TREATMENT MANUAL FOR COGNITIVE BEHAVIORAL THERAPY FOR DEPRESSION

Group Format (Therapist’s Manual)

ADAPTATION FOR PUERTO RICAN ADOLESCENTS

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Based on the GROUP THERAPY MANUAL FOR COGNITIVE-Behavioral TREATMENT OF DEPRESSION

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Introduction

This manual is the result of an adaptation of the Cognitive-Behavioral model developed by Muñoz, Aguilar-Gaxiola and Guzmán for the treatment of depression. The original manual consisted of a group intervention model for adults with depression. This intervention was used with adult Hispanic populations in the San Francisco area. The main aims of this intervention are to decrease depressive symptoms, shorten the time the adolescent is depressed, learn new ways to prevent becoming depressed and feel more in control.

The original manual was subjected to various changes in order to adapt it for use with Puerto Rican adolescents. To this end, the following changes were made: (1) The group format was adapted to an individual treatment modality. In this manner, the therapy focuses more on the adolescents’ problems and uses their thoughts, experiences, actions, and relationships as examples of the material to be presented. This makes for a more dynamic and interactive therapy, thus allowing the adolescent to assume a more active role. (2) The original manual referred to the participants in the form second person voice "usted". The formal "usted" was substituted for the familiar second person voice "tu" in order to eliminate the interpersonal distance associated with "usted" in a youth population. (3) The language was simplified to make it more accessible to adolescents. For example, the word "nullity" was substituted for the phrase "I am nothing." (4) The examples were substituted, broadened, or complemented by situations that have arisen in our work with Puerto Rican adolescents. (5) Some of the content was adapted to Puerto Rican culture. (6) Many adolescents are resistant to completing assignments or tasks. Therefore, the therapist has two choices: talk about the adolescent’s thoughts about the assignment, and/or complete the assignment at the beginning of the therapy session. (7) The therapist meets the adolescent and his/her parent(s) before the therapeutic process begins. This creates an open session to establish rapport with the adolescent and explore in detail his/her condition.

Cognitive-Behavioral model for the treatment of depression

Studies carried out in recent decades consistently reveal that the cognitive-behavioral approach is effective in the treatment of adolescent disorders, as for example, depression, anxiety or oppositional disorders (Bedrosia, 1981; Block, 1978; Barber & DeRubies, 1989; Clark, Lewiston & Hops, 1990; DiGuisepppe, 1988; Schrodt & Wright, 1986; Schrodt & Fitzgerald, 1987; Snyder & White, 1979; Zarb, 1992). Most therapeutic models used with adolescents are the result of adaptations of those designed for adults.

Cognitive-behavioral therapy is based on the interrelationship of thoughts, actions, and feelings. In order to work with feelings of depression, this model establishes the importance of identifying the thoughts and actions that influence mood. In this manner the adolescent learns to gain control of his/her feelings.

Therapy sessions are divided into three topics or modules that consist of four sessions each. The first four sessions work on how thoughts influence mood. The next four sessions
discuss daily activities that affect mood. The last four sessions address how interactions with others affect our mood. A description of each module is provided below.

**Thoughts (sessions 1-4)**

The main purpose of this module is to present how our thoughts influence our mood. The first session establishes the structure and purpose of the sessions that will follow. In addition, a weekly schedule of sessions is established, rules are set forth, and the issue of confidentiality is clearly explained. It is important for all participants to be clear on this last point, since this can influence the quality of the therapeutic relationship.

The first session introduces the adolescents to the concept of depression. Participants are encouraged to share their experiences with depression. Once this has been discussed, the therapist presents the purpose of this first module; how our thoughts affect our mood. This session is initiated by defining and clarifying the concept of thoughts through examples provided by the therapist and the participants.

The next three sessions work with the different kinds of thoughts a depressed person may experience and how they can be modified. A series of exercises help the adolescents identify their own faulty thinking. The third session was designed with the goal of providing the youth with techniques for replacing unhealthy thoughts with positive ones, thus altering their depressive symptoms.

**Activities (sessions 5-8)**

The sessions that make up this module allow participants to examine the relationship between their participation in pleasurable activities and their depressive symptoms. Together, the therapist and the participants come up with a definition of "pleasurable activities", and discuss the obstacles that may keep one from enjoying these activities. They discuss how the presence of depressive symptoms can limit one's participation in pleasurable activities, and this in turn increases depressive symptoms. In addition, this module frames a discussion of the participants' goals and their ability to manage the moods they experience. Goals are established, keeping in mind that as we grow these goals will change. For each goal that is successfully reached, there will be a reward.

The main objective of this module is for adolescents to gain control of their lives and identify ways to gain a sense of freedom. Together with the therapist, they generate options and goals, and identify activities that will allow them to improve their mood.

**People (sessions 9-12)**

The sessions that make up this module introduce the idea of how interpersonal relationships affect mood. The group will work with the issue of social support, and how this helps face difficult situations. The adolescent learns to identify, describe, and strengthen his/her support group.
The last sessions of this module integrate the issues covered in the previous modules. The therapist and adolescents examine how our thoughts affect the activities we participate in, the types of social support we have, and the kind of interpersonal relationships we have. They work through exercises that emphasize the importance of assertive communication and the development of skills that will help the participants to establish satisfactory relationships.

The therapeutic process ends with the reconsideration and integration of the main themes of each module. Finally, each participant will evaluate the progress he/she has made, goals he/she has achieved, and strengths he/she has gained. Recommendations for participants and their parents will be discussed.

The group intervention developed uses processes that are inherent to group therapy such as: encouraging modeling of appropriate behavior among peers, practicing interpersonal and communication skills in vivo, giving and receiving feedback, and using positive reinforcement from the members of the group.

This manual was used as part of a research project on the treatment of depression in Puerto Rican adolescents sponsored by the National Institute of Mental Health (NIMH) and the Institutional Funds for Research (FIPI, in Spanish) of the University of Puerto Rico. The preliminary results of this research sustain that Cognitive-Behavioral treatment is effective in reducing depressive symptoms in Puerto Rican adolescents (Rosselló & Bernal, 1999; Rosselló & Bernal, 2005; Rosselló, Bernal, y Rivera Medina, en imprenta).
References


Rosselló, J., Bernal, G., & Rivera, C. (in press). Randomized trial of CBT and IPT in individual and group format for depression in Puerto Rican adolescents. *Cultural Diversity and Ethnic Minority Psychology*


FIRST SESSION

(The purpose of this session is to familiarize adolescents with the therapeutic model they will be participating in. In addition, rules for the following sessions will be presented.)

HOW WE THINK ABOUT DEPRESSION

The kind of skills we provide are called:

"COGNITIVE-BEHAVIORAL THERAPY"

"Cognitive" refers to our thoughts.

"Behavioral" refers to our actions.

Depression is mostly related to our feelings.

************************************************************************BY IDENTIFYING WHICH THOUGHTS AND ACTIONS INFLUENCE OUR FEELINGS WE CAN LEARN TO GAIN MORE CONTROL OVER THEM.************************************************************************

Our treatment of depression consists of 12 sessions.

We focus on what is currently going on in our lives.

The therapy focuses on how to control depression in practical ways that can be used now and in the future.

The twelve sessions are divided into three parts:

- How our thoughts affect our mood. (4 sessions)
- How our actions affect our mood. (4 sessions)
- How our interactions with people affect our mood. (4 sessions)

In this type of treatment we seek to teach practical things one can use in their daily life.

We expect that the most important effect of this treatment will be to learn to understand and control things that affect our mood, and how to avoid unnecessary suffering.
GROUND RULES FOR SESSIONS:

1. **ARRIVE ON TIME! BE PUNCTUAL!**

2. **COME EVERY WEEK!** From the beginning, you make a commitment to yourself and the other group members.

3. Maintain a positive attitude.

4. **DO THE EXERCISES!** If you don't practice what is taught in the sessions, you may never know if these methods could help you control your feelings of depression.

