

COPING WITH DEPRESSION

MINI “HELP YOURSELF” PROGRAM
Dr. John Garlock, LPC, LMFT, LCDC, CEAP
The Family Resource Center



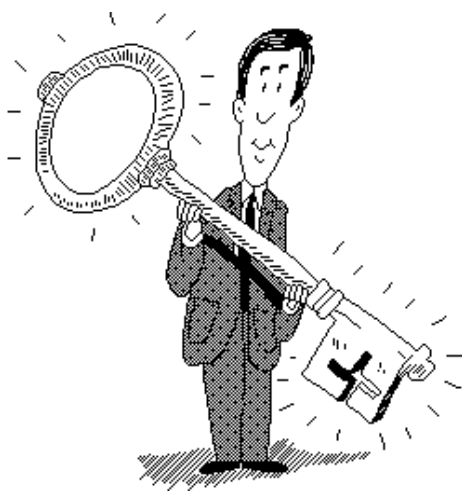
This Program Is Intended As A Self Help
Program And Is Not Intended To Be
A Therapy Program Nor Is It
Intended To Replace
Therapy Services

COPING WITH DEPRESSION
FREE MINI “HELP YOURSELF” PROGRAM
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It's Time to Find Your Key to Your Depression!

**Coping With Depression
Mini “Help Yourself” Program**

LEARNING TO MANAGE YOUR DEPRESSION

COMMON REACTIONS AND TIPS FOR COPING

Realizing that something is wrong with how you are feeling and acting and coming to personal terms with yourself and starting to understand and accept that you have a depression problem can be an unpleasant experience. Often times, you may experience feelings of sadness, shame, blame, powerlessness and loss. You may also experience feelings of helplessness, guilt, and fear and uncertainty about your coming to terms with the idea that you have depression difficulties. Shock and surprise can come when you are informed by a loved one or a coworker or family member or friend that your depression related behaviors and patterns are a problem that you must address. Often, you are unable to put a name to what you are experiencing but you certainly know that something is not right. And...you may have known it for some time and just tried to avoid it.

At times, the case is that you have acted out your depression in some way and created a problem for yourself and that you must now clean up the mess that has been created. It is often the situation that you did not intend to have a depression problem or troubled interaction but it just seemed to happen. It is also likely that you have had depression difficulties in the past and this is not the first situation that you have had to face about your depression and how you express it. Now is a good time to work on your depression while there is some insight available to you and you are in a positive frame of mind to admit to having a problem and to doing something about it. There is no shame in having a problem. Where the shame comes from is denying the problem or avoiding the problem or ignoring the problem until a much larger problem is created. Depression causes you to feel estranged from yourself. If you are the

one who decided you have an depression problem and there is no crisis that caused you to decide to seek information and skills to manage your depression, you are starting at a very positive place in terms of not being in denial about your depression and you are not minimizing your depression and the impact it has on you and others in your life. I have a lot of respect for anyone who comes to the realization that there is a problem that must be solved and they seek help on their own. Recognizing your own depression is the beginning step!

If you are having depression, you are responsible for how your depression and actions are manifested and what happened as a result of your depression even though you may not now believe that you are the source of the problem. Having a problem of some sort is not a “bad” thing but doing nothing about it makes you vulnerable for future significant life losses that you do not want to experience. Admitting that you have a problem is the first step to recovery from the problem. The first step of any 12 step self help recovery program is the following:” I admitted that I was powerless over my depression and that my life has become unmanageable”. You must admit to having a depression problem and also admit that your life is becoming more and more unmanageable due to your powerlessness over your depression difficulties. Since one hallmark of depression is your perceived lack of control over yourself and your emotions, you must admit that you are powerless so that you can acquire the tools that you need in order to claim power over your depression. Your depression serves a purpose to you in your life and you must come to understand what that purpose is if you are to begin a recovery process.

This is the point in time where so many people get scared just reading about the information contained in this introduction up to this point. It is important to note that your depression, whatever the cause might be, is creating significant problems for you in your life which will result in significant losses for you if it remains unaddressed.

If you are getting scared at this point about this information, you may not yet be ready to work constructively on your depression. It may just be that you will have to experience further depression before you can come to believe that you have a problem that requires intervention. If you do believe that you have a depression problem and that you need additional skills and tools to deal with your depression effectively than this mini self help program is for you. I have spent over 15 years treating depression problems and disorders and I have helped many people to learn how to manage and resolve their depression difficulties. And, I believe that this mini program that I have written for you can help you start on the road to depression recovery. Please note that recovery from any problem is not an event but rather a process which is a life long one. Why not make a commitment to yourself to stop the insanity today and start a program of personal depression management today? Just do it! Visit our practice web site to get further information at:

www.helptochange.com

Coping with depression is a healthy process for all involved. The losses that come from having depression problems are often accompanied by feelings of loss: loss of identity, security, pride, ability to trust and sense of security. The stages people go through in dealing with their depression problem are very typical for anyone who has experienced a loss situation. Please remember that loss affects us all differently and that the grief process you may be having is normal and is supposed to be happening. At times, we will experience grief about not getting something we really wanted or losing something important due to our depression problems. Depression often leads to grief reactions if we can get past our defensiveness to admit that we have or will have losses that we brought onto ourselves that only we can cope with. Repairing the losses is a positive task in that we become honest about ourselves, our problems and our lack of skills that then

can lead to positive change and growth. Blaming others does slow down the healing process and is very common when people are attempting to overcome depression difficulties. What you feel you can heal!

Since depression is an emotion that we all will likely have at one time or another, it is important to understand that it is an important emotion to recognize and cope with in our emotional makeup and that it can appear in our lives at any time. When it becomes a problem, then we must intervene and modify it. It is also noteworthy to mention that there is a difference between sadness and grief and depressed mood, all of which are not clinical depression.

One of the first things that you must do to start a program of depression management is to understand what depression is and what it is to you and what it means to you and what you can do about it.

You will then need to understand the various symptoms that depression problems can take and what you can do about them. Then, you will need to evaluate your depression using our assessment tool to learn more about your depression. The depression assessment tool comes later in this program and I encourage you to take it so that you can learn more about yourself. You can even have others complete it while rating you on the items as well.

Finally, working on your depression can help you to understand it and manage it as needed. However, there are many symptoms of depression that require professional intervention that this program will identify but will not be able to provide self help intervention to resolve. Some symptoms of depression are so severe as to require medical and other professional interventions. These will be identified for you so that you will know what your options are and what you can do to resolve your issues no matter that form they might take.

Mini Self Help Program Coping With Depression



Who Has Depression? Not Me, Of Course!

Understanding And Preventing Depression

Depression can be dangerous. If it becomes severe enough, it can lead to suicide. That is why it is essential for you to do everything you can to prevent depression, and to also get competent professional help, when you first feel the onset of depression.

If you have experienced depression, you can probably relate to the following descriptions provided by people who have come to me for treatment:

Depression is like being in the bottom of a deep, dark hole. All the world is bleak and cold. I don't want to do anything. I don't want to move. All the energy has left my body. I feel there is no hope. Nothing will ever change. I am worthless. This is all my fault. My life is over. I just want to die.

The despair, the pessimism, the hopelessness fill my life. I want to sleep. All I do is cry. I can't pay bills. I can't keep appointments. I can't do chores. I hide out. I take the phone off the hook, read and watch sad stories. My body aches. I am ugly and agitated.

I want to stay in bed. I don't want to shower, get dressed, or take care of myself.
I don't want to talk to friends. Nothing pleases me. Money gives me no pleasure.
I want to die all the time.

Medically speaking, a person is considered **clinically depressed** if they have five of the following nine symptoms. This list comes from the *Diagnostic and Statistical Manual of Mental Disorders (DSM-IV)*, a publication of the American Psychiatric Association:

1. **A depressed mood most of the day, almost every day.**

2. **Diminished interest or pleasure in almost all activities of the day, nearly every day.**
3. **Significant weight loss or gain when not dieting, and decreased or increased appetite nearly every day.**
4. **Insomnia or hypersomnia (excessive sleep) nearly every day.**
5. **Abnormal restlessness or a drop in physical activity nearly every day**
6. **Fatigue or loss of energy nearly every day.**
7. **Feeling worthlessness or excessive or inappropriate guilt nearly every day.**
8. **Diminished ability to think, concentrate, or make decisions nearly every day**
9. **Recurrent thoughts of death, or recurrent suicidal thoughts without a specific plan, or a suicide attempt, or a specific plan for committing suicide.**

Sometimes, depression is the result of another illness. If this is the case, treat the illness. But if *no* illness is present, and you are not suffering loss but are experiencing depression almost every day and have lost interest in almost all activities every day, then you are considered to be clinically depressed.

Even when there has been a loss, a complete physical examination is a good idea if the depression persists for an extended period of time or interferes with day-to-day responsibilities.

Depression is a serious illness that requires a holistic treatment approach. It most often requires a combination of treatment approaches including medication, counseling, self help group attendance in groups such as Emotions Anonymous and the development of a balanced life style that minimizes stress and focuses on good nutrition, exercise and stress reduction.

