressed you may believe that you're **helpless** and alone in the world; you often **blame yourself** for all the shortcomings that you think you have.

At the bottom of all this you feel **negative about yourself**, about **the world** and **the future**. So you tend to **lose interest** in what's going on around you and you don't get any satisfaction out of the things you used to enjoy. It can become **hard to make decisions** or to carry out little tasks that you once did with no problem at all.

Summary

Research now tells us that negative thoughts play an important role in depression. When someone is depressed there are usually changes in the way they feel (their emotions), how their body reacts, what they think and how they behave.

Understanding these feelings

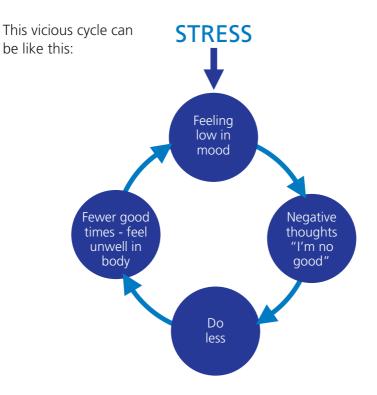
The way you think about things affects the way you feel, which affects the way you behave. It is difficult to change the way you feel, but you can change the way you think.

When you are feeling depressed you might have negative thoughts a lot of the time. With each negative thought the feelings of depression are likely to increase.

Sometimes negative thoughts can stop you from doing things that you would normally do. As a result, you may get critical thoughts about being lazy, or irresponsible which make you feel even worse. In other words, you get caught in a **vicious cycle**.

For example:

Suppose you are walking down the street and you see a friend who appears to ignore you completely. You might wonder why your friend has turned against you and you feel a little sad. Later on, you mention the incident to your friend, who tells you that he was preoccupied at the time and didn't see you. Normally you would feel better and put what happened out of your mind. But if you're depressed, you probably believe your friend has rejected you. You may not even ask him about the incident, and then the mistake goes uncorrected. If you're feeling depressed you're more likely to make mistakes like this over and over again.



Has a similar cycle happened to you? Try and draw it out.

Recognising negative thoughts

When you are feeling low the negative thoughts may be so familiar and happen so often to you that you just accept them as fact.

Negative thoughts are often about yourself for example: "I'm no good", "People don't like me", "I'm a bad mixer", "I look ugly".

Do you have any negative thoughts about yourself? Jot them down:

These thoughts are sometimes about other things such as the world around you or the future. For example "People are unkind", "the world is a horrible place", "nothing will work out well".

Do you have any negative thoughts about other things? Jot them down:

What more should I know about these negative thoughts?

We have given examples of the negative thoughts people have when they are depressed. It is important to remember that you might occasionally have some of these thoughts when you are not depressed. The difference is that you would generally dismiss them from your mind. When you are depressed, however, these thoughts are around all the time. Lets look at these negative thoughts in more detail:

- 1. Negative thoughts tend to be automatic. They are not actually arrived at on the basis of reason and logic, they just seem to happen.
- 2. Often these thoughts are unreasonable, and unrealistic. They serve no purpose. All they do is make you feel bad and they get in the way of what you really want out of life. If you think about them carefully, you will probably find that you have jumped to a conclusion that is not necessarily correct. For example thinking someone doesn't like you because they haven't phoned recently.
- 3. Even though these thoughts are unreasonable they probably seem reasonable and correct to you at the time.
- 4. The more you believe and accept negative thoughts, the worse you are likely to feel. If you allow yourself to get into the grip of these thoughts, you are viewing everything in a negative way.

When people become depressed their thinking often changes. They may make some of the following errors when they are thinking negatively:

Exaggerating the negative

This means you think things are much worse than they really are. For example you may make a small mistake at work and fear that you may be dismissed because of it. You may misplace your house keys and now believe you are 'losing your mind'.

In other words you jump to a negative conclusion and believe that it is likely to happen. You may spend a long time worrying you have upset a friend only to find later that she didn't even remember the comment.