5. Everything shared in the session is confidential. However, it is okay to share what you have learned about depression with others, if you want to.

6. Try to be as honest as possible and express yourself and your feelings freely.

7. Participate in the exercises.
SUGGESTIONS FOR THE GROUP

1. **Let others know your ideas.**
   What each participant has to say is important. Sharing your thoughts and reactions with the group will stimulate others to participate and to share what they are thinking.

2. **Ask questions.**
   If you have a question or there is something about which you would like to know more, ask. In this group there are no “silly” or “stupid” questions. It is likely that other participants have the same question as you.

3. **Don't dominate the discussion.**
   Others want to participate too and they will not be able to if you consume all the time to express your ideas.

4. **Help others to participate.**
   If it seems to you that someone would like to say something, but hasn't been able to, encourage him/her to participate. However, don't force it. It is not necessary to talk to be involved in what is going on.

5. **Listen attentively to others.**
   Thinking about what you want to say next does not allow you to listen attentively to others’ input. Try to understand others’ ideas. Listen to others in the same way you want them to listen to you.

6. **Consider others’ points of view.**
   Don’t insist that you are right and everyone else is wrong.

7. **Participate in the discussion.**
   If the discussion is confusing to you, say so.

(Note: Copies of the rules and suggestions are handed out to the group)
HOW OUR THOUGHTS AFFECT OUR MOODS  
(SESSION 1 OF 4)

1. Presentation. We introduce ourselves making a circle of names. For example, I say my name, the person next to me says mine and hers/his, and so on.

2. Now you are expected to share a little about yourself with the group. For example:
   - Where were you born, information about your development
   - Things about your family
   - Where you study
   - Your main interests
   - Things about yourself that you consider important

A party scenario is created. The therapist says that he/she is going to have a party and that whoever wants to come should bring something. Each person has to say his/her name and what he/she will bring to the party. The key is (unknown to the participants) that to go to the party, the person must bring something that starts with the first letter of their name. For example, if Alicia says she will bring apples, the therapist says "Yes, you can come to the party! Tell us a little about yourself...something that might help us plan a party you would enjoy". But if Alicia says she will bring bananas to the party, the therapist will say "I'm very sorry, Alicia, but I can't invite you to this party if you are going to bring bananas." (Only someone whose name begins with "b" can bring bananas). Slowly the participants figure out the key to being "invited to the party". After awhile, the therapist will disclose the key for those who haven't yet understood it, and each will proceed to say something about themselves in the same way the others have done.

3. The purpose of this therapy is to treat depression by teaching different ways to better control our moods. There are four goals:
   - To lessen or eliminate our feelings of depression.
   - To shorten the time we feel depressed.
   - To learn ways to prevent or avoid getting depressed again.
   - To feel more in control of our lives.

4. Today’s session has two purposes:
   - To get to know each other better.
   - To learn about what depression.
   - To learn a useful way of thinking about depression.
   - To learn how thoughts influence how we feel.
5. What is depression, what does it mean to you? *The therapist will ask the group this question in such a way that it stimulates a brainstorm of ideas, which will be written on a chalkboard or a poster board. Based on the ideas generated, the following definitions will be given.*

The word depression is used in many ways. Depression can mean:

- A feeling that lasts a few minutes
- A mood that lasts a few hours or a few days
- A clinical condition that:
  - lasts at least two weeks
  - causes strong emotional suffering
  - makes it difficult to carry out our daily activities

This treatment seeks to treat clinical depression

6. People who suffer from clinical depression generally have five or more of the following signs, symptoms, or manifestations:

- Feeling depressed or down almost every day
- Not being interested in things or being unable to enjoy things they used to enjoy
- Change in appetite or weight (eating either more or less than usual)
- Sleeping problems (difficulties getting to sleep, waking up often, waking up too early or unable to fall back asleep, sleeping too much)
- Changes in movement (being either very restless or slow moving)
- Feeling tired all the time
- Feeling worthless or guilty
- Problems thinking, concentrating, or making decisions
- Thinking about death or hurting oneself (suicidal)

7. How many of us have felt something like this at some point in our lives?

- What kind of thoughts go through your mind when you feel depressed or sad?
- What do you do when you feel depressed?
- How do you get along with others when you are depressed?

8. A useful way of thinking about depression. See worksheet entitled HOW WE THINK ABOUT DEPRESSION (Appendix A).

9. **THOUGHTS AFFECT OUR MOOD:** Having certain types of thoughts makes becoming depressed more or less likely. By "**Thoughts**" we mean "things we tell ourselves"
Thoughts can have an effect on your body
Thoughts can have an effect on your actions
Thoughts can have an effect on your mood

10. A good way to think about this type of therapy is that you will learn some specific ways to change your thoughts and your actions, so that your mood will improve.

FROM THEORY TO PRACTICE

1. The Daily Mood Scale (Appendix B)
This scale allows adolescents to rate the intensity of their depressive feelings. The therapist will demonstrate how to fill in the mood scale, encouraging the adolescents to participate actively. To do this the therapist can use a transparency and ask the adolescents to place a check mark made of construction paper in the projection of the transparency.

2. Participants will be given a Daily Mood Scale sheet to bring home and keep a daily record of their mood during the week.
HOW OUR THOUGHTS AFFECT OUR MOOD  
(SESSION 2 OF 4)

REVIEW:  Depression  
Cognitive-Behavioral Theory of Depression  
Mood Scale:  How did you feel filling it out every day? 
Were you surprised by anything?  
Why are these exercises important?

1. Thoughts affect our mood:  
Different thoughts have different effects on your mood. Some thoughts increase the possibility of becoming depressed, while others decrease this possibility.

2. What are thoughts? (The therapist will ask this question openly, facilitating a brief discussion.)  
- Thoughts are ideas (phrases or sentences) that we tell ourselves. We are always talking to ourselves, but we aren’t always aware of it. It is useful to think about thoughts as “objects” (ideas) that have a real effect on our minds and bodies.

3. How do depressed people think? (The therapist will ask this question openly, facilitating a brainstorm of ideas having to do with the kinds of thoughts a depressed person typically has. Some of the thoughts that are generated as examples will be used later, classifying them in terms of the material presented)
  - Inflexible  
    For example, a depressed person might think: “I’m scared”. “I’m the only one who gets told to do things around the house”

    A flexible thought that could keep one from feeling depressed might be: “I am sometimes afraid, but I am also sometimes brave”  
    “I am almost always told to do things around the house, but sometimes my brother is too.”

  - Judgmental  
    A depressed person might think: “I’m a coward”, “I’m ugly”, or “People don’t like me, I’m worthless.”

    A flexible thinker might say: “I am more afraid than most people I know” “I may not be the best looking person in the world, but I’m not the ugliest either. I have other likeable qualities.” or “I can’t please everyone.”
4. How do non-depressed people think?

- **Change**

  Depressed: “I have always been and will always be a coward.” “I am and will always be stupid.”

  Flexible: “I feel afraid sometimes, in some situations.” “If I can develop study habits I could improve my grades.”

- **Look at what we do, not what we are:**

  The depressed thinker might say: “I was born to feel bad” or “Everything I do turns out wrong” “I have bad luck.”

  The flexible thinker might say: “I’ve been behaving in ways that make me feel depressed.” “Everyone has good and bad moments.” “I didn’t have all the support or commitment I needed to achieve what I wanted to do.”

- **Have hope for change:**

  The depressed thinker would say “Nothing I has ever helped me.” “Nothing is going to change.”

  The flexible thinker would say “Nothing I’ve tried so far has helped me, but this is new and it could be the right time to start feeling better.” “I could start changing some things that are under my control.” “I am going to continue trying until I find a solution.”