Mini Self Help Depression Program Taking Preventive Action

There is no “up” side to depression. That’s why those who have experienced depression or the depressive phase of manic depression are usually willing to put preventive measures in place to prevent depression. The first step is to realize that wellness is your responsibility and you are in charge of putting systems in place to prevent another episode. You may not be successful at first, but instead of looking at the episode as a failure, examine it as much as possible while it is happening and more extensively after the symptoms disappear. This will help you learn how to address early warning signs or the next episode even more effectively. Rather than looking at the depression as totally out of your control, look for ways you can make yourself feel better and get well more quickly. Here are some strategies people have used.

One person said, “I think my way through, rather than getting overwhelmed and succumbing to depression.”

Realizing that poor dietary habits might be making her depression worse, a client shared this information with a supporter. The supporter agreed to do some shopping for her, and bought some easy-to-prepare healthy foods such as whole grain cereals, breads, and healthy frozen dinners to replace the snack foods that had become the mainstay of her diet. Her mood lifted somewhat.

Another person noticed a positive change when she began spending just a few minutes each day outdoors. As she felt better, she increased the time spent outdoors. She began taking short walks, gradually increasing her walking time. She also began to do an aerobic workout and this improved her mood as well.

A man who had a hard time getting up in the morning learned that it was easier to get up and get going if she had something planned to look forward to. She bought himself a supply of instant decaffeinated cappuccino mix and treated herself to an iced cappuccino as soon as she got up. Others have found that an enjoyable activity upon arising such as a phone visit with a friend or a few minutes reading a good novel or a short exercise period helps alleviate early morning depressions.

Do I Really Have A Depression Problem?

Depression Management Mini “Help Yourself” Program

Now that you have an idea about what depression is and it’s related symptoms you are ready to complete the Self Change Readiness Assessment so that you can determine your present levels of self motivation and your reasons for completing this program. This Assessment is important because it is well known that people change more quickly and positively when they have honest positive internalized motivation to change their behavior than when they are changing to “please someone else” or to keep from losing their job or to “make my spouse happy”.

Motivation is very important when you are going to undertake personal change. Millions of dollars are spent each year by lots of people in order to lose weight or to work out to improve their bodies. In each case, the individual is sincere and they often do not manage to meet their goals and do not achieve the personal change that they are seeking. Why is that? It is because change occurs outside of our normal habits and routines. Change requires that we do something different which often involves changing our habits, acquiring new information or skills, spending money on change, spending time on change like you are doing right now, and continuing the quest for personal change day after day after day after day..... The day after day after day part of change is what often sabotages us and keeps us from being successful over the long haul. Are you willing to take the time and effort day after day after day to learn how to manage your depression? As you know, there are no magical answers to the question, “How do I learn to manage my depression?” Daily work and commitment are what makes the difference. If you find yourself getting upset just reading this material, perhaps you are not ready to undertake a program of personal change. Your depression is a part of who you are and it can be managed!

What is your past track record of accomplishment when you have sought to undertake personal change? Did you do well for a week and then relapse? Did you make it for a month and relapse? Did you do well for awhile and then “fall off the wagon”? Most of us have tried already to change something and some of us were successful and some were not. Why is that? If your past record of accomplishing change in important areas of your life is unsuccessful it is likely because you did not prioritize the area you were trying to change. If you do not put the behavior you are trying to change number one on your list just below your higher power it is likely that you will not provide the personal time and resources to make the change a permanent part of your life. Another thing that will sabotage any attempt at change is trying to change too many things at once. Here is my mantra about that, “One thing at a time, one minute at a time, until that minute passes”. Having “too much on your plate” will keep you from focusing on the one thing that is the most important-“You”. So, put depression management at the top of your list and it will more likely get accomplished.

Depression management is not always completed by will power and skill development and focusing alone. There are cases where good honest people have chemical imbalances in their

brains which prevent them from successfully managing their depression. I always suggest that you first get a medical checkup to make certain there are no medical problems contributing to your depression which might sabotage your efforts at depression management. Next, if you honestly work at this mini depression management program and fail at it, there may be an underlying brain based problem such as a problem with your limbic system or reticular activating formation which cause you to get depressed and which talk and self help cannot change by themselves. If you work this mini program and you are not successful in reducing your depression you will then want to contact a local Licensed Professional Counselor or other mental health professional to find out why your depression is not responding to your attempts to change it. You can contact Dr. Garlock at (281) 444-2678 in the greater Houston area and he will be glad to sit down with you and to find out what is the basis for your depression and your inability to change it or manage it. You can visit his web site at www.helptochange.com and get useful information about his programs and services. You can also get information by going to his newsletter at www.frnewsletter.com and you can subscribe to the newsletter as well. You can also email Dr. Garlock at: jagvw@earthlink.net to contact him and to ask him questions and to obtain advice.

Finally, you can look in the telephone book and find the number for Emotions Anonymous which is a 12 step program that is available to anyone who has emotional concerns. This program will offer you confidential small group meetings where you can find support and understanding and compassion and assistance to learn how to manage your depression. You may also attend the Depressive/Manic Depressive Association (DMDA) meetings which offer free self help and information and support for people coping with depression and mood disorders.

The remainder of this depression management program is focused on helping you to make the change that you are seeking. It is offered to you, on a no cost basis, in the hope that it will assist you to make the changes that you are seeking. If you work this program and do not experience positive personal change, then please contact a local Licensed Professional Counselor so that you can make the positive and long term changes that you are seeking.

On the next page below, is the Self Change Readiness Scale which is designed to assess your readiness to undertake any sort of personal change. This instrument is designed to allow

you to assess whether or not you are ready to complete this program and to initiate a long term program of personal and positive change leading to your being able to manage your depression successfully. As is often the case, people who are not motivated or under-motivated or who are changing for someone else or for some other external reason, do not often do well when attempting to change an important part of themselves such as their depression. If you rate yourself as having “No” answers on 3-5 items on the questionnaire, perhaps now is likely not the time to undertake a program of depression management and personal change. You do not want to have a negative outcome because this will likely negatively impact you in the future should you decide that you have other issues that you would like to resolve. You can email us to determine what your next step might be if you are not now motivated to change and to manage your depression today.

SELF CHANGE READINESS CHECKLIST

Indicator/Factors to consider

NO

YES

Motivation to change

Your reasons for wanting to change are your own and not someone else's

Are you under coercion eg. spousal or work order or legal matters?

Do you see your behavior as a problem?

Do you want to change?

Have you had any previous successful interventions?

Previous experience of self change

Have you had any 12 step or therapeutic participation/experience?

If yes, has this been of benefit?

If yes, was your attendance acceptable?

Indicator/Factors to consider

NO

YES

Personal recognition of depression control problem and its consequences

Are you able to recognize the negative consequences of your behavior?

Does this cause you personal concern?

Taking personal responsibility for behavior

Do you have a strong tendency to project blame onto others?

Are you prepared to consider the concept of personal responsibility?

The ability to contribute and actively participate

Do you have some level of interpersonal skills?

Are you looking for a quick fix?

Motivation To Complete The Program

Do you agree to participate in and complete the self help program?

Will you complete any personal assessments that are required?



Do I Really Have A Depression Problem?

THE DEPRESSION SYMPTOMS EVALUATION FORM

Place an (X) in the box to the right of each category to indicate how much this type of feeling has bothered you in the last several days. TOTAL UP THE TOTAL SCORE AT BOTTOM

				14
0	1	2	3	
Not at All	Somewhat	Moderately	A Lot	

1. **Sadness:** Do you feel sad or down in the dumps?
2. **Discouragement:** Does the future look hopeless?
3. **Low self-esteem:** Do you feel worthless?
4. **Inferiority:** Do you feel inadequate or inferior to others?
5. **Guilt:** Do you get self critical and blame yourself?
6. **Indecisiveness:** Is it hard to make decisions?
7. **Irritability:** Do you frequently feel angry or resentful?
8. **Loss of interest in life:** Have you lost interest in your career, hobbies, family, or friends?
9. **Loss of motivation:** Do you have to push yourself hard to do things?
10. **Poor self-image:** Do you feel old or unattractive?
11. **Appetite changes:** Have you lost your appetite?
Do you overeat or binge eat compulsively?
12. **Sleep changes:** Is it hard to get a good night's sleep?
Are you excessively tired and sleeping too much?
13. **Loss of sex drive:** Have you lost your interest in sex?
14. **Concerns about health:** Do you worry excessively about your health?
15. **Suicidal impulses:** Do you have thoughts that life is not worth living or think you'd be better a dead?

Total score on items 1—15 _____

SCORING KEY FOR DEPRESSION EVALUATION FORM

TOTAL SCORE DEGREE OF DEPRESSION PRESENT

0-4	MINIMAL OR NO DEPRESSION
6-10	NORMAL BUT UNHAPPY AT TIMES
11-20	BORDERLINE TO MILD DEPRESSION
21-30	MODERATE DEGREE OF DEPRESSION
31-45	SEVERE DEGREE OF DEPRESSION

Now that you have taken the time to complete this evaluation tool and to total your score from your responses to the questionnaire, it is time to consider what your next step might be to begin to diminish your depression and to improve your daily functioning.