Do you ever exaggerate the negative?

Think back over the last two weeks and list examples:

Overgeneralising

For example if one person doesn't get on with you, you may think "no one likes me".

If one of your many daily tasks hasn't been finished you think, "I've achieved nothing – nothing has been done".

If you can't do a task without some help you think "I can't do it on my own – I'm useless".

In other words, from one thing that has happened to you, you draw a negative conclusion which is much bigger and covers all sorts of things.

Do you ever overgeneralise?

Think back over the last two weeks and list examples:

Ignoring the positive

People who are depressed tend to focus their thinking on negative or bad events and ignore positive or good events. You might have had a game of football and missed the goal once, but played well in general. After the game you just think about that one missed shot and not the rest of the game that you played well. You may have many good friends who you have known for years, but you concentrate and worry about the one that has fallen out with you, rather than remembering all the other good friendships.

Do you sometimes ignore the positive?

Think back over the last two weeks and list examples:

Taking things personally

Often if our mood is low we blame ourselves for anything that goes wrong, even if in reality it has nothing to do with us. For example, you go into a local shop and the assistant who knows you is 'off-hand', your automatic thought is "she doesn't like me... have I done something wrong?" but the more likely reason is that she's tired or upset or has had a 'bad day'. In this example you have taken the blame personally.

Do you sometimes take things personally when they probably have little to do with you?

Think back over the last two weeks and list examples:

Summary

When people are depressed they often have gloomy or unhelpful thoughts about themselves, the world and the future. They can also make errors in the way they think. They exaggerate the negative, overgeneralise bad events, ignore positives in their lives and can take things personally. It isimportant to uncover unhelpful thoughts and errors in thinking.

How can I help myself?

So far we have talked about how what we think affects the way we feel and have looked at particular ways of thinking that can lead to us getting depressed. In this section we will look at practical steps to help overcome depressive feelings and thoughts.

Positive Steps

- Take exercise
- List things to do
- Join in activities
- Mix with people
- Do things you enjoy

Positive Steps: Getting active

Becoming more active in a meaningful and step-by-step way can help improve your mood and wellbeing. When you experience symptoms of depression, you can find that you don't feel like doing anything, find it hard to decide what to do each day and can end up not doing very much. This means that you may be doing very little that gives you a sense of enjoyment, or very little that gives you a sense of achievement or purpose.

Doing less can mean that you have more time on your hands to fill and you can start to think more about all the things that are upsetting you. We all need to do things that give us a sense of pleasure and you can become more depressed and down if you do not build this into your life too.

Learning how to become more active can enable you to set a daily routine, which includes increasing enjoyable and necessary activities and also finding activities that give you a sense of achievement. There is lots of research to show that carefully planned activity can be a very effective treatment for depression.

Why is getting active important?

When you feel depressed, you can feel physically unwell, have more negative thoughts, which can lead you to change the way you behave as a result. For example, when you feel depressed you might stop seeing your friends or family, stop exercising, and stop doing things you used to enjoy or were important to you. In the **short-term**, you might feel a sense of relief that you don't have to do activities that feel hard. This sense of relief can lead you to withdraw even more.

In the **longer-term**, if you continue to avoid things, you miss out on the sense of pleasure or achievement you might get from these activities. This can make symptoms of depression worse, and lead you to feel lower in confidence.

What types of activities do people avoid when they are depressed?

Routine activities

You might find that you avoid every-day activities, which are important life routines. These include:

- 1. Cleaning and tidying the house
- 2. Getting up too late, going to bed late
- 3. Avoiding meals or eating less healthily
- 4. Doing the ironing or washing up.

Pleasurable activities

You may also avoid or stop doing activities that you used to find enjoyable, such as:

- 1. Seeing friends
- 2. Exercise such as swimming or jogging
- 3. Having lunch with work colleagues
- 4. Reading
- 5. Playing with your children.

Necessary activities

A third area where people avoid activities is important necessary things such as:

- 1. Paying the bills
- 2. Opening post
- 3. Dealing with difficult situations at work.