5. Learning to identify different kinds of thoughts:

   a. **Constructive thoughts versus destructive thoughts:**

      Constructive thoughts help you to feel better. For example: “I can learn to control my life in order to do what I really want to do”

      Destructive thoughts make you feel bad. For example: “I'm not worth anything.” “Everything I do turns out wrong”, or “I’ve made so many mistakes that I can’t get away from my problems.”

   b. **Necessary versus unnecessary thoughts:**

      Necessary thoughts remind us of things we have to do, such as:
“I should remember to fill out my Daily Mood Scale tonight before bed.” “I 
should set the alarm” or “I should do my homework if I want to improve my 
grades.”

Unnecessary thoughts don’t change anything, yet they can make us feel bad. For 
example, we could think: “There will be an earthquake soon” or “I probably have 
cancer” or “They are not going to give me permission.”

c.  **Positive versus negative thoughts:**
Positive thoughts make you feel better, for example: “Right now things seem 
bad, but at least I am here doing something to change them.”

Negative thoughts make you feel bad, for example: “There is no cure for my 
depression” or “I am worth no more than a penny.”

6. **HARMFUL OR COUNTERPRODUCTIVE THOUGHTS:**

Learn to recognize them. (For a description of each error, see the sheet entitled 
“HARMFUL OR COUNTERPRODUCTIVE THOUGHTS”, Appendix C). The 
therapist will give each adolescent a copy of this sheet, and the group will discuss it. 
Each adolescent will be assigned a “faulty thought”. Each adolescent, with the group’s 
help, will then provide an example of the thought assigned to him/her.

a. All or nothing thinking
b. Looking at one example of something bad as if everything will turn out bad.
c. Mental filter.
d. Discounting the positive.
e. Jumping to the wrong conclusions:
   - Mind-reading
   - Fortune-telling
f. Making things more or less than what they really are.
g. “Shoulds”
h. Labeling
i. Blaming.

**FROM THEORY TO PRACTICE:**

2. Keep a record of your thoughts. Complete the List of Thoughts (Appendix D). At the 
   end of the day get out the list and mark each thought you had that day. Add the total 
   number of positive thoughts and the total number of negative thoughts. Observe the 
   relationship that exists between the number of each type of thought and your mood.
3. Examples of counterproductive thoughts (Appendix D). Try to identify each of the following thoughts according to the different classifications that were discussed today. Try to change them to more productive, pleasant, or positive thoughts.
USING YOUR THOUGHTS TO CHANGE YOUR MOOD  
(SESSION 3 OF 4)

REVIEW: The Daily Mood Scale  
Thoughts, actions, and feelings affect one another.  
The types of thoughts depressed people have.  
What were some of the thoughts you had last week?  
Harmful, counterproductive thoughts.  
*Exercise:* One adolescent acts out moods. The others will have to generate examples of thoughts, according to what the therapist requests. He/she may request positive thoughts or negative thoughts. The adolescent who’s acting out moods then acts out the mood that the given thought might produce.

A. INCREASING THOUGHTS THAT IMPROVE YOUR MOOD

Ways to increase the number of healthy thoughts. The following points (sections A and B) will be presented in such a way that they generate a group discussion. A copy of that material will be given to the group members.

1. **Increase the number of positive thoughts in your mind.**

   Make a list of good thoughts you have about yourself and about life in general.

2. **Congratulate yourself mentally.**

   Other people don’t notice most of the things we do. Therefore, it is important for us to acknowledge them and give ourselves credit for doing them.

3. **Stop everything!**

   When we feel nervous we can take a break and mentally give ourselves a time out. Take a break! Let your mind relax. Let your mind take a deep breath. Pay attention to your body’s natural ability to feel at peace. Feeling at peace can give you energy.

4. **Projection into the future.**

   Imagine yourself in the future, at a time when things will be better.
B. DECREASING THOUGHTS THAT MAKE US FEEL BAD.

5. **Interrupt your thoughts.**

   When a thought is ruining our mood, we can identify it and try to interrupt it. First, identify the thought. Then tell yourself, "This thought is ruining my mood; so I’ll think of another."

6. **Time to worry.**

   Set aside "time to worry" each day so that you can concentrate completely on necessary thoughts and leave the rest of the day free of worries. The "time to worry" can be 10 to 30 minutes long each day.

7. **Laugh at your problems by exaggerating them.**

   If you have a good sense of humor, try to laugh at your worries. If you feel you do not have a good sense of humor, try to do it any way you can. Sometimes this can take away the pain of certain worries.

8. **Consider the worst that could happen.**

   Often, certain fears we have about what could happen make us feel more depressed than the fear itself that makes us analyze the things that scare us and confront the worst possibilities or consequences. Remember that the worst thing that could happen is only one of many possibilities and just because it is the worst doesn't mean it is the most likely to happen.

C. BEING YOUR OWN COACH

   Just as we can help someone to do something difficult by giving them instructions, we can help ourselves by giving ourselves instructions. This is what we mean by learning to feel better.

**PRACTICE TIME**

   Now let us think of some examples of how to use these ideas. Think about how to use the examples with the thoughts you have had this week.
TALKING TO YOUR THOUGHTS


When you feel depressed, ask yourself what you are thinking. Then try to talk back to the thought that is bothering or hurting you. The following examples will be presented on a transparency and discussed by the group. Then the group will try to generate an example.

A is the Activating event; what happened.
B is the Belief or the thought that you are having; that is, what you tell yourself about what is happening.
C is the Consequence of your thought; that is, the feeling you have as a result of your thought.
D is the way in which you Dispute or talk back to your thought.

In these examples, you can use the A-B-C-D method in the following way:

A: I have diabetes (this is a fact).
B: Some of the thoughts you could have about this fact are:
   "No one can be happy if he/she has diabetes," or "Diabetes is going to ruin my life," or "I can't stand having diabetes."
C: The consequence of thinking these thoughts is feeling very depressed for a long time.
D: I can talk back to these thoughts in the following way:
   "There are people who have diabetes who are as happy as other people who don't have diabetes."
   "Diabetes is a burden I must deal with, but it is not necessarily ruining each minute of my life."
   "Having diabetes is unfortunate. However, many human beings have diabetes. Some human beings can have satisfactory lives even though they have diabetes. Since I am a human being, I can also have a satisfying life despite having diabetes. Instead of wasting energy being angry and depressed about having diabetes, I can use my energy to figure out the best way to live my life."

A: My mother told me that she takes me to school because if she didn’t, they would put her in jail.
B: My mother cares about herself and not me.
C: I felt sad and angry.
D: Perhaps my mother said that as a way to convince me to go to school, or maybe she wants me to learn and receive an education so I can have a better future.

A: My boyfriend split up with me.
B: I am ugly; no boy will like me. I will never get married.
C: I felt terrible and I cried.
D: That boy does not like me but I know that others find me attractive.

FROM THEORY TO PRACTICE

1. How do I feel each day? Continue to fill out the Daily Mood Scale.
2. Continue to work on your thoughts. Fill out your List of Thoughts every day.
4. Use the A-B-C-D method (Appendix E) to talk back to your thoughts.
REVIEW: The Daily Mood Scale
Thoughts, actions and feelings affect us.
The kind of thoughts depressed people have.
What are some of the thoughts you had last week?
Changing thoughts with the A-B-C-D method.
The ABCD will be reviewed conceptually. The material of the assignment will be used for section B.

A. Some thoughts that often make us feel depressed.

1. "Everyone should love me."

2. "I should always be capable of doing things well and of working hard all the time in order to feel good about myself."

3. "Some people are bad and should be punished."

4. "I will feel really bad if things do not turn out they way they should."

5. "Other people and things over which I have no control make me feel unhappy."

6. "I should worry about the bad things that can happen."

7. "I will never be able to be happy if I don't have anyone to love me."

8. "I can't change the way I am; I was raised this way and this is how I will be."

9. "Genio y figura hasta la sepultura" - a Spanish idiom which alludes to the (mis)conception that it is impossible to change things about ourselves we, or others, may not like. Once a loser, always a loser.

10. "I should feel bad when people I care about are having a hard time."