If you indicated that you have suicidal impulses, please contact your Physician and/or treating Counselor or other mental health professional so that you can obtain treatment for your suicidal ideation. Since suicidal thinking or actions are a serious matter, I advise that you immediately reach out for treatment for your evidenced depression. If you do not have a treating Counselor, Physician or other mental health professional, please email me at jagvw@earthlink.net so that I can assist you to locate one. If your suicidal ideation is active and causing you to be concerned about your safety, or if others have expressed concern about your safety, please go immediately to the nearest emergency room so that you can obtain support and assistance immediately. I do understand that this sounds like a drastic step to take, but your life is precious and important and needs to be attended to by caring professionals so that the recovery process can begin.

If your score on this measure was from 0-20, this present program will likely be of benefit to you in your efforts to reduce and manage your depression symptoms. The information and exercises contained in this educational program are designed with you in mind. If your score on the Depression Evaluation was from 21+, you will require additional support and treatment services that can be obtained by contacting your Physician, your Counselor if you have one or by contacting a mental health professional in your area. Do not delay to obtain the services that you need. If you do not have a treatment resource, contact me at jagvw@earthlink.net or call me at (281) 444-2678 and I will assist you to get the referrals that you require. It is most likely that a combination of medication and counseling and self help will be needed to help you overcome the symptoms that you are presently experiencing. Do not delay. Locate additional support and assistance today!

Now that you have completed taking the Depression Symptoms Evaluation Form, you must then complete the activity listed below to determine where you may want to begin your depression reduction activities.

HIGHEST AREA WHERE DEPRESSION IS SHOWN IN DAILY LIVING

DEPRESSED FEELINGS YES _____ NO _____

DEPRESSED THOUGHTS YES _____ NO _____

PHYSICAL SYMPTOMS YES _____ NO _____

WHICH AREA IS GIVING ME THE GREATEST PROBLEM?

DEPRESSED FEELINGS YES _____ NO _____

DEPRESSED THOUGHTS YES _____ NO _____

PHYSICAL SYMPTOMS YES _____ NO _____

WHICH AREA SHOULD BE DEALT WITH FIRST?

DEPRESSED FEELINGS YES _____ NO _____

DEPRESSED THOUGHTS YES _____ NO _____

PHYSICAL SYMPTOMS YES _____ NO _____

IS ANY AREA OUT OF CONTROL IN MY LIFE?

DEPRESSED FEELINGS YES _____ NO _____

DEPRESSED THOUGHTS YES _____ NO _____

PHYSICAL SYMPTOMS YES _____ NO _____

If so, contact Dr. Garlock today at jagvw@earthlink.net or call Dr. Garlock at (281) 444-2678. If you are located away from Dr. Garlock and outside of his geographical area, contact your nearest Licensed Counselor or Psychiatrist.

**Seize Your Chance To Manage Your Depression
Before It Manages You**

To effectively prevent or limit depressive episodes, use the window of opportunity between episodes to take actions that will improve your chances of successful intervention in the future. The following checklist can help you determine the action you need to take for yourself between episodes.

I. Have a complete physical evaluation and address any possible issues that might be causing or aggravating depression, such as hypothyroidism or a vitamin deficiency.

Which health care treatments are necessary to control depression and ensure your wellness?

II. Consult with health care professionals who have expertise in treating depression. Ask them for advice on treatment scenarios. Explore these options thoroughly. Then, based on what you learn, begin whatever treatment you have decided is in your best interest. In some cases, certain treatments will only be initiated if your depression is severe. You may find that there are some treatments you would not want under any circumstances.

Which treatments have you decided to use? Why? For what purpose?

Which treatments are you planning to ask others to initiate if your depression is severe and you cannot make decisions for yourself? Why? For what purposes?

Which treatments are not to be used under any circumstance? Why do you choose not to use them?

With health care professionals, supporters, health care organizations, and other people who have experienced depression, explore possible facilities where you would be safe and could receive appropriate treatment if your depression is severe, if you have suicidal thoughts, if you feel unsafe, or if your condition needs to be closely monitored. If you have been hospitalized in the past, you may already have firsthand information.

Which facilities do you prefer and why?

Which facilities are unacceptable? Why?

Develop an action plan supporters can undertake on your behalf when you cannot take action or make decisions for yourself. Once you have considered your options, you can make these decisions in advance. For instance, you can determine the kinds of treatment that are acceptable, the conditions under which acceptable treatments may be used, the health care professionals that can be included in the decision-making process, and the health care facilities you prefer. A trusted person (or people) can be given durable power of attorney to make decisions for you. A legal document can be drawn up defining the conditions under which the person or people who have durable power of attorney have the right to make decisions for you and carry out your wishes.

- I. Define your early warning signs of depression, set up a charting system to monitor these early warning signs and take preventive action early.**

Take a conservative approach, remembering that you don't know how wide the window of opportunity is. You need to take action early even when you are not sure you are getting depressed.

II, Develop and educate a support team that includes health care professionals and trusted family members and friends. These people will help you monitor your symptoms, support and advise you as necessary, make decisions for you when you cannot make them for yourself, and enrich your life.

- II. Work on changing habits or implementing strategies that contribute to overall wellness (See Habit Change Form Later In This Program)**

Circle the strategies below that you intend to use to manage depression:

Identify early warning signs of depression and chart them

Adjust your diet to a healthy diet

Get enough light and fresh air

Exercise regularly

Seek counseling

Write in your journal

Take medication as prescribed

Do focusing

Make career changes as needed

Begin a cognitive therapy program

Attend a support group

Make a commitment to yourself that you will do whatever you have to do to prevent depression. Take a proactive role on your own behalf. Next, review the Depression Plan on the next page to determine how you will address your depression symptoms and how you would prefer to be treated for your depression should you relapse and become depressed again and require further treatment and support.

The Depression Plan likely may never have to be used but it serves as a framework for planning so that any eventuality can be planned for in the future.

Mini Self Help Depression Program
Documentation of Treatment Plan Preferences

I, _____, in the event that I become incapable of making decisions for

myself, which means I am exhibiting the following symptoms:

Give the following people the power to make decisions in my behalf:

I would like (the number) ___ of the above people to agree on my treatment.

I am willing to take the following medications:

Medication

To be taken under these circumstances

I am not willing to take the following medications:

Medication

Reason to avoid this medication

I am ___ am not ___ willing to have electroshock treatment. *(if you are willing, under what circumstances?)*

Mini Self Help Program
PERSONAL HABIT BREAKING PROGRAM

STEP ONE: IDENTIFY THE NEGATIVE HABIT BEHAVIOR

You can't break a habit unless you know when and why you perform it. Track down your negative habit triggers and fears:

I _____ (fill in your negative habit), when _____ (fill in your habit trigger),
because _____ (fill in your reason).

STEP TWO: EVALUATE THE RISKS AND BENEFITS OF YOUR NEGATIVE HABIT

Your habit offers you short-term pleasure or relieves your stress (benefit), which is why you've held on to it for so long. But, your bad habit also holds you back or undermines your health in some way (risk). Understand the push-and-pull nature of your negative habit and set the balance in favor of the long-term benefits of change:

If I stop _____ (fill in name of habit), I'll _____

STEP THREE: PREPARE FOR POSITIVE CHANGE

Create an environment conducive to the changes you want to make in your life. Remove temptations and stress. The biggest physical obstacles in my daily surroundings to breaking my negative habit include:

1. _____ 2. _____ 3. _____ 4. _____

Add good habit reinforcers. The biggest physical assets in my daily surrounding to help me develop good habit behavior include:

1. _____ 2. _____ 3. _____ 4. _____

STEP FOUR: JUST DO IT! TRY OUT THE HABIT CHANGE PROGRAM!

You're ready to take action and do the hard work to break your negative habit. Worried about a relapse? Learn how to "purge the urge" and overcome your negative habit:

I can't help returning to this bad habit when _____

I'm best at avoiding this bad habit when _____

State your commitment to breaking your bad habit by writing a positive affirmation

Personal statement or slogan you can use as your personal mantra against relapse:

Use the Daily Habit Log on the next page to help you get a fix on the how, why, when, and where of your personal bad habits. At the end of the week, take a good look at the information you've recorded and see what clues it reveals about your negative habit and why you do it. Good luck!