These are as important as pleasurable activities, because if you avoid them, this can lead to further problems and an increase in stress.

Getting active step by step:

Step 1: Understanding your cycle

Sometimes people can find it hard to know what types of activities they might be avoiding as a result of feeling low, or what they are managing to still do that makes them feel better. The first step can be to start with doing a diary (see page 42 of this booklet) to see what you are doing day to day and what you are finding hard. This can then be used as a starting point for planning in more activities.

Step 2: What are your routine, pleasurable and necessary activities?

The next step is to identify routine, pleasurable and necessary activities that you used to do, and would like to be doing, but have stopped doing since you felt low.

Exercise 1: What activities have you withdrawn from/stopped doing since feeling low, that you would like to be able to do?

1. Routine activities

2. Pleasurable activities

3. Necessary activities

Step 3: Making a list of routine, pleasurable and necessary activities in order of difficulty

Using your examples from exercise 1, use exercise 2 to group them in order of difficulty into the following three groups:

- 1. Difficult
- 2. Medium difficulty
- 3. Easiest.

In each of these three groups you should include some routine, pleasurable and necessary activities to work towards.

Exercise 2: Place your lists in order of difficulty in the following groups, mixing up routine, pleasurable and necessary activities

Easiest (least effort)

Medium difficulty

Most difficult (most effort)

Step 4: Setting goals to do some routine, pleasurable and necessary activities

Now you know what activities you have reduced and would like to start doing again, and which ones are easier and harder to do, it is time to set some goals to increase your activities. It is best to start with the **easiest** activities on your list and to include pleasurable, routine and necessary ones. You can use the activities from **exercise 2** to help you set your goals. You can use a blank **activity diary** to plan in your activities for the week. The more specific you are about your goals (where, when, with whom and which activity) you can be, the more likely you will be to succeed. It is tempting to set big goals but research shows that setting small and regular activity goals is most effective in the early stages. You also need to build up to doing more so don't set yourself too many goals at once.

Exercise 3: Goal setting to increase activity

Set some goals for increasing routine, pleasurable and necessary activities, starting with the easiest ones first and put them onto a blank activity diary sheet (page 21) so that you know when you will do them.

Step 5: Putting it into practice and getting active

Now that you have made a plan of what activities and goals you would like to work on, it is time to try and follow this plan and achieve the activity goals that you have set yourself. Remember that a balance of routine, pleasurable and necessary activities will be most helpful to your recovery so try to do some of each.

Exercise 4: Try to do the activity tasks you have planned on your behavioural activation diary

Make a note on the diary sheet as to whether you managed to achieve the goal, and any problems or successes you had.

Step 6: Reviewing your progress and setting new activity goals

During your follow-up sessions, it is helpful to talk through how you are progressing with the activity goals, including what is going well and any difficulties you have had. You can problem-solve any difficulties with your worker, and adapt your goals in terms of:

- 1. Difficulty
- 2. Frequency
- 3. Balance of routine, pleasurable and necessary activities
- 4. Demands in your life.

Exercise 5: How am I getting on?

At each session and in your own time it is helpful to consider how you are getting on with setting and achieving your goals. If you are finding some goals easy to achieve and they are helping with your mood, it is useful to carry on with those goals, or take the next step to a more difficult goal.

If you are having any difficulties in achieving a goal, it can be helpful to ask yourself:

- 1. Is the goal meaningful to me? If not, you may want to set a different goal
- 2. Is the goal too difficult or complex for me at this time? If this is the case, how can you break down the goal into smaller more manageable steps?
- 3. Am I trying to do the task at the right time? There may be an easier time of day or week to try and achieve this goal. What would that be for you?
- 4. Would it be easier to do this task if I had some help or support from someone? If so, who could help you e.g. a partner, colleague or friend?

Over time, you should start to feel more positive and less depressed through using these strategies. In addition, you will have learned skills that you can use in the future if you should ever start to feel low again.