11. "I should feel bad if I don't do all the right things."

12. "I need everyone's love and approval to feel good."

13. "I have to be popular and accepted by my friends to feel like I am worth something."
B. **More practice with the A-B-C-D method**

When you feel depressed, ask yourself what you are thinking.
Then try to talk back to the thought that is bothering you.

Remember:

- **A** is the **Activating event** (what happened?)
- **B** is the **Belief** or the thought that you are having; that is, what you tell yourself about what is happening
- **C** is the **Consequence** of your thought; that is, the feeling you have as a result of your thought
- **D** is the way in which you **Dispute** or talk back to your thought

**FROM THEORY TO PRACTICE**

1. How do I feel each day? Continue to fill out the **Daily Mood Scale**.
2. Continue to work on your thoughts.
   Fill out your **List of Thoughts** every day.
3. Use the **A-B-C-D method** to talk back to your thoughts.
HOW OUR ACTIVITIES AFFECT OUR MOOD  
(SESSION 1 OF 4)

REVIEW:  Daily Mood Scale - List of Positive/Negative Thoughts  
The ABCD method  
The Depression Cycle: How do our thoughts and our actions influence our feelings?

1. ACTIVITIES AFFECT OUR MOOD: THROUGH OUR ACTIVITIES WE CAN EVALUATE OUR MOOD.

*******************************************************************************
THE FEWER PLEASANT ACTIVITIES PEOPLE DO, THE MORE DEPRESSED THEY FEEL.
*******************************************************************************

The key question is:  
  Do you stop doing things because you feel depressed? or do you feel depressed because you stop doing things? These questions will be asked openly, generating a group discussion.

The most probable answer is BOTH:

The fewer pleasant things you do, the more depressed you feel. The more depressed you feel the fewer pleasant things you do. This is called a "VICIOUS CYCLE."

TO BREAK THE VICIOUS CYCLE, YOU CAN INCREASE THOSE ACTIVITIES THAT MAKE YOU FEEL BETTER.

These activities can be called "pleasant", "fun", "encouraging", "inspiring", etc. We call them "pleasant."

2. Pleasant activities DO NOT HAVE TO BE SPECIAL ACTIVITIES (although they can be). By pleasant activities we are referring to ordinary activities.

3. Sometimes it is hard to think about what we consider pleasant, especially if we haven't done it in a long time. When we are depressed, it is even more difficult to remember pleasant things. To help you do this we use a "LIST OF PLEASANT ACTIVITIES." (Appendix F).
4. Some obstacles to working with pleasant activities are:

YOUR THOUGHTS:

What do you say to yourself while you think about how pleasant activities influence your mood?

Are there things you say to yourself that diminish the possibility of working on your activities?

PEOPLE:

Is it possible that other people make it hard for you to enjoy pleasant activities?

5. For the next week, you will keep a daily record of the number of pleasant activities you do. Use the List of Pleasant Activities by putting a mark next to each pleasant activity you do every day. If there is an activity you find pleasant that isn’t on the list, add it. Personalize your list.

Exercise: Identify pleasant activities that could be added to the list. If any of the activities doesn’t apply to you, live it blank or draw a line through it. You probably haven’t ever done it before.

Many young people find this exercise very interesting and very useful!

This week you don’t have to do anything beyond what you usually do. We want to know the number of pleasant activities you do every day in the course of the next week.

BY DOING THIS, YOU WILL LEARN SOMETHING ABOUT HOW YOUR DAILY ACTIVITIES INFLUENCE YOUR MOOD.

FROM THEORY TO PRACTICE

1. The Daily Mood Scale.
2. The A-B-C-D method.
3. At the end of the day, mark each of the activities from the List of Pleasant Activities you did. Note the total number of marks you had at the end of the day. Bring the list with you next week, along with the Daily Mood Scale and the A-B-C-D method. Identify those you consider pleasant, even if you didn't do them.
HOW OUR ACTIVITIES AFFECT OUR MOOD  
(SESSION 2 OF 4)

REVIEW: Daily Mood Scale  
A-B-C-D Method  
How did you feel keeping track of your activities?  
How many activities did you do each day?

More information about pleasant activities:

1. How do pleasant activities help you control your mood?:

   The transparency with the diagram showing the interaction between thoughts, actions, and feelings will be presented again.

   It is not enough to say to yourself, "Feel better!" It is often easier to change the things you do. If you change the things you do, you will also change the way you feel.

2. What are pleasant activities?

   Pleasant activities don’t necessarily have to be special activities, although they can be special. Pleasant activities are often ordinary activities that we enjoy. Some examples are watching the sun set, reading a book, talking to a friend, going to a park, smelling a flower, listening to music, drawing, etc.

   Pleasant activities can be different for different people. For example, some people find sitting alone, reading a book a very pleasant activity. Other people can find being in a noisy and crowded shopping center fun.

3. It is important to have an adequate balance of pleasant activities in order to feel emotionally healthy.

   Our mood is at its best when our activities are well balanced between things we "have to do" and things we "want to do." Since we have more control over the things we want to do, it is important to keep these activities in mind and do them.

4. Doing pleasant activities without spending a lot of money.

   Exercise: Make a list of pleasant activities that you can do in Puerto Rico, without spending much money.
5. The problem of other things that demand your time and the need to do fun activities: Plan and schedule: a way to gain control over your life.

6. How can you use your thoughts to help you plan and enjoy certain activities?

7. What keeps you from having pleasant activities?

8. Anticipating the problems

   Exercise: The group will be asked to plan an activity. To do this, the group must consider the issues presented in numbers 5-7, above. After the activity is planned, the group will discuss the process they went through.

FROM THEORY TO PRACTICE

1. The Daily Mood Scale.
2. At the end of each day, mark each activity from the List of Pleasant Activities you did. For each day, note the total number of marks at the end of the list. Bring this list with you next week.
3. An experiment to do with yourself.
   Part I: Write up a contract (Appendix G)
   Part II: Fill out the form entitled: How much do you think you enjoy your pleasurable activities? (Appendix H)

What we hope you will learn from this experiment is: (present the goals with a transparency)

   a. You don’t have to wait until you have the energy to do something to do it.
   b. You can choose to do something and actually do it.
   c. You can enjoy some activities even when you thought you couldn’t.
   d. You can influence your mood with your activities. The more you practice this, the more changes you will see in your mood.
HOW OUR ACTIVITIES AFFECT OUR MOOD  
(SESSION 3 OF 4)

REVIEW:  The Daily Mood Scale  
List of Pleasant Activities  
Individual Contract  
Prediction of Pleasant Activities  
The ABCD

CREATING YOUR OWN PLAN FOR OVERCOMING DEPRESSION:

1. What are the goals? What is the relationship of the goals with the activities? The therapist will ask these questions openly, encouraging a group discussion.

2. To overcome depression:
   - Set reasonable goals
   - Take note of the positive things you do
   - Reward yourself in your mind and in real life

3. Setting realistic goals:
   - Set clear and concrete goals (so that you know when you have reached them)

<table>
<thead>
<tr>
<th>UNCLEAR GOALS (Abstract - general)</th>
<th>CLEAR GOALS (Specific - concrete)</th>
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<tbody>
<tr>
<td>Be less bored</td>
<td>Go to the shopping center (to stores) once a week</td>
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<tr>
<td>Be a good friend</td>
<td>Spend three hours a week doing pleasant things with your friends</td>
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<tr>
<td>Be a good musician</td>
<td>Spend x hours a week practicing an instrument</td>
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<tr>
<td>Get better grades</td>
<td>Study for two hours every afternoon</td>
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<tr>
<td>Lose weight</td>
<td>Sign up at a gym and follow a healthy diet</td>
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The therapist will encourage the group to come up with examples, using those above as a model. Converting unclear goals to clear goals will be practiced in an exercise.
4. Setting realistic or reasonable goals:

   It is often difficult to determine beforehand what is realistic and what is not. What is not realistic today could be realistic in the future. However, if you find you can't meet most of your goals now, then they are probably not realistic for you at this time.