Mini Self Help Program
MY DAILY HABIT LOG FORM

Monday

Time: ____ Habit: _____

Activity: _____

Feeling: _____

Time: ____ Habit: _____

Activity: _____

Feeling: _____

Time: ____ Habit: _____

Activity: _____

Feeling: _____

Time: ____ Habit: _____

Activity: _____

Feeling: _____

Tuesday

Time: ____ Habit: _____

Activity: _____

Feeling: _____

Time: ____ Habit: _____

Activity: _____

Feeling: _____

Time: ____ Habit: _____

Activity: _____

Feeling: _____

Time: ____ Habit: _____

Activity: _____

Feeling: _____

Mini Self Help Program
MY DAILY HABIT LOG FORM CONTINUED

Wednesday

Time: ____ Habit: _____

Activity: _____

Feeling: _____

Time: ____ Habit: _____

Activity: _____

Feeling: _____

Time: ____ Habit: _____

Activity: _____

Feeling: _____

Time: ____ Habit: _____

Activity: _____

Feeling: _____

Thursday

Time: ____ Habit: _____

Activity: _____

Feeling: _____

Time: ____ Habit: _____

Activity: _____

Feeling: _____

Time: ____ Habit: _____

Activity: _____

Feeling: _____

Time: ____ Habit: _____

Activity: _____

Feeling: _____

Mini Self Help Program
MY DAILY HABIT LOG FORM CONTINUED

Friday

Time: _____ Habit: _____

Activity: _____

Feeling: _____

Time: _____ Habit: _____

Activity: _____

Feeling: _____

Time: _____ Habit: _____

Activity: _____

Feeling: _____

Time: _____ Habit: _____

Activity: _____

Feeling: _____

Saturday

Time: _____ Habit: _____

Activity: _____

Feeling: _____

Time: _____ Habit: _____

Activity: _____

Feeling: _____

Time: _____ Habit: _____

Activity: _____

Feeling: _____

Time: _____ Habit: _____

Activity: _____

Feeling: _____

Sunday

Time: _____ Habit: _____

Activity: _____

Feeling: _____

Time: _____ Habit: _____

Activity: _____

Feeling: _____

Time: _____ Habit: _____

Activity: _____

Feeling: _____

Time: _____ Habit: _____

Activity: _____

Feeling: _____

COMMENTS: _____

Rational Thinking:

Managing Depression By Getting a Handle on Automatic Thoughts

Depression is a frequently cited problem in many people's lives at one time or another. While people with depression are often intelligent, energetic, and imaginative, they have difficulty developing the skills needed to work with others, such as organization, follow-through, and social finesse. People with depression have likely received much criticism from others and have failed in many settings by the time they reach adulthood. Depression can result from this lengthy struggle with frustration and failure.

The National Institute of Mental Health estimates that 20 percent of the population experience depression at some point in life. Depression is highly treatable. There are new, effective medications, and extensive research has shown that behavior therapy is a powerful technique for alleviating depression.

In the 1960s Aaron Beck pioneered a form of behavior therapy that deals specifically with the problem of depression. Dr. Beck noted that it is often your thoughts that trigger depressed feelings. How you interpret events determines how you feel about them. If you interpret your boss's stiff "Hello" as a sign of annoyance at your late report, you will feel anxious. If you interpret it as his usual absentmindedness, you will feel neutral.

Dr. Beck noted that people jump to a conclusion, and that provokes emotions. Because the interpretations are quick in coming, he called them *automatic thoughts*. He noted, too, that these thoughts are sometimes just a flash of memory related to an experience. Automatic thoughts are ingrained, based on past experience, quick, and sometimes abbreviated to just a visual memory.

It has been my professional experience that people's thoughts lead to the creation of their feelings and moods and actions. If I wake up and say to myself, "I am going to have a bad day because it is raining" then I am going to have a bad day because it is raining. If I say to myself, "What's the use, why even try" I will not get much accomplished, will I? Be careful about what you think because it usually comes true. So...our thoughts can dictate our moods and actions and, for this reason, it is important for you to know how all of this works because it is highly likely that it is happening to you today. Dr. Garlock utilizes cognitive behavioral therapy often in the treatment of depression and mood disorders. Contact him today at: jagvw@earthlink.net or call him at (281) 444-2678 to learn more about the cognitive treatment of mood disorders. Call today!

Cognitive Distortions and Their Role in Depression

Automatic thoughts are also called cognitive distortions. These are statements you make to yourself that distort your emotions and experiences. Because they are automatic, you rarely notice or examine them. You accept them as truths. Although they are based on experience, it is false to extend them to the present without first examining their validity. The following are distortions that can occur when you have depression and mood difficulties.

Filtering

Filtering is the process of putting your experiences through a mental strainer that separates only the negative aspects.

Nigel works hard at his job as a photographer. His mood problems are not a handicap in his work because he can be constantly on the go and he can use his visual imagination. Nigel's boss is "all business." He met Nigel at the studio one morning and gave him two important assignments for the day. He told Nigel to be sure to have them in on time. Nigel left brooding over his boss's admonition to "have them in on time." He felt he was being criticized and it was unfair. He got depressed over all of these things. Nigel isolated this one statement and put it through a filter of injustice, leaving him angry for the day.

We each select filters based on our personal history. If you are depressed, you will filter out elements of loss in your experiences. People who are fearful will see danger in what they encounter. What is filtered may be real, but it's a distortion of the total experience because it's only *one* aspect of what happened.

Nigel did not see that he had been given two important assignments, which would suggest trust on his boss's part. Nigel could have left the studio feeling pretty proud.

Catastrophizing

Linking your present situation to a disastrous conclusion is catastrophizing. You feel that the worst outcome will befall you. If you have a cold, you worry that it will turn into pneumonia. If you run out of gas on the highway you're sure you'll be hijacked—even killed. People with depression are susceptible to catastrophizing since they often feel that doom is just around the corner. Also, because of their active imaginations, they can dream up the most amazing outcomes for ordinary situations.

Catastrophizing takes a lot of time and energy that could otherwise be used to deal with the original situation. Catastrophizing also creates negative emotions, usually anxiety. Once generated, anxiety is associated with the current situation and then may recur automatically in the future.

Overgeneralization

Overgeneralization involves drawing a conclusion from one experience and extending this conclusion

to all future experiences. For example, if you've had an unsuccessful interview and conclude you're a failure at interviewing and you'll never get a job, you're over generalizing. The result of one interview cannot determine how well you'll do in the future. Even if you have had several unsuccessful interviews, your future has *not* been determined. All these interviews are independent of one another.

Similar conclusions, such as, "No one will ever go out with me," "I'll never get into grad school," "I'll always be in this rut of a job," and "Everything goes wrong for me," are gross overgeneralizations. Overgeneralizations result in a narrowing of your life experiences. As you conclude that failure is inevitable, you're less likely to challenge yourself.

Labeling

Being labeled is a common experience for someone with depression. Depression itself is, of course, a label. Not everyone using the term understands that it is a collection of behaviors that can be used skillfully or destructively. Rather, the emphasis is on "deficit" and "disorder." You are certainly familiar with other labels, such as lazy, disorganized, immature. You know the hurt feelings that these words cause. You know that hurt usually leads to anger and eventually more depression.

Unfortunately, being labeled does not immunize you from using labels yourself. If you are breaking up with your boyfriend and refer to him as a "loser," you're engaging in the distortion of labeling. You are focusing on one or a few aspects of his character that displease you and using them to define him as a person. The result of labeling is that it distances you from the person. You can then more easily justify angry, aggressive behavior toward this person.

Mind Reading

Feeling that you just "know" how someone feels or will act is a form of projection called mind reading. You draw quick conclusions about others based on your feelings rather than real information.

Lois sat nervously across from her boss at the weekly staff meeting. She noted that he only made brief eye contact with her. Later he didn't support her suggestion to shorten the performance appraisal form. She concluded that he was not happy with her work and he wanted to fire her. The truth was, he had just come from a meeting with his boss and was preoccupied with his own job security.

In mind reading you know how you would feel about a situation and assume that others feel the same way you do. If you are annoyed when someone spills coffee in a restaurant, you feel that anyone else would feel annoyed as well. The problem with mind reading is that you will then act according to your beliefs about others' feelings or values. You may make yourself look pretty irrational by making up for something no one else perceived to be a problem.

Shoulds

"Shoulds" are statements that you make to yourself about how the world ought to be. You have ideas, experiences, values that indicate to you right from wrong. The problem comes when you apply these imperatives to day-to-day situations, and those who fail your expectations are wrong or bad. For

example, you feel that your wife should know when you've had a bad day and need some time alone. When she does not, you feel that she is selfish and demanding. Or, you are cut off in traffic by a young man driving a sports car. Your blood boils as you say, "He shouldn't get away with that. He's a punk and should be run off the road." Obeying traffic laws is a good idea, but not everyone does. Your level of anger for his violation is extreme under the circumstances.

Shoulds can also be turned inward. You may have a number of rules for your own behavior. You may feel that you should be able to talk your way into any sale you want. Again, the problem with shoulds is the condemnation that comes with not meeting the standard. You feel that you're a weakling if you give in to not feeling well or that you're a failure when you can't close every sale you want. Shoulds are rigid and demanding. Psychologist Karen Horney calls them the tyranny of the shoulds." These immutable, fixed beliefs keep you from flexible thinking and evaluation of yourself and others based on all of the present circumstances.

Personalization

Personalization is the belief that everything around you somehow relates to what you've done or said. If the cashier at the supermarket has a critical look on his face, you feel that he is judging you in some way. You don't stop to think that maybe he's preoccupied with some thought of his own. Or, if your boss gives a speech about increasing productivity you're sure he's talking about you and that he's really looking to fire you. Personalization also makes you responsible for the well-being of others. If your son is sad, you feel that you must have let him down in some way.