Suggested daily action plan format

(There is a larger copy at the end of the booklet for you to use.)

Time	Mon	Tue	Wed	Thu	Fri	Sat	Sun
Morning							
Afternoon							
Evening							

The ABC of changing feelings

Most people who are depressed think their lives are so awful that they have every right to feel sad. In fact our feelings come from what we think about and how we make sense of what has happened to us.

Try to think about a recent event that has upset and depressed you. You should be able to sort out three parts of it.

- A. The event (i.e. what happened)
- B. Your thoughts about it (i.e. what went through your mind)
- C. Your feelings about it.

Most people are normally only aware of A and C. Lets look at an example.

Suppose someone criticises you for something that you have done.

- A. The event criticism.
 You may feel hurt and embarrassed.
- **B.** Your thoughts "He thinks I'm no good, and he's right I'm hopeless, I'm useless at everything".
- C. Your feelings hurt, embarrassed.

You may need to play the event back in your head to pay attention to the thoughts you were having.

How depressing! No wonder you feel bad! The important point about trying to become aware of these three stages A, B and C is that we can change what we think about the event and therefore we can change how we feel about it.

Thought balancing

A useful technique to try is called **balancing**. When you have a negative, critical thought, balance it out by making a more positive statement about yourself. For example:

The thought "I'm no good at my job", could be balanced with "my boss said how much he appreciated the piece of work I did yesterday". The thought "I'm an awful mother", could be balanced with "the Health Visitor says my daughter is doing really well". The thought "I can't do anything", could be balanced with "with the help of my friend I did my shopping and had a lovely day out".

The double column technique

Another thing you could do is write down your negative thoughts in one column and opposite each one write down a more balanced positive thought. Like this:

Negative thoughts	Balancing thoughts
John hasn't called me, he doesn't love me	I am doing better than I was last week so he doesn't need to worry about me

Try and remember details

Research tells us that people who are depressed do not remember details of events very well but tend to think in general statements such as "I've never been any good at anything". Try and train yourself to remember details so that good times and experiences are easy to recall. Think of particular times. A daily diary can help you to do this. Make lists of actual achievements and good aspects about yourself such as "I'm always on time", "I helped my friend on Tuesday", "My partner complimented me on my work last week". Try to keep a diary of events, feelings and thoughts. It may look a bit like the following table. Use the approaches described to gain more balanced thoughts. Look out for errors in thinking.

Event	Feeling or emotion	Thoughts in your mind	Other more balanced thoughts
A neighbour ignored me	Low and depressed	She doesn't like me, no one does	She's probably got something on her mind, I am jumping to conclusions
Your example			

Summary

Using a daily plan, achievements and pleasure notes, increasing physical activity and keeping a diary of negative thoughts and more balancedthoughts can help you fight depression and the unhelpful thoughts thatgo with it.

Solving difficult problems

Sometimes we feel overwhelmed by the very complicated and difficult things we have to do. Problem solving is a systematic way to help you manage your problems. It can help you feel more in control and think of realistic and practical solutions.

The seven steps of problem solving:

- Identify and clearly define the problem.
 If you are experiencing more than one difficulty choose the most urgent, or maybe the easiest, to deal with first.
- 2. 'Brainstorm' or list all the possible solutions to your chosen problem.

Even silly ideas or ones that are not likely to work are useful to write down – the more ideas you come up with the more likely you are to find a solution.

- Evaluate how effective each solution will be.
 Go through each solution and list the pros and cons of each one this will help you decide which solution is most suitable.
- 4. Choose the most realistic and practical solution. The one you choose should be both helpful and achievable.

5. Plan the steps for carrying out your solution.

Breaking down your solution into simple steps will help you to see how it can be achieved and any aspects that may be more difficult. Try thinking about what will be done; how it will be done; when you will do it; who will be involved; and where it will happen.