4. Break down your big goals into smaller parts:

   Be sure each part can be achieved without too much effort. If your goal is to learn to be a good baseball player, you can start by finding out where the closest ballpark is and at what hours you practice. The therapist will have the participants take one or more of the examples they have generated, and practice as a group dividing big goals into smaller parts.

5. Changes in our lives sometimes require changes in our goals:

   - Things that were once realistic can become unrealistic
   - Things that were once unrealistic can become realistic
   - The therapist will ask the group for one or more examples of this.

   It may be necessary to learn to:

   - Enjoy old activities in new ways
   - Enjoy new interests to replace old ones
   - Develop abilities that you hadn't used before

6. There are three kinds of goals:

   **SHORT-TERM GOALS**
   Things you would like to do soon (say, within the next six months)

   **LONG-TERM GOALS**
   Things you would like to do at some point in your life.

   **LIFETIME GOALS**
   Philosophy of life: What do you care most about in life?

7. What are your goals? What are the obstacles that keep you from achieving them? The therapist will pass out paper and pencils to everyone. Each participant will be asked to write a short-term goal and a long-term goal (Appendix I). Then he/she will ask for volunteers to share their goals. The group will analyze whether or not these are realistic, and identify the possible obstacles that could keep the person from achieving them.
8. Planning for the future: What is a plan and what is it for? *The therapist will ask this question openly, encouraging a group discussion.*

Today we will think only about individual goals and plans, that is, goals and plans that involve only you. *The therapist will hand out paper and pencils. Each group member will be asked to visualize an objective (goal) and identify steps to achieve it.*

**FROM THEORY TO PRACTICE**

1. The **Daily Mood Scale**
2. Your **Weekly Activities Schedule** (Appendix J)
3. Time management: Make a list of goals you would like to achieve this week. Put them in order of priority. Are you sure you really want to do those things you put last on your list? Identify a plan to carry out the highest priority goals.
3. The **A-B-C-D method**
HOW OUR ACTIVITIES AFFECT OUR MOOD  
(SESSION 4 OF 4)

REVIEW:  
The Daily Mood Scale  
List of personal goals  
Weekly plan  
A-B-C-D method

DEPRESSION AND THE HEALTHY MANAGEMENT OF REALITY

1. We all live in two worlds:

A. THE OBJECTIVE WORLD (or the outside world, what is outside of us)

B. THE SUBJECTIVE WORLD (or the inner world, what is inside our minds)

The therapist will present the “portrait of the lady” (Appendix K) and facilitate a group discussion about diverse perceptions that can be had of the same drawing (the portrait of a young lady or that of an old woman). This is to illustrate the difference between the objective and the subjective worlds.

2. These two worlds are our REALITY. The key to feeling emotionally healthy is:

TO LEARN HOW TO MANAGE THESE TWO PARTS OF OUR REALITY.

3. No one controls these two worlds completely. However, we can learn to gain greater control over the subjective world and to identify ways to manage the objective world.

WHEN WE ARE DEPRESSED, WE FEEL WE HAVE NO CONTROL.

4. Ways to feel more control:

A. ALTERNATIVES  
The more alternatives you learn to have, the more freedom you will have. The therapist will present the following situation to the group, asking them to come up with alternatives: There is a dance and a boy/girl who you like, but aren’t romantically interested in, invites you to go. You are waiting to invite (or be invited by) the boy/girl you really like.

B. THINKING THAT LIFE IS MADE UP OF CHUNKS OF TIME

Also, be careful about saying to yourself:  
"I cannot enjoy life until ________________."  
For example, if you say to yourself:
"I cannot enjoy life until this depression is over", or "I won’t enjoy playing an instrument until I join a rock band"; you may not do the types of things that could help you free yourself from depression sooner.

5. **Making your OUTSIDE WORLD healthier for yourself.**
   What can you do now?
   Let's talk about your **ALTERNATIVES.**
   Let's talk about your **TIME.**

   Making your **INSIDE WORLD** healthier for yourself.
   What can you do now?
   Let's talk about your **ALTERNATIVES.**
   Let's talk about your **TIME.**

7. **Pleasant activities make your time more satisfying.**
   As your time becomes more satisfying, your life becomes more satisfying, too.
   Integrate your pleasant activities into your life plan. If pleasant activities help your to overcome depression, they will also help you to become more emotionally healthy.

   The better you feel, the more you will be able to help yourself and others.

**FROM THEORY TO PRACTICE**

1. The **Daily Mood Scale.**
2. Your **Weekly Activities Schedule.**
3. The **A-B-C-D method.**
**HOW CONTACTS WITH PEOPLE AFFECT OUR MOOD**  
**(SESSION 1 OF 4)**

**REVIEW:**  
The Daily Mood Scale  
Weekly Activities Schedule  
The ABCD method

1. We are going to work on how contacts with other people affect our mood.  
Severe depression is related to the following factors: (present with a transparency)
   a. Less contact with people.  
   b. Feeling uncomfortable with, shy or angry toward other people.  
   c. Being less assertive, that is, not expressing what you like or don't like.  
   d. Being more sensitive to being ignored, criticized or rejected.

2. Does depression cause people to be less sociable? Or does being less sociable cause people to get depressed? The therapist will ask this question openly, facilitating a group discussion.

   The answer is probably that depression and lack of contact with other people influence one another.

   For example, a change of schools may mean leaving behind many friends. This can make you feel sad. If you feel sad and don't make an effort to meet new people, that sadness can turn into a long and intense depression. Once you feel depressed, you will be less motivated to hang out with other people, which makes you even more depressed and you often end up spending most of your time alone and sad.

3. The importance of **SOCIAL SUPPORT**.

   The support we receive from being in contact with other people is important for our health. The contacts we have with our family and friends create a kind of protective social network or "social support network".

   Exercise: *The therapist will provide a roll of yarn. The group will form a circle. The person who starts out holding the roll of yarn will throw it to someone else, keeping hold of loose end. Then that person will do the same, holding onto the yarn. Thus the group will make a web, or a net, of yarn.*

   In general, the stronger the social support we receive, the more we are able to confront difficult situations. The "social support network" or system refers to those people who are close to us and with whom we share important information or important moments of our lives. These people can be family, friends, neighbors, classmates and acquaintances.
4. What is your social support network? Who are your friends? How often do you see them? What do you do together?

Exercise: Represent your social network using the following diagram (Appendix L): In each shape write the name of someone who is part of your network. Then he/she will give instructions so that with the individual network of each group member put together with the others, a “group support network” is formed.

5. Two important principles to keep in mind in the future.

a. If your social support network is too small, make it larger. Your network is too small if there is no one you trust to talk with about your personal matters, if you have no one to turn to if you need help, or if you have no friends or acquaintances to do things with.

b. If your network is sufficient and of a good size, value it and try to keep it strong. In other words, don't allow disagreements to cause separations between you and those who form a part of your network. But how can you achieve this? The four sessions this month will focus on how to enlarge and maintain your social support network.

6. MEETING PEOPLE
How does one make friends? The therapist will ask this question, encouraging the group to come up with ideas. The easiest way to meet other people is to do something you like to do, in the company of others.

- When you do something you like, you are more likely to be in a good mood and that will make it easier to be more friendly to others.
- Even if you don't find anyone in particular whom you would like to get to know better, you will be doing a pleasant activity and you won't feel like you are wasting your time.
- Since the main focus will be on the activity you are doing, and not on meeting other people, you probably will feel less pressure than you would if the only purpose was to meet people. If you see people you would like to get to know better, most likely these are people who have things in common with you.

Exercise: "PLACES OR ACTIVITIES WHERE YOU CAN MEET OTHER PEOPLE." (Group activity)

7. KEEPING YOUR SOCIAL SUPPORT NETWORK HEALTHY

How can we keep our support network healthy? The therapist will ask the group this question, creating space for a brief discussion.
Contact with others, whether it be in person or by phone, is very important. Thoughts that can block this:
  "They are going to reject me."
  "They will accept me only because they're nice."
  "They won't want to go out with me after they get to know me."