Comparing yourself to others is another aspect of personalization. You are on the lookout for the abilities of others and compare their success to yours. You see others' ability to play tennis, sing, write, converse, and you feel that your talent is less. These comparisons are a constant search to establish your own value as a person. Occasionally you may feel that you are the better-looking, smarter, happier person, but the success rarely lasts. You begin comparing yourself to others again and inevitably find others better off than you.

Polarized Thinking

Judging your experiences as either black or white, good or bad, is the essence of polarized thinking. You are not seeing the shades of gray.

Rose has experienced a lot of loss in her life. She finds it hard to trust people. When Rose's husband becomes preoccupied with a personal project, she feels abandoned and resentful. She sees her husband at these times as selfish and incompetent. He's a bad husband. She also feels that she must be pretty lousy as a wife if he's so uninterested in her.

Rose is judging herself and her husband in black-and-white terms. Either he's a good husband or a bad husband. Similarly, she is either a good or bad wife.

Polarized thinking is critical and harsh. It's brittle, too. There is no room for mistakes. If you fail, you must be a failure. You're either brilliant or stupid, clever or a klutz. Because your experiences are anchored at the extremes, your emotions and your moods will swing between the poles. You experience a lot of mood variability and energy highs and lows.

Fairness

Fairness is something we all would like to be part of human relations. But people don't always agree on what is fair. The fallacy of fairness involves determining for yourself what is fair in a relationship and expecting others to share the same view. This fallacy is often expressed in "if, then" statements. "She knows I have depression. She shouldn't expect me to be on time." "If we were a real family, they would come over on Sundays." "If they wanted me to stay, they would give me a raise."

A related fallacy of fairness involves setting a quid pro quo—but without letting others know the deal. For example, since you did all the cooking tonight, you feel that others should know to do the cleanup. Or, since you've been working extra hours to help with the new ad campaign, you should get your choice of vacation weeks. When others do not know your private agenda, you are likely to end up feeling let down. Without an open understanding, there is no agreement.

Control

The fallacy of control has two forms. **In the first, you feel that others control your destiny. In the second, you feel that you are able to control the lives of others.**

Feeling controlled by others or outside forces is a cause for discouragement. When you believe that outcomes are determined by others, rather than your talent or hard work, you may give up before you try. Fallacies of control by others are a major contributor to procrastination. For example, if you believe that East Coast schools won't consider Midwestern applicants, you have an excuse not to try. The second type of control fallacy is that you can control the lives, behavior, and/or feelings of others. You are then responsible for their outcomes. This much responsibility can be a real burden. Living with someone who procrastinates sometimes results in this type of thinking. You feel that it is somehow your responsibility, your duty, to get them to change their ways, to get moving, and to do what's right. This is a fallacy. You cannot control another's behavior or feelings. Even when the person agrees with you and does what you ask, it's a result of that person's decision.

Ten Fallacies of Thinking

Here is a summary of the ten cognitive distortions:

- Filtering: You see only the negative aspects of an experience; you disregard positive and neutral aspects.
 - Catastrophizing: You can see eventual disaster in any everyday experience.
 - Overgeneralization: You extrapolate from one or a few experiences to all future experiences.
 - Labeling: You use a word or a phrase to define an entire person.
 - Mind reading: You make quick decisions about what others think without actual evidence.
 - Shoulds: You have a set of rules for the behavior of others and yourself. When the rules are broken, you feel angry and judge the violation as bad
 - Personalization: You feel that all events around you somehow reflect on you. You feel responsible for the well-being of others.
 - Polarized thinking: You see your experiences in black-and-white terms. You are either good or bad, smart or dumb, and so on.
- Fairness: You have a standard of fairness that others must follow. You always have hidden agreements about what others should do for you to reward your efforts.
- Control: You feel that others make decisions for you and that you cannot control your life. Or, you feel that you must control the thoughts, feelings, and actions of others.

You may have recognized yourself in one or more of the ten styles of distorted thinking. You will notice that you practice some styles more than others. Becoming familiar with all ten of the styles is useful. As you come to recognize them easily, you'll be in a better place to stop them before they cause you real emotional pain.

Now, you will be given information about how to correct these distorted thinking styles which result from Depression. This will provide you with the information you need to identify your thought distortions and to then work on correcting them so they do not contribute to your depression and mood difficulties.

Rational Responses to the Ten Fallacies of Thinking

Here is a summary of the ten cognitive distortions and how to combat them:

- Filtering: Identify your personal filter. Look for evidence contrary to filtered experience.
- Catastrophizing: Think of other, safe outcomes to your situation.
- Overgeneralization: Ask, “Where’s the evidence?” Avoid using words such as *always*, *never*, *only*, and *everyone*.
- Labeling: Actively look for aspects of the person or situation that do not fit the label. Use labels to describe a specific situation only
- Mind reading: Ask for clarification.
- Shoulds: Keep in mind that others have different experiences and may have different values. Replace “should” statements with “I want or wish” statements.
- Personalization: Let others be responsible for their feelings. Avoid comparing yourself to others.
- Polarized thinking: Learn to see shades of gray And learn to be comfortable with these shades. Quantify your observations to put them in perspective.
- Fairness: Learn to see fairness as a preference for a way of acting.
- Control: Take responsibility for your choices. Let others be responsible for their decisions.

SURVIVING DEPRESSION

COMMON REACTIONS AND TIPS FOR COPING

Being informed about having a depression problem is usually an unpleasant experience. Often times, those who have depression experience feelings of fear, helplessness, and powerlessness. They may also experience feelings of sadness, guilt, and uncertainty about what they have experienced. No one is left untouched. Everyone who is affected can experience a reaction whether or not they thought they were affected. There are no right or wrong ways to confront having a depression problem because everyone does it differently.

If you have experienced depression, it is likely that you are not responsible for what happened. It is common to have feelings of some type of responsibility, particularly where an illness is concerned and to incorrectly perceive ourselves as being part of the problem. It is important to perceive yourself as part of the solution and not as part of the problem. Due to the multi causation of depression, it is often hard to determine what caused and is contributing to your depression.

Coping with depression is a healthy process for all involved. The depression is often accompanied by feelings of fear and loss: loss of identity, security, pride, ability to trust and sense of security. The stages people go through in dealing with their feelings can be typical for anyone who has experienced a grief or loss situation. Please remember that loss affects us all differently and that the grief process you are having is normal and is supposed to be happening. At times, we will experience grief about not getting something we really wanted or about having a problem which seems overwhelming to us for which we do not yet have an answer.

HELP RELAX YOUR DEPRESSION AWAY

10 Great Ways To De-Stress And Improve Your Mood

Your shoulders are tense, your back hurts. You feel grouchy and know it's all due to stress. What can you do? The relaxation techniques described below can help relieve both the physical and emotional tension and moodiness that often follows stressful situations.

Relax Your Body

The next time you feel the effects of too much stress, try some of the following ways to help you relax.

1. **Deep Breathing.** While sitting, lying down, or standing, close your eyes and breathe in slowly. Let the breath out for a count of 5-10 seconds. Take ten of these super-relaxers any time you feel tense.
2. **Stretching.** Practice simple stretches such as the “neck stretch”: stretch your neck by gently rolling your head in a half-circle, starting at one side, then dropping your chin to your chest, then to the other side.
3. **Exercise.** All kinds of physical activity—hiking, running, bowling, walking, etc.—help to reduce depression.
4. **Take a bath.** Ask household members to allow you at least 30 minutes of uninterrupted time.
5. **Get a massage. A massage is a wonderful way to get rid of physical tension. Professional masseuses generally take 30 minutes to an hour, and will work on specific areas of tension, such as lower back or neck.**
6. **Eat Well. Reduce caffeine (in coffee, black tea, chocolate) and alcohol intake. Find out if your diet is well-balanced, and take steps to eat healthily to help reduce depression.**
- 7.

Relax Your Emotions

Relaxing your emotions can be just as important as relaxing your body in relieving depression.

1. **Talk.** Take the time to talk with a friend/mate or child. Express feelings you might have been holding in. Listen carefully to your partner. Walking in a quiet neighborhood or park can limit distractions.
2. **Laugh.** Go to a comedy club, see a funny movie, or spend time with a funny friend.
3. **Cry.** Crying can be as good a release as laughing. If you haven't cried in a long time, try listening to sad music, watching a sad movie or writing about a sad experience.
4. **Read.** A good book is a great escape. Reading a tear-jerker or comedy can help release pent-up emotions and reduce depression.

5. Do something you love. When you enjoy yourself, whether it's gardening, going to the beach, or seeing friends, you relax your emotions and reduce depression.

Create Stress And Depression Reducers

These are just a few depression reducers you can try. You can create your own healthy depression reducers (without alcohol or drugs), or use those listed above. You'll feel better and stay healthier if you do.