6. Carry out your plan.

7. Review the outcome.

If your solution works, GREAT! Congratulate yourself and remember this success for the future. If the problem is not solved, try to understand what went wrong – maybe you were feeling particularly unwell or tried to do too much. Whatever the reason, you did not fail. Learn from the experience. You could try again or go back to your solution list and choose the next most suitable one. You can return to your list of solutions as often as you need to. The more ideas you produce the bigger your list of options.

Example:

Problem: "I can't pay my credit card bill this month" (This is a clear and specific statement of the problem)

Possible solutions:

- Ignore the problem
- Rob a bank
- Arrange an overdraft from the bank and use this to pay off the bill
- Pay off a small amount of the bill
- Switch to another credit card with a smaller interest rate
- Speak to an expert about the debt e.g. Citizen's Advice Bureau
- Request a change in the re-payment terms from the credit card company.

Chosen solution:

"Arrange an overdraft from the bank."

Pros: Better rate of interest and can spread out the payments over longer period of time.

Cons: They may say no and it would be scary to speak to the bank manager.

Plan: "I could find the number of the bank from a letter and phone them up. I'll do this tomorrow morning. I will plan what I want to say in advance so I don't get my words muddled up. I'll ask for an appointment to discuss the fact that I am having problems paying off my credit card bill. I'll ask if I can arrange a meeting for the morning (as I tend to feel tired and low in the afternoon). I'll make sure I take all the information I have about my credit card and bank account to the meeting. If they say no to my request I will look at my other solutions."

Try this way of problem solving yourself.

What is the problem? (write it down)

List all the solutions (brainstorming)

Remember how you may have solved similar problems in the past. What would your friends advise?

List the pros and cons (advantages and disadvantages) of each possible solution:

Choose the best solution (write it down)

Steps to tackle it (include the what, how, when, who and where aspects)

Step 1	
Step 2	
Step 3	
Step 4	
Step 5	

Long term beliefs

Sometimes people have long held views about themselves that are very self critical – for example, "I'm not a very clever person" or "I am not a very lovable person". These beliefs are often a product of our past experience and may hold no truth in present reality. Try to challenge this self-criticism, stop knocking yourself down, find ways to be kinder to yourself and look for evidence that disproves these beliefs. What would you say to a good friend if they held that belief about themselves?

Sleep management

Sleep problems are common with depression.

You may have difficulty getting to sleep, or you may be waking during the night or very early in the morning. The important thing to remember is that your sleep will improve as your depression improves.

Rules for better sleeping

There are some basic rules for better sleeping:

- Get used to going to bed and getting up at a regular time
- Have a bedtime routine and try to wind down before bedtime
- Avoid drinking tea, coffee and alcohol in the evenings
- Don't take naps during the day even if you are feeling really tired. It will upset your body clock
- Don't eat a large meal before bedtime. If you're hungry before bedtime have a light snack
- Try to exercise during the day, but not close to bedtime
- Only sleep in your bed, not on the settee or anywhere else
- Don't watch TV, eat or write in bed unless you are certain from past experience that these activities will help you get to sleep
- Don't go to bed until you feel sleepy
- If you have not gone to sleep within half an hour, get up and do something distracting and relaxing (away from the bedroom if possible). Go back to bed only when you feel sleepy. It may also be helpful to monitor your sleep behaviour, to see when you are and when you are not sleeping, and record any activities that helped you return to sleep.

Looking after yourself

When you are feeling low it is particularly important that you take care of yourself. It can be easy to forget to eat regular meals or take exercise.

Your diet should be a source of health and pleasure. Eating regularly can help maintain a daily routine, and keep your energy levels up. Try to avoid cycles of under and over eating, and limit, rather than ban, unhealthy foods.

Physical exercise helps keep you healthy and can actually make you feel invigorated rather than exhausted. It is also recommended as a treatment for mild-moderate depression. There are lots of ways of increasing your activity levels, whether through vigorous housework, daily walks or attending a local gym/community centre. If you have any concerns about doing physical exercise consult your GP.

Take time to relax. Everybody deserves a break once in a while.