8. MAINTAINING GOOD RELATIONSHIPS: Being assertive.

What are the differences between being passive, assertive and aggressive? The therapist will ask this question openly, encouraging discussion.

Being assertive means being able to say positive and negative things without feeling bad. You don't always have to say what you think, but it is important to feel that you have a choice.

FROM THEORY TO PRACTICE

1. The Daily Mood Scale.
2. Weekly Activities Schedule: Note the contacts you had with others. Put a "+" if it was positive, and a "-" if it was negative.
3. A-B-C-D method.
REVIEW: The main ideas:
Thoughts, actions and feelings influence one other.
By learning how to have more contacts with people, you will learn to have
greater control over your feelings.

1. IN TRYING TO LEARN HOW TO FEEL BETTER, THREE THINGS ONE
SHOULD FOCUS ON ARE: (present the transparency and the diagram showing the
relationship between thoughts, feelings, and actions)

   a. Being alone.
   b. Being with others.
   c. Feeling good about what you do in life. By this we don't mean to imply
      that human beings should be conformists.

2. For each of these areas it is important to pay attention to:

   a. Your thoughts.
   b. Your expectations.
   c. Your behavior.
   d. Your feelings.

3. BEING WITH OTHERS

   a. Your thoughts

   Thoughts that help you to feel comfortable with other people. Sometimes
   by changing your perspective you can change the way you feel and
   behave. For example, instead of thinking, "How can I feel comfortable in
   this situation?", try thinking, "How can I help others feel comfortable?"
   The therapist should ask the group for examples of this.

   Thoughts that keep you from making friends.
   Examples:
   "Could he or she be a good friend to me?" vs. "Could I (or
   do I want to) be a good friend to him or her?"

   b. Your expectations

   What can you expect from others?
What can others expect from you?

The therapist can try to demonstrate this concept using parent-child relationships. This will generate a brief discussion.

If your expectations are too high, you will be disappointed and perhaps frustrated. If your expectations are too low, then you are not giving yourself or others a chance.

b. Your actions

How do you approach others?

What is the impression you make?

The following information will be presented with transparencies. A brief discussion will ensue.

- Your face: Do you smile once in a while? Do you make eye contact?
- Your body: Do you look depressed? Do you look tired or worn out?
- Your appearance: Is it appropriate for the occasion and the place where you are?
- Your speech: Is it too slow or so soft that it is difficult to hear you?
- Your conversation: Do you appear interested in what others say? Or do you ignore and criticize them?
- Your attitude: Do you complain a lot?

d. Your feelings

Recognize how you feel.

Say what you feel appropriately.

The differences between being passive, assertive or aggressive:
The following definition will be presented with a transparency, and discussed by the group.

Assertiveness is being able to share positive and negative feelings comfortably. Changing your point of view can help you to be more assertive instead of being passive. For example, if you frequently think, "I don't want to impose on or take advantage of others," try to think, "I don't want others to impose on or take advantage of me."

4. LEARNING HOW TO BE ASSERTIVE

a. Practicing in your mind

Visualization exercise: The therapist will ask the group members to think of a situation in which it is difficult to be assertive. He or she will turn on background music and give the following instructions:

- Imagine the situation as if it were a photograph
- Imagine the action starting (as if it were a movie)
- Imagine saying something assertive
- Imagine the response you get

(This exercise is a useful way to practice assertiveness, before putting it to use.)

b. Learn by imitating the style of others you like.

c. Ask friends for suggestions on different way to deal with difficult situations.

d. When you feel ready to be assertive, try it in real life.

e. REMEMBER: Try being assertive with positive and negative comments and observe what happens.

5. Practice: Use the session to practice saying things that you need to say to another person, which are difficult to say. The therapist may or may not choose to divide the group for this activity. He or she will ask the participants to, in the same way they did in the visualization exercise, imagine a situation in which they need to be assertive. This time the work will be shared by the whole group. Once they have visualized the situation and some strategies for dealing with it, they will act it out in a little skit.
HOW CONTACTS WITH PEOPLE AFFECT OUR MOOD
(SESSION 3 OF 4)

REVIEW: The way you think about things affects your mood. Your mood affects what you think and what you do. You can change your thoughts and actions to help yourself overcome feelings of depression.

1. When you consider contacts with others, also consider:
   a. Your thoughts about others
   b. What you do with others
   c. How you feel being around others

2. Your thoughts about others. Do you find that...
   a. you can't trust others?
   b. you don't feel tolerant of others?
   c. you feel afraid of others?
   d. others expect a lot from you?

3. Your behavior around others:
   a. Consider how you come across to others.
   b. How can you help others feel comfortable with you?
   c. What do other adolescents do? The therapist will present all this questions and encourage discussion.
   d. To you behave assertively? Remember, assertiveness means being able to share your positive and negative feelings with others and to feel comfortable doing it.

Example: An argument between siblings in which both insult one another.
   passive: Say nothing, just "take it"
   aggressive: Return the insult
   assertive: "Look, I haven't been rude to you throughout this argument, so I expect you not to be rude to me."

Exercise: The therapist will divide the group into 2 or 3 smaller groups. He or she will ask each small group to work on a situation, to come up with three possible ways to deal with it, using the above example. Then each group will act out the possible solutions to their given situation.
4. Your feelings about others:
   a. Before being with others

   In order to change your feelings about others, decide beforehand what kind of thoughts you would like to have when you are with them.

   In the same way, if you want to change your behavior, decide ahead of time how you would like to behave around them.

   b. After being with others

   Learn from your experiences: Think about the feelings you had while you were with them. What were your feelings after you left? Can you figure out what made you feel good or bad?

5. Use the session to practice:
   a. Thinking differently about others.
   b. Behaving differently with others.

   For example: Ask the other group members questions you would be afraid to ask others, such as: Does he/she see anything from the same perspective as you? What do you think they think of you?

   Exercise: How do others see you? A piece of paper will be taped on each member’s back. Everyone will move around the room, writing their impressions of each other on the pieces of paper.
REVIEW: Up to now, we have learned to think, behave and feel in a healthier way. At some points in our lives things can happen that overwhelm us. Sometimes depression starts at such moments. If the ways we are using to cope with our problems are not enough, it is helpful to learn new ways of thinking and behaving, so that it is less likely for us to stay depressed.

1. Contact with others is important for your mood because it can:
   a. provide satisfactory and rewarding experiences.
   b. support the values you want to live by.
   c. provide companionship and a sense of stability.
   d. give you information about yourself that is most important to you.

2. It is not helpful to think that something is wrong with you or with others when relationships don't work well. It is helpful to consider the following questions: The therapist will encourage the group members to share their experiences with this issue.
   - Do you and the other person want the same things from the relationship?
   - Are your interests similar?
   - Can you tell each other what you think and feel freely?

3. Relationships with others are worth working on.

   Nevertheless, relationships are never completely worked out.

   Nothing that is alive is static; it is always changing.

   On the other hand, it isn't worth the pain to start a relationship when the only way it will work is if one or both of the people involved has to make big changes. Once a relationship is established, it makes sense to try to work on it and keep it the best it can be.

4. Relationships can help you improve your life.

   Your social environment can help you to be what others consider “a good person.” People can help you to feel like a good, worthy, and esteemed person. Choose environments where you can meet people who will help you, not hurt you.
5. Tools to make sure you understand what others say:

   *Exercise:* All but one participant is asked to leave the room. The one who stays in the room will be told a secret. Then one of the people outside the room will be asked to enter. The first person will whisper the secret to the second person, staying as loyal and precise as possible to the way in which the secret was first told. This person will then pass the secret on to a third person, who enters from outside the room, and so on until everyone is again in the room. The last person to enter will be asked to say the secret out loud. This final version will be compared to the original version.