In addition, there are helpful natural products that you can purchase through your local health food store to help you to reduce your depression levels. We do not recommend a particular product and believe that you should contact your Physician to see what natural products he or she might recommend. In addition, there are holistic healers who specialize in Naturalpathy which is the science of holistic natural healing. These individuals advertise and have received specialized training in natural healing and products which might be of benefit to you. It is always advised that you contact your own personal Physician prior to undertaking any alternative healing remedies. Please also note that you can contact Dr. Garlock at jagvw@earthlink.net or you can call him at (281) 444-2678 if you would like additional information.



Do I Really Have A Depression Problem?

**Mini “Help Yourself Program
Coping With Depression**

CHANGE AND DEPRESSION

Change is a fact of life. In every dimension of our lives, the one thing we can count on is that “things will change”. In some instances we initiate the change. In others it may be beyond our control. Regardless of how change happens, it will represent a shift from the expected. And this shift will require a period of adjustment. Life is altered in some way and we are confronted with new realities. While we respond to change as individuals, adjustment usually occurs in stages as we proceed through the change process. Change is a natural healing process that should not be blocked or interfered with. Change helps us to learn more about ourselves and our emotional makeup and our patterns of living. We are all changing different things and acknowledging our change helps us to move forward to new opportunities and experiences while not forsaking the past and what we have experienced and learned from it.

If you or your family members are experiencing difficulty in adapting to a family member with depression, contact Dr. John Garlock at The Family Resource Center by either emailing him at his email address which is: jagvw@earthlink.net or by the old fashioned way via telephone at (281) 444-2678. Call him today!

Mini “Help Yourself” Program Depression Management

TIPS FOR COPING WITH DEPRESSION

- Be in charge of your depression reactions (attitude). Modify your expectations and your reality. Modify your reactions to the gap between reality and expectations. Be aware that you are healing and that you will have thoughts from the depression that are not really true.
- Be tolerant of any mistakes made by others involved. They are feeling the stress also. They may not know how to manage depression themselves.
- Expect stress; stay flexible and focus on coping today.
- Don’t blame everything you don’t like on the specific stressor itself or on others. It is a reaction to your depression.
- Be prepared for “psychological soreness” and hurting at times. The soreness means that you are hurting and are healing.
- Seek out information about depression like the depression you are experiencing and attend an Emotions Anonymous group if possible.
- Use your depression as a personal opportunity for growth.
- Keep your sense of humor. It helps to keep balance.
- Practice good stress management techniques.

- Design small projects that are successful. Keep doing your normal duties even if you are anxious.
- Talk about your depression with co-workers, family & friends.
- Acknowledge your feelings, take breaks and make a point of having fun even if you do not feel like it. Force yourself to go out.

We are all coping with depression. The question is “What do I do about it? Do I give in and feel defeated? Do I keep plugging away? However you have handled depression in the past is most likely how you will handle it now. It is time to take this information and to apply it in your daily life so that you can effect personal change in a managed and appropriate way. Why fear change when you can master it and use it to your advantage. First, you will need to decide what the change is and how you want it to affect your life. If you want to overcome your depression, then coping with it and meeting it as a challenge will help you to overcome it before it overcomes you. Are you ready to manage your depression? If not, take the information here in this mini program and apply it to the situation that you are attempting to cope with. The necessary components are here for you to manage any change that you might experience.



Do You Have Any Good Coping Skills To Deal With Your Depression?

Mini “Help Yourself” Program

To work through feelings, and to take care of yourself, we recommend the following:

- Do not minimize the depression (that’s part of the denial).
- Do not maximize the depression. This leads to more depression and paralysis (think back to the many ‘worst case’ scenarios that never actually happened). Don’t make mountains out of mole hills.
- Identify your points of continuity: Are you still in the same circumstances as before the depression? What stayed the same?
- Take time outs: There may be times when you just need to let your feelings be. Do something every day to “get away” (run, take a walk, meditate, talk with friends). Take care of you!
- Look for creative opportunities: Experiment with new responsibilities and possibilities to manage depression.
- Look for learning opportunities, give credit for your own learning and growth. Pat yourself on the back often!
- Think in terms of a life plan: Set life goals based on the new situations of managing your depression successfully.
- Remember that coping involves changes you need to make while going through a process of resolving your depression. If you find yourself stuck after several days or a week, contact Dr. Garlock at (281) 444-2678 or at his email at: jagvw@earthlink.net and he will help you get “unstuck” as quickly as possible and he will help you grieve your loss.

**Mini “Help Yourself” Program
Coping With Depression**

HOW TO BEAT THE DEPRESSION BLUES

Eight Depression Warning Signs

1. GETTING SICK MORE OFTEN

Having more coughs, colds, flu, or stomach trouble, no energy, feeling tired all the time.

2. NOT SLEEPING WELL AT NIGHT

Not being able to sleep. Sleeping more or during the day.

3. USING MORE ALCOHOL OR DRUGS

Drinking or using drugs by yourself. Staying high all the time. Needing alcohol or drugs to get through the day.

4. BECOMING MORE ISOLATED

Not wanting to see family or friends. Not going out. Staying home all the time. Isolating and ignoring requests to interact with others.

5. LOSING INTEREST IN THINGS

Not wanting to do things you enjoy or work on projects you have started. Just wanting to “keep it simple” even though it is not.

6. PUTTING THINGS OFF

Feeling there is plenty of time to get things done, but never getting around to them. Procrastination of daily simple activities.

7. LONG PERIODS OF DEPRESSION

Feeling down, feeling unable to cope with problems. No energy to deal with anything. A lack of motivation.

8. HAVING MORE FIGHTS WITH YOUR FAMILY

Getting upset over things that never use to bother you. Feeling angry and irritable more often that you used to.

SEVEN WAYS FOR YOU TO FIGHT BACK

2. . **STAY HEALTHY**
When your body is under stress, you need to eat right, get adequate rest and exercise, and keep a regular schedule.
2. . **KNOW THE EFFECTS OF DEPRESSION**
Know the sources of depression in your life. Pay close attention to your body and its stress signals. Correct them when possible.
2. . **DON'T BLAME YOURSELF**
Remember that too much depression is not personal failure. It is likely a situation caused by factors beyond your control.
2. . **DON'T DEAL WITH THINGS ALONE**
Let your friends, family and other people in the community help you get the information and help you need.
2. . **DEVELOP SUPPORT SYSTEMS**
The best way to fight grief is to talk with family and friends about what you are going through.

2. . **HAVE A PLAN**

Planning reduces coping with depression and gets things done. Have a plan for your day, week, your coping activities and for your future to minimize the likelihood of depression problems.

2. . **STAY ACTIVE**

Stay in touch with friends and co-workers and family members. Get out and go places. Learn something new. Volunteer your services. Start exercising when you can.

It is important that you learn how to identify the symptoms that you are experiencing due to your depression. Once you identify the changes that you are experiencing, you can take positive decisive action. The 7 ways to fight back that are listed are by no means the only ways to fight back. If going fishing is your answer to coping with this loss, than go fishing. Whatever it takes for you to recuperate and to get back into your life must be attempted. Being depression stricken can become a way of life. Make a list of your symptoms and a list of your coping skills to combat them and then apply them to the problem.

Mini “Help Yourself” Program Coping With Depression

~ TIPS FOR BOOSTING YOUR SELF-ESTEEM

- Stay positive about yourself. Identify at least one good thing you have done everyday. Think of ways you overcame your depression.
- Surround yourself with other positive non-depressed people.
- Do not “buy into” useless criticism from others.
- Make selective decisions about whom you will accept suggestions from regarding changes or “improvements” you should make in yourself or in your life. Decreasing depression is to be focused on.
- Expect yourself to be responsible for your self-esteem. If you don’t initiate changes, nothing will ever change.
- Accept your weaknesses and mistakes you have made.
- Speak up for yourself, in an assertive (not aggressive) manner when it is important for you to do so.
- Take care of yourself. You have real needs which must be met before you can be effective doing anything else.
- Treat others with respect. This will add to the increasing self-esteem. Also, treat yourself with kindness and respect.

**Mini “Help Yourself” Program
Coping With Depression**

**FACTORS WHICH INFLUENCE THE
SUCCESSFUL OUTCOME FOR THE FAMILY
FACING DEPRESSION ISSUES**

- COMMUNICATING EFFECTIVELY WITH SPOUSE AND FAMILY ABOUT YOUR DEPRESSION ISSUES AND THE SUPPORT YOU NEED.
- CONNECTING WITH COMMUNITY-BASED SUPPORTS: CHURCH, SYNAGOGUE, EMOTIONS ANONYMOUS, ETC.
- BEING INVOLVED IN SUPPORT/DISCUSSION GROUPS AND/OR SEMINARS AT THE WORKPLACE OR IN THE COMMUNITY OR AT CHURCH.
 - COMMUNICATING OPENLY WITH OTHERS ABOUT IT.
 - SPENDING TIME WITH GOOD FRIENDS.
 - HAVING THE ABILITY TO ANTICIPATE THE FUTURE.
 - VIEWING DEPRESSION AS AN OPPORTUNITY FOR GROWTH, LEARNING AND NEW EXPERIENCES.
 - FEELING EMPOWERED BY YOUR COPING EXPERIENCE.