Particularly stressful times

Many people experience a difficult time in their lives that is linked with events that they cannot change. For example bereavement, separating from a partner, unemployment, longstanding illness, chronic financial problems or isolation. Sometimes several of these events happen together and depression can result. In time most people bounce back, but it may be hard to do this without help.

Coping with setbacks

Most of us get through our problems in a series of ups and downs. Your progress is likely to follow a similar path to the diagram below



"Just when I started to make progress and things were going well I had a setback and I was back to square one. I needed help from my husband to start again but I soon made up the ground I had lost and I'm still going forward. I still have one or two setbacks but I keep working at it."

This is a very important point. If you expect to get better without any setbacks you may be very upset, or believe you have done something wrong, when a setback occurs.

Setbacks are normal. The way to cope with a setback is to remember that they are to be expected. Look at how you made progress so far. Do the same again.

Most of us have ups and downs as we get over our problems.

Staying well plan

In order to feel better and to stay well, it is important to continue to look after your mental health just as you would your physical health. It can be helpful to see yourself as being on a **journey towards wellbeing**. As part of this journey, it is important to **continue** using what you have learned during your sessions in the future to help you stay well, and to improve your wellbeing further.

This section will help you to review what your difficulties were, what you did that helped to improve things, and what you can do to stay well and improve how you feel.

- 1. What difficulties did I ask for help with?
 - What were my goals?
 - What things did I want to work on?

2. What was keeping my problem(s) going?

- Behaviour e.g. avoiding situations or people
- Thinking e.g. always imagining the worst
- Difficult situations or life events e.g. relationships, work problems

3. What progress have I made in achieving my goals? How did I do this?

4. What ideas and tools have I learned that have helped me?

- 5. What obstacles might lead to a setback or make it harder to stay well? E.g.
 - Stressful life events/situations
 - Motivation and thinking negatively

- 6. What would I notice first if I started to have difficulties again? E.g.
 - Changes in the way I think e.g. always imagining the worst
 - Changes in my behaviour e.g. avoiding things, drinking
 - Changes in how I feel physically e.g. feeling more tired
 - Changes in how I feel e.g. tearful or irritable.

Fhinking:	
3ehaviour:	
Physical:	
Emotion:	

 What strategies can I use to help me feel better again? Who can I talk to? E.g. talking to friends or family, making time to exercise regularly

- 8. How can I build on what I have achieved? What further goals could I set to help me stay well?
 - Short-term

• Long-term

Many people find the structure and routine of talking to someone for regular sessions helpful. Now that your sessions are coming to an end, you might find it useful to continue having this time to check how you are doing by setting a regular review day with yourself.

When would be a good regular time for me to check how I am doing?

- What day/time of day?
- How often?
- Do I want anyone else to help me do this?
 - E.g. a friend or partner

Further help

We hope you will use the exercises suggested in this booklet. They should help you to begin to overcome your depression and take back control over your thoughts and your life.

If you feel that you are making little progress, other help is available to aid you in overcoming your problem.

Your family GP is the best person to talk to first. He or she may suggest a talking treatment or antidepressant tablets or both. He or she may also suggest you see a mental health worker who can offer expert help with your problems. If you feel so depressed that thoughts of harming yourself have been in your mind then visit your GP as soon as possible and tell him or her how you are feeling.

Where can I find extra help?

If you think you may be depressed, your GP is the best person to talk to in the first instance. They will have information about local services that may be able to help. Additionally there is a list of services and organisations in this booklet on page 39. Help can also be obtained from the practice nurse or health visitor attached to your GP practice.

If you have any queries about medication that you have been prescribed then do go and discuss this with your GP. Alternatively, you could telephone NHS Direct for information on 0845 4647.