   Repeat what the other person said to make sure you understood.
   Repeat what others say in your own words.
   You can ask them directly if that is what they meant. Often people argue about what others said without knowing if that is what they really meant to say.

**CLOSING ACTIVITY**

Using various materials such as construction paper, glitter, glue, colored pencils, crayons, etc., the group will make a card together, on which each adolescent will be free to express themselves to the other group members.
# APPENDICES

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<thead>
<tr>
<th>Appendix</th>
<th>Title</th>
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<tbody>
<tr>
<td>A</td>
<td>How we understand depression</td>
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<tr>
<td>B</td>
<td>Daily Mood Scale</td>
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<td>C</td>
<td>List of Harmful or Counterproductive Thoughts</td>
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<td>D</td>
<td>List of Positive and Negative Thoughts</td>
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<td>E</td>
<td>A-B-C-D method</td>
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<td>F</td>
<td>List of Pleasant Activities</td>
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<td>Personal Contract</td>
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<td>H</td>
<td>How much do you think you will enjoy your Pleasant Activities?</td>
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<td>I</td>
<td>List of Personal Goals</td>
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<td>J</td>
<td>Weekly Activities Schedule</td>
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<tr>
<td>K</td>
<td>Portrait of a Lady</td>
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<td>L</td>
<td>Social support network</td>
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Appendix A

HOW WE UNDERSTAND DEPRESSION

THINK

ACT

FEEL
## Mood Thermometer

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Appendix C

TYPES OF THINKING ERRORS

All or nothing thinking:
This is when you look at things as if they were completely good or completely bad. For example, if you make a mistake doing something, you think all your work was useless. You might think, "I'm not even going to try out for the team because I'll never get picked." Or "I can't do anything right."

Mental Filter:
This is when you take a single negative event and you focus on it in such a way that you see everything as negative and think everything is going wrong. It also refers to making or seeing things as bigger than they really are. For example, "a patient came into treatment one day and told us that she had seen a dead bird on the sidewalk and it made her feel really bad. She had walked through a beautiful garden, full of trees and flowers and all she saw was the dead bird."
Another example, “An art student received a constructive criticism on her artwork from her teacher. He only suggested that she change the color on one of the edges of the canvas. Because of this comment, the student thought she wasn’t a good artist.

Discounting the positive:
This is when you don’t notice positive things that happen you only see the negative things. Or you when positive things happen they seem less important to you than they really are. For example, you might believe that nobody likes you to the extent that if someone is nice to you, you think that something must be wrong with that person. Or if someone tells you how good you look, you think he or she says it just so you won't feel bad.

Jumping to the wrong conclusions:
This is when you come to conclusions too quickly and you see the negative side of things. There are two types:

Mind reading:
This is when you assume what someone is thinking without really knowing. For example, you see that someone is angry and you think the person doesn't like you or that the person is angry with you. It might well be that the person is having his/her own difficulties.
Other examples: "Dad thinks I'm stupid" or “the coach won't let me play anymore because I didn’t score in the game, he thinks I am a bad player."

Fortune-telling:
This is when you feel and predict that only disasters and tragedies will happen to you in the future. For example, "I'm going to flunk out of school" or "I won't have any friends at my new school" or "No one's going to want to dance with me at the party" or "I'm not going to the audition because I'll never be picked."
Taking your feelings too seriously:
This is when you think that your feelings are the only version of reality. For example, you think, "I feel so sad that it proves what a disaster I am" or "I'm so lonely that my life has no meaning." "I am always bored so other people probably seem me as a boring person."

Shoulds/Perfectionism:
This is when you try to motivate yourself with shoulds; that is, with what you believe people should or have to do or say. Even if there are things you need to do, it’s important to be careful not to have unrealistic, excessive or inflexible expectations for yourself. For example, you might think, "I should get all As in school" or "My Mom should pay attention to me all the time" or "my boyfriend/girlfriend should always go out with me whenever I want." When you tell yourself you should, you feel guilty. It’s better to do things the best you can and because you want to, not because you feel guilty. When you think shoulds about other people, you get angry and frustrated if they don’t do things the way you expect them to.

Labeling yourself or others:
Only because you make one mistake, you start to think you're a loser. For example, you might say, "I yelled at Mom, I’m a bad daughter" or "I'm stupid because I have bad grades" or "I'm ugly." You might also label others: "The teacher is stupid because she scolded me." "She’s a traitor because now she hangs out with other friends besides me."

Blaming yourself:
This is when you blame yourself for the negative things that happen around you and over which you have no control. For example, if something bad happens to one of your family members or friends, you feel as if it was your fault because you couldn't prevent it. Or if your parents get divorced, you feel it was your fault because they were always arguing in front of you.
### Appendix D

**LIST OF NEGATIVE THOUGHTS**

Mark (X) next to the negative thoughts you had each day.

<table>
<thead>
<tr>
<th>DATE</th>
<th>Saturday</th>
<th>Sunday</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
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</thead>
<tbody>
<tr>
<td>I’m confused.</td>
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<tr>
<td>There is no love in the world.</td>
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<tr>
<td>I’m wasting my life.</td>
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<td>I’m afraid.</td>
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<td>I’ll end up alone.</td>
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<td>No one considers friendship important.</td>
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<td>I have no patience.</td>
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<tr>
<td>Nothing’s worth it.</td>
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<td>It’s tough to go on.</td>
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<tr>
<td>I’m stupid.</td>
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<td>Anyone who thinks I’m nice doesn’t really know me.</td>
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<tr>
<td>Life has no meaning.</td>
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<td>I’m ugly.</td>
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<td>I can’t express my feelings.</td>
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<td>I’ll never find what I really want.</td>
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<td>I’m not capable of loving.</td>
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<td>I’m worthless.</td>
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<td>My hopes have vanished.</td>
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<tr>
<td>I’m useless.</td>
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<td>I won’t be able to solve my problems.</td>
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<td>Everything I do turns out wrong.</td>
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<td>I’ll never be able to change.</td>
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<td>Everything gets ruined.</td>
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<td>I have no enthusiasm for anything.</td>
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<td>I wish I were never born.</td>
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<td>I won’t be able to sleep.</td>
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<td>I’m inferior to others.</td>
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<td>Everything’s my fault.</td>
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<tr>
<td>Why does everything bad happen to me?</td>
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<tr>
<td>Nothing is fun.</td>
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<tr>
<td>Life isn’t worth it.</td>
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<td>I’ll never stop being depressed</td>
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<td>I don’t have enough willpower.</td>
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<td>I wish I was dead.</td>
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<td>I wonder if people talk about me.</td>
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<td>Things are going to get even worse.</td>
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<td>I have a bad temper.</td>
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<td>Life’s unfair.</td>
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<td>I don’t dare imagine what my life will be like in 10 years.</td>
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<tr>
<td>Something’s wrong with me.</td>
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<tr>
<td>I’m selfish.</td>
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<td>I’m not as good as others.</td>
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<td>I feel hurt easily.</td>
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<td>No one in my family understands me.</td>
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<td>I am always bored.</td>
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<td>Total Negative Thoughts</td>
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</table>
LIST OF POSITIVE THOUGHTS

Mark (X) next to the positive thoughts you had each day.