The more of these factors that you can develop, the more positive you will approach change. It is important that you not get into a “rut” or allow yourself to become despondent or feeling helpless or hopeless about your depression and the difficulties that it may bring to your life.

**Mini “Help Yourself” Program
Coping With Depression**

**TIPS FOR COMMUNICATING WITH YOUR
SPOUSE/PARTNER DURING CHALLENGING
TIMES**

- DON'T PUT OFF TALKING ABOUT SOMETHING THAT IS ON YOUR MIND, BUT CHOOSE A TIME WHEN BOTH OF YOU CAN LISTEN AND TALK ABOUT YOUR DEPRESSION
- SELF-DISCLOSURE AND HONESTY TO DISCUSS DEPRESSION
- BE AN EMPATHETIC LISTENER; AVOID JUDGING OR EVALUATING THE OTHER PERSON WHO IS TRYING TO HELP
- CHECK OUT WHAT YOU ARE HEARING ABOUT DEPRESSION BY PARAPHRASING AND CLARIFYING SO YOU HEAR IT RIGHT
 - I HAVE ANY EXPECTATIONS ABOUT WHAT YOUR PARTNER MAY SAY IN RESPONSE TO YOU
- THINK OF CONVERSATION AS A PROCESS TO HELP YOU
- ASK FOR WHAT YOU NEED WHILE YOUR ARE ANXIOUS
- SEEK THE HELP OF A THIRD PARTY (TRUSTED FRIEND, CLERGY PERSON, PROFESSIONAL COUNSELOR) IF YOU FEEL YOUR DISCUSSIONS ARE ESPECIALLY STRESSFUL OR YOU CANT CONNECT IN A SATISFYING WAY WITH EACH OTHER. DR. GARLOCK WILL BE HAPPY TO ASSIST YOU AND HE IS JUST AN EMAIL OR A TELEPHONE CALL AWAY. EMAIL HIM AT: jagvw@earthlink.net OR CALL (281) 444-2678.

Mini “Help Yourself” Program
Coping With Depression

A TIME FOR EVERYTHING

In nature, with *its* laws and unchanging cycles, there is a time for everything, a wonderful and comforting predictability. While each of us may say we’d like Indian summer to last all the way through March, wouldn’t our confidence in nature be a bit shaken if, just one year, nature decided to be “flexible”, “hang loose, and veer from the schedule as originally planned? Depression is but a brief detour on the road of life.

The course of any single human life isn’t nearly so predictable as nature’s seasons. Fortunately, however, we can plan our lives in terms of major *goals*. We can also prepare to make certain changes in our lives, but “Life Planning” can be difficult work. It requires setting personal as well as professional priorities, and we may experience emotional confusion as we try to weigh various factors and cope with our depression.

A professional counselor can help us sort through the confusion and/or complexity frequently involved in making “life-planning” decisions. Whether you have lost a spouse, a friend, a coworker or had another type of loss, the task of coping with it may seem overwhelming. A counselor can help by talking to you and clearing up confusion. The 60 year old who lost his spouse and has severe depression about this major change in his life will also benefit by talking with a counselor. If you would like assistance in working through your own depression issues and/or coping with the related symptoms, please call Dr. John Garlock at (281) 444-2678 or send an email to Dr. Garlock at jagvw@earthlink.net and he will respond to you immediately.

RELAXATION SKILLS TO OVERCOME DEPRESSION

Mini “Help Yourself” Program

Coping With Depression

Relaxation is the opposite of depression. Relaxation means that the mind and body are calm. As the mind and body remain in a calm state of reduced arousal, they become refreshed and restored.

Although sleep is essential, even sleep is not pure relaxation. In sleep we alternate between periods of deep rest and dreams, our minds are extremely active. Emotionally charged dreams or fretful sleep can cause us to wake up even more tired than when we went to sleep.

Very effective restoring is done at an even keel, while awake. Although you may not reach the deepest level of rest possible in sleep, the fact that you can steadily remain at a level of reduced arousal can be more refreshing than sleep. It is hard to remain anxious when you are relaxed. Try it!

The aim of relaxation, then is to free yourself from your depression long enough to refresh and restore your mind and body.

RELAXATION IS NOT...

Relaxation does not mean that the mind becomes dull, or ceases to function. Rather, the mind is focused and alert during relaxation. Mental clarity and greater concentration result from periods of relaxation. Relaxation is not leisure and recreation. As we discussed, these require adaptation. Although these can be useful and satisfying distractions from the world's depression producing situations, relaxation goes beyond distraction from depression.

Relaxation is not tranquilizing drugs (alcohol, valium, sleeping pills, etc.). These can depress or impair the brain or nervous system, making people less responsive to their surroundings. Relaxation calms the body and mind, but without clouding the senses. In fact, studies show that people who daily practice relaxation actually react quicker to stressors and slower to depression, and recover more quickly than those who do not practice relaxation.

Relaxation in no way decreases productivity. In fact, the reverse is true. Relaxation increases work efficiency because energy is not uselessly wasted. Relaxation does not depend on adopting a new lifestyle or philosophy. Relaxation only requires a few minutes once or twice a day, and an attitude of calm. Like physical exercise, relaxation exercises begin with just a few minutes a day and work up to perhaps 10 - 20 minutes a day. They can be done anytime (except after meals, when digestion interferes with relaxation), and are especially effective after physical activity. Relaxation allows us to deal effectively with our depression no matter what the source of the depression might be.



This Relaxation Stuff Is Great!!!

EFFECTS OF RELAXATION

Mini “Help Yourself” Program

Research has shown that people who practice relaxation do not get anxious when under pressure. They learn to calm unnecessary electrical activity in the brain. As they practice, they become conditioned to remain relaxed throughout the day (The centers in the brain that cause relaxation actually learn to predominate over the unnecessary activity.). Relaxation training also calms areas in the brain that control thinking and emotions, so that responses to depression are calmer. People who get so excited they cannot think straight, need to calm down first so they can respond appropriately.

Because the mind and body are closely connected, relaxation can be achieved in two ways. First, the body can be relaxed, and the mind will follow. Progressive muscle relaxation, yoga, massage, and biofeedback are examples of this approach. Second, the mind can be relaxed and the body will follow. Meditation, suggestions visualizing peaceful scenes, and soft music are examples of this approach. When relaxation does occur, the racing of the mind and body ceases. The heart rate goes down, muscle tension decreases, and disease symptoms may lessen.

Initially, you may learn relaxation skills to prevent disease. However, as you practice, you may discover a number of positive psychological results. You might find that you feel more in control and happier. The person who is in control can work efficiently, but also can choose to deeply relax when it is appropriate. In addition, relaxation seems to access the parts of the brain where creative thoughts originate. You might remember attacking a problem for hours without finding a solution. Then as you relaxed and "let go" your mind seemed to assemble the pieces of the puzzle and present a solution.

Perhaps this occurred at night in bed, in the bathtub, or on vacation. On the contrary, people who can only work doggedly, and can't seem to let the mind spin free occasionally, get creative insights and hunches less frequently. In spending a few minutes in relaxation, people momentarily stop striving to control and organize their surroundings. They just uncritically observe and enjoy it. People who do this find themselves learning to appreciate and enjoy the beauties of life more. The enjoyment and pleasures that this brings usually improves work productivity and efficiency, but a true relaxation break is even more effective.

Relaxation training often creates a profound serenity, a feeling of calm and joy. Try it! The benefits might surprise you. A good plan is to try each skill for a week or more to find the ones that best suit you.

RELAXATION SKILLS

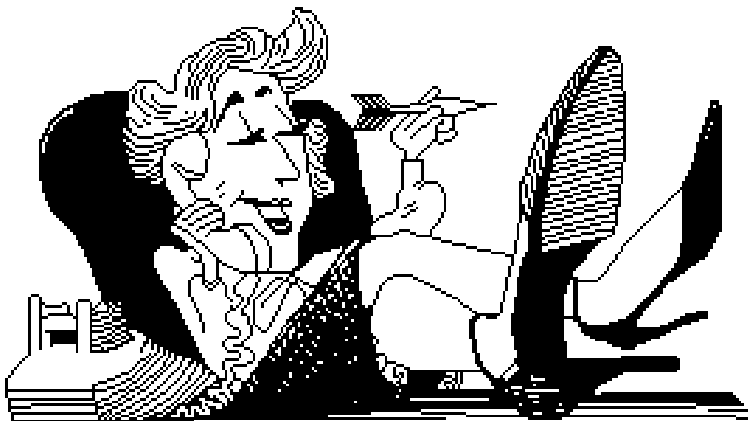
Mini “Help Yourself” Program

Coping With Depression

The skills for relaxation have been broken into two categories 1) Body relaxation and 2) Mind relaxation. It is important that you follow the few simple rules before you start to learn how to relax.