Further reading

Many of the ideas in this booklet are discussed in further detail in the following books, some of which are available to borrow at part of the Books on Prescription scheme in local libraries (for more information ask your GP or mental health worker):

Mind over Mood: Changing how you feel by changing the way you think (1995) Christine A Padesky & Dennis Greenberger. Guilford Publications

The Feeling Good Handbook (2000 2nd edition) David Burns, Plume, U.S

Overcoming Depression (1999) Paul Gilbert

Further support

Useful organisations

Depression Alliance

20 Great Dover Street London SE1 4LX Tel: 0845 123 2320 Opening hours: 10am–5.30pm www.depressionalliance.org

This is a national charity providing information and support for those affected by depression, and their carers.

Helplines

Carers UK

0808 808 7777 (Wed & Thurs 10am–12pm, 2–4pm and Mon 9am–9pm) Helpline providing advice and information for carers on any issue.

Cruse Bereavement Care

0844 477 9400 (daytime helpline) Information and advice for people who are bereaved.

Drinkline

0800 917 8282 (open 24 hours)

Confidential information and advice for anyone concerned about their own or someone else's drinking. Can also provide local referrals.

National Debtline

0808 808 4000 (Mon–Fri 9am–9pm, Sat 9.30am–1pm). Independent advice on how to deal with debt problems.

Family Lives

0808 800 2222 (open 24 hours) Helpline and information for parents in distress.

Shelterline

0808 800 4444 (open 8am-midnight, daily) For people in urgent need of accommodation.

National Domestic Violence Helpline

0808 2000 247 (open 24 hours) National helpline for women affected by domestic violence.

Websites

www.livinglifetothefull.com

Online life skills resource using a Cognitive Behavioural Therapy (CBT) self-help approach. Sign up for free.

www.sortoutstress.co.uk

Advice and information website for young men.

www.moodgym.anu.edu.au

Free self-help programme teaching Cognitive Behavioural Therapy (CBT) skills to people vulnerable to depression and anxiety.

Emergencies

If you are in crisis, especially if you feel at risk of harming yourself or someone else, contact your GP.

Alternatively, you could contact:

Harmoni 020 7388 5800

Provides urgent medical care for people between 6.30pm–8am Mondays to Fridays, and 24 hours at weekends and Bank Holidays.

Samaritans 08457 90 90 90

Confidential emotional support, 24 hours a day, for people who are experiencing feelings of distress or despair, or feeling suicidal.

Islington Crisis Phoneline 020 7226 9415 or Freephone 0800 345 7779

Night-time phone line for anyone resident in Islington with difficulties relating to a mental health problem.

Open every night from 5pm–6am.

You can also go to your nearest Accident & Emergency department where you will be seen by someone who can discuss your difficulties with you.

Acknowledgements

Extracts from this booklet have been taken from:

Depression and Low Mood: A Self Help Guide (2003) Northumberland, Tyne and Wear NHS Trust

Managing Anxiety: A user's manual (2002) Helen Kennerley, Distributed by Psychology Department, Warneford Hospital, Oxford Cognitive Therapy Centre Educational Self-Help Booklets

Dealing with Worry: A Self Help Booklet (2005) S Black, J Hastings, M Henderson, NHS Borders

Managing Anxiety and Depression: A Self Help Guide (1999) Nicolas Holdsworth and Roger Paxton, The Mental Health Foundation

Manage your Mind (1995) Gillian Butler and Tony Hope, Oxford University Press

Appendix

Daily plan/Diary sheet

This can be photocopied and used as needed. Your Mental Health Worker may also have larger copies of worksheets that you can use to help with the different exercises.

Time	Mon	Tue	Wed
Morning			
Afternoon			
Attenioon			
Evening			

Week commencing:

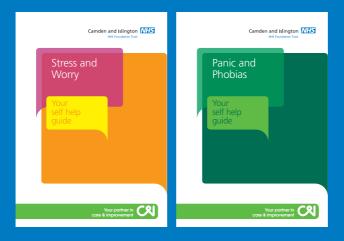
Thu	Fri	Sat	Sun

Notes

This booklet is yours to keep, so make use of it again and again

For further copies of this booklet please contact the Communications Department on 0203 317 3088

Other booklets in this series:



www.candi.nhs.uk