<table>
<thead>
<tr>
<th>DATE</th>
<th>Saturday</th>
<th>Sunday</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
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<tbody>
<tr>
<td>I can do it better.</td>
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<tr>
<td>What a beautiful morning.</td>
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<tr>
<td>I will learn to be happy.</td>
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<tr>
<td>Life is interesting.</td>
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<td>I deserve to be given credit.</td>
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<tr>
<td>Even though things are bad now, they’ll get better.</td>
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<td>I did a good job.</td>
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<td>I really feel good.</td>
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<td>This is fun.</td>
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<tr>
<td>I chose the best solution to a difficult problem.</td>
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<td>I’m a good person.</td>
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<td>I’m hopeful about my future.</td>
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<td>I have good control of myself.</td>
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<td>I have a right to be happy.</td>
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<tr>
<td>This is interesting.</td>
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<tr>
<td>I really handled this situation well.</td>
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<tr>
<td>I like to read.</td>
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<tr>
<td>I get along well with others.</td>
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<td>I’ve worked hard, now I need to rest.</td>
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<td>I’m considerate toward others.</td>
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<tr>
<td>I have enough time to do the things I want to do.</td>
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<tr>
<td>I like people.</td>
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<tr>
<td>I always find the strength to solve any difficult problem.</td>
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<tr>
<td>I’m a good person.</td>
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<tr>
<td>I’m honest.</td>
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<td>I can handle a crisis as well as anyone else.</td>
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<tr>
<td>DATE</td>
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<tr>
<td>My experiences have prepared me for the future.</td>
<td>✔️</td>
<td>✔️</td>
<td>✔️</td>
<td>✔️</td>
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<tr>
<td>I’m lucky.</td>
<td>✔️</td>
<td>✔️</td>
<td>✔️</td>
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<td>✔️</td>
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<tr>
<td>I’m very responsible.</td>
<td>✔️</td>
<td>✔️</td>
<td>✔️</td>
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<tr>
<td>I’m interested in other people.</td>
<td>✔️</td>
<td>✔️</td>
<td>✔️</td>
<td>✔️</td>
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<tr>
<td>I’m intelligent.</td>
<td>✔️</td>
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<tr>
<td>I’m attractive.</td>
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<tr>
<td>I am important to my family.</td>
<td>✔️</td>
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</table>

**Total Positive Thoughts**
**WORKING WITH THE A B C D METHOD**

<table>
<thead>
<tr>
<th>A. Activating event (What happened?)</th>
<th>C. Consequence (How did you react?)</th>
</tr>
</thead>
<tbody>
<tr>
<td>B. Belief (Your thoughts and beliefs about what happened, what you told yourself about what happened and had an effect on your reaction)</td>
<td>D. Debate or dispute the Belief (Alternate thoughts that could help you react in a healthier way)</td>
</tr>
</tbody>
</table>
## List of Pleasant Activities

Mark (X) next to the pleasant activities you did each day.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Saturday</th>
<th>Sunday</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wed.</th>
<th>Thursday</th>
<th>Friday</th>
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</thead>
<tbody>
<tr>
<td>Wear clothes I like.</td>
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<tr>
<td>Go outside (beach, park)</td>
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<tr>
<td>Help groups I respect (community, church).</td>
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<td>Talk about sports.</td>
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<td>Watch or participate in sports.</td>
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<td>Go to the theater, concert, dancing</td>
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<td>Plan trips or vacations.</td>
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<td>Buy things.</td>
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<td>Make crafts.</td>
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<td>Go to church.</td>
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<td>Fix up my room and my house.</td>
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<td>Read books, magazines, or newspapers.</td>
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<tr>
<td>Talk to my friends</td>
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<td>Play pool.</td>
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<td>Drive a car.</td>
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<td>Ride a bike, skate, or skateboard.</td>
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<td>Watch TV</td>
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<td>Play board games (cards, monopoly, etc.)</td>
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<td>Finish a difficult task.</td>
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<td>Finish a puzzle.</td>
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<td>Complete crosswords.</td>
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<td>Take a hot bath.</td>
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<td>Write stories, poetry, music.</td>
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<td>Travel.</td>
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<td>Sing.</td>
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<td>Do my job.</td>
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<td>Dance.</td>
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<td>Play a musical instrument.</td>
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<td>Take a nap.</td>
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<td>Solve a personal problem.</td>
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<td>Put on make-up, fix my hair.</td>
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<td>Meet new people.</td>
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<td>Do outdoor work.</td>
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<tr>
<td>Sunbathe.</td>
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<td>Go to a fair, zoo, or park.</td>
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<td>Plan or organize something.</td>
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<td>Watch nature.</td>
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<td>Listen to radio, music.</td>
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<td>Give gifts.</td>
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<td>Take pictures.</td>
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<td>Collect natural objects (rocks, seashells, etc.).</td>
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<tr>
<td>Help someone.</td>
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<tr>
<td>Listen to jokes.</td>
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<tr>
<td>Look at beautiful landscapes.</td>
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<tr>
<td>Eat good food.</td>
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<tr>
<td>Walk in the heart of the city.</td>
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<td>Go to museum, gallery, or exhibition.</td>
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<tr>
<td>Activity</td>
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<tr>
<td>Do a good job.</td>
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<tr>
<td>Go to the gym.</td>
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<tr>
<td>Learned something new.</td>
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<tr>
<td>Spend time with family.</td>
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<td>Participate in social or political protests.</td>
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<td>Talk on the phone.</td>
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<tr>
<td>Daydream.</td>
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<td>Go to the movies.</td>
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<tr>
<td>Kiss.</td>
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<td>Organize my time.</td>
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<tr>
<td>Cook</td>
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<tr>
<td>Work at home.</td>
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<tr>
<td>Eat out (fast food, restaurants)</td>
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<td>Visit or spent time with friends.</td>
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<tr>
<td>Write in a diary.</td>
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<tr>
<td>Pray.</td>
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<tr>
<td>Meditate, do yoga.</td>
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<tr>
<td>Rent movies.</td>
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<tr>
<td>Have open and frank conversations.</td>
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<td>Walk barefoot.</td>
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<tr>
<td>Go partying.</td>
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<tr>
<td>Sew or knit</td>
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<tr>
<td>Go to the beauty salon or barber shop.</td>
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<td>Spend time with someone I love.</td>
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<tr>
<td>Take a noontime nap.</td>
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<tr>
<td>Start a new project.</td>
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<tr>
<td>Activity</td>
<td>Saturday</td>
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<td>Play video games.</td>
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<td>Prepare a new or special meal.</td>
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<tr>
<td>Watch people.</td>
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<tr>
<td>Make a bonfire.</td>
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<td>Sell or exchange something.</td>
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<td>Write letters.</td>
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<td>Take care of plants.</td>
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<td>Go for a walk.</td>
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<td>Take care of little kids.</td>
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<td>Sleep late.</td>
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<tr>
<td>Play with a pet.</td>
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<tr>
<td>Surf the Internet (Chat, Messenger)</td>
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<tr>
<td>Hang out with friends</td>
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<tr>
<td>Exercise</td>
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<td>Take dance or music lessons</td>
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</table>

**Total Pleasant Activities**
## Weekly Activities Schedule

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<thead>
<tr>
<th>Time</th>
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<tbody>
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<td>7:00-8:00</td>
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PERSONAL CONTRACT

I, ____________________________________________, establish the following contract with myself:

**Objective:** During this week, I will do the following pleasant activity:
______________________________________________________________
______________________________________________________________
______________________________________________________________

**Reward:**
1. If I achieve my objective, I will reward myself with:
   _____________________________________________________________
   _____________________________________________________________
   _____________________________________________________________

2. I will give myself this reward no more than two days after having achieved my objective.

Signature: _________________________   Date: ___________________

Date I achieved my objective: _________________________________________

Date I gave myself my reward: _________________________________________
Appendix I

How much do you think you will enjoy your Pleasant Activity?

<table>
<thead>
<tr>
<th>Activities (Choose from 3-6 activities)</th>
<th>Prediction (How much do you think you'll enjoy these activities? - from 0 to 100%)</th>
<th>Result (How much did you actually enjoy these activities? - from 0 to 100%)</th>
<th>Comments</th>
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</table>
PERSONAL GOALS

SHORT TERM GOALS
(Things you’d like to do in the next 6 months)

_________________________________________________________________________
_________________________________________________________________________
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LONG TERM GOALS
(Things you’d like to do in your lifetime)

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LIFETIME GOALS
(What do you care most about in life?)

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Appendix L

My social support network