RULES TO FOLLOW

- 1 Practice the slow techniques of self relaxation for five to seven days.
2. Practice at least once every day without skipping a day.
3. Do not try to speed up the process of relaxation until you have mastered the technique slowly for five days.
4. If you do not achieve immediate results, do not become discouraged. Each time you practice, it will be easier.
5. Do not practice in the same position more than twice consecutively.
6. Change hours of practice sessions.
7. If you are interrupted during a practice session, always take a moment to "count yourself awake".



This Relaxation Stuff Is Great!!!

BODY RELAXATION

Mini “Help Yourself” Program

Coping With Depression

Jacobson, in "YOU MUST RELAX", persuasively maintains that physical-relaxation techniques provide an excellent way to break the cycle of fear, depression, worry, and tension. Observing that physiological tests "indicates that when you maintain or recall anything, you tense muscles somewhere, as if you were actually looking or speaking or doing something". He counsels that the individual should learn to observe the muscular sensations that accompany negative thoughts. Jacobson claims that by relaxing these muscular tensions, ability to maintain the negative psychological state is diminished.

BREATHING

A good place to start is with a simple, yet very effective skill that uses breathing to relax. Breath control is perhaps the oldest known stress-reduction skill, and is common to almost all relaxation skills.

The type of breathing used in relaxation is called diaphragmatic breathing (the diaphragm is the muscle below the lungs; it drops down against the stomach when you breath in, and raises when you breathe out). In diaphragmatic breathing, the stomach seems to inflate when you breath in, and deflate when you breathe out.

There is essentially not movement in the chest or shoulders. The diaphragmatic breath gets air into the lower parts of the lungs, where air sacs are densest, so more oxygen gets into the blood with less effort. It is also thought that this type of breathing stimulates the vagus nerve, a major nerve in the body, which relaxes the body when activated.

Slowly and easily take a deep breath, filling the bottom of your lungs as well as the top. As you breathe in, whisper the syllable "re". Pause for a moment, then breathe out, whispering the syllable "lax". Don't force the air in and out of your lungs; let it flow slowly and naturally: Re-e-e-e (pause) La-a-a-x (pause).

Deep muscle relaxation prepares the individual to sleep - "perchance to dream"- or, if mental alertness is retained, to imagine more vivid and spontaneous visual fantasies than can usually be obtained with normal muscle tones.



I Think I'm Stressed Out And Depressed Again!!!

DEEP MUSCLE RELAXATION

Mini “Help Yourself” Program

Coping With Depression

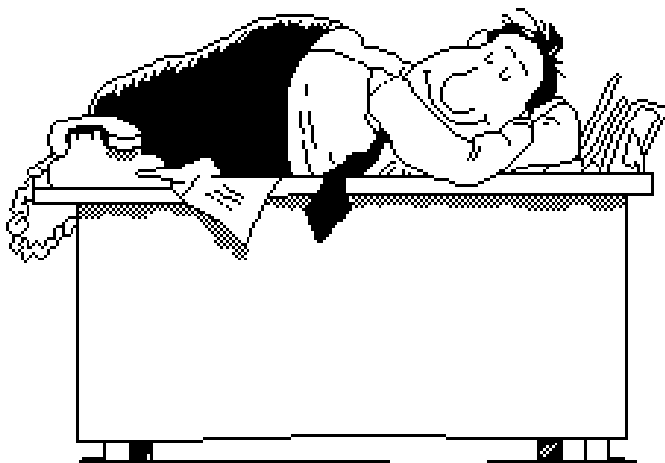
1. Lie down in a comfortable and quiet place.

2. Systematically

- (a) tense a specific muscle group
- (b) study the feeling of tension,
- (c) relax, studying the feeling of letting go. (the slash (/) indicates a pause)

3. Clench fists / flex wrists / hands to shoulders, flex biceps / shrug shoulders (touch ears) / wrinkle forehead up / frown / close eyes tight / push tongue against roof of mouth / press lips together / take deep breath, then breath out / suck stomach way in / tense stomach muscles / tense buttocks / lift legs, tensing calves / curl toes down, tensing arches.

Review each activity above, letting go tension in each muscle group even more. Feel the peaceful, positive feeling that accompanies deep relaxation.



Try Not To Be Too Obvious!!!

PROGRESSIVE MUSCLE RELAXATION
Mini “Help Yourself” Program
 Page 14

Find a comfortable place to lie down or sit down. Remove any constricting clothes or shoes. Make sure that there will be no interruptions, distractions, or noise. Now, relax your body by repeating these words in your mind...

FEET... RELAX...RELAX...RELAX...
 ANKLES...RELAX...RELAX...RELAX...
 KNEES...RELAX...RELAX...RELAX...
 THIGHS...RELAX...RELAX...RELAX...
 HIPS...RELAX...RELAX...RELAX...
 BASE OF SPINE...RELAX...RELAX...
 STOMACH AREA...RELAX...RELAX...RELAX...
 AREA OF THE LEFT LUNG...RELAX...RELAX...RELAX...
 AREA OF THE RIGHT LUNG...RELAX...RELAX...RELAX...
 RELAX...RELAX...RELAX...RELAX...
 LEFT SHOULDER...RELAX...RELAX...RELAX...
 RIGHT SHOULDER...RELAX... RELAX...RELAX...
 LEFT ARM... RELAX...RELAX...RELAX...
 RIGHT ARM...RELAX... RELAX...RELAX...
 NECK MUSCLES... RELAX...RELAX...RELAX...
 FACIAL MUSCLES...RELAX...RELAX...RELAX...
 FROM THE SCALP TO THE TOES...RELAX...RELAX...RELAX...
 RELAX...RELAX...RELAX...RELAX...RELAX...

After injecting your suggestion, you slowly start counting from sixty to zero without stopping. Upon reaching zero, you should slowly start counting from one to ten; give yourself suggestions that on the count of ten you will awaken feeling fine and completely refreshed.



A Few Minutes a Day Relaxing, Can Put You on Top of The World!!!

MIND RELAXATION

Mini “Help Yourself” Program

Coping With Depression

One of the best supported concepts in psychology is this: ***WE FEEL AND BEHAVE ACCORDING TO THE IMAGES AND THOUGHTS IN OUR MINDS.***

Thus, as we imagine a peaceful relaxing scene, our bodies and minds relax.

To do this, get in a comfortable position, close your eyes and relax your body. Take a few deep breaths, then imagine the sensations of one of your favorite scenes (sounds smells, feelings, colors, textures, and sights).

IMAGERY

Take a comfortable position, close your eyes. Take 3 diaphragmatic breaths as you let go of the day's tension. Relax your body from toe to head.

Imagine yourself walking along a quiet wooded brook, on a warm spring day...you begin to walk away from the brook out of the woods into a lush green meadow... after a few steps you pause, and leave your worries behind... you continue to walk out into the meadow where you recognize little bunnies hopping through a beautiful carpet of spring flowers...next to the brightly colored flowers you notice a field full of bright green clover, with an occasional dandelion... the flowers are dancing as a gentle wind flows through the field... the soft breeze blowing over your skin soothes and relaxes you... as you feel relaxed you lay down in the field to absorb the heat from the sun... as you look up you begin to make animal shapes from the clouds...you see an elephant, a dog, a clown, a heart, and a bird...just topping the trees you see a beautiful hot air balloon with magnificent colors... you sit up and wave to the pilot... and he waves back...a few birds circle lazily in the sky as the balloon leaves... other birds are singing in the trees... you are peaceful and happy... all is right with the world...

Stay here for a few moments. This is your safe place, and you can return here to rest each day if you wish. You can feel happy, relaxed, and confident when you leave your safe place to continue your day's activities.

Now move your hands, your arms, your legs, and begin to hear the sounds around you. You can slowly open your eyes and begin to see the new world around you.

Relaxation is one of the keys to overcoming depression. You must set aside time each day to relax. You can go to your local bookstore and purchase relaxation tapes and programs to assist you to learn how to relax. I believe that relaxation is the opposite of depression. Have you ever seen anyone who was perfectly relaxed full of depression? Build relaxation into your daily life and your depression levels will drop!

Problem Solving Tool
Thinking Yourself Back To Reality Exercise:
A Way Of Managing Disrupting And Interfering And Defocusing Thoughts

Thought or Feeling that I am having which is a problem:

What is NOT true about my problematic thought or feeling?

What's the worst thing that could happen in this situation?

How likely is that to happen in this situation?

How awful is the worst thing that could possibly happen?

How could I learn from this experience'?

What thoughts and actions would help me cope with this situation?

What can I do to counter doubt, anxiety and depressed thoughts/feelings?

What can I do not to repeat this problem situation again?

Mini “Help Yourself” Program
Coping With Depression

Depression Management
Worksheet Page 1

Date: _____ **Name:** _____

Welcome to the Self Contracting portion of our mini “Help Yourself” Program. We hope that you have gotten useful information that you can apply in your daily living and are now ready to focus on how to start to implement a program of personal coping and change. The next two pages are designed to assist you to focus on what you want to change and to provide you with a vehicle for coping and change if you want to use it. Please print out these forms and use them whenever you like.

BARRIERS TO SELF CHANGE (What is getting in the way of your coping with the problems you are facing? For example, a lack of energy, a lack of drive, a lack of resources to change, you do not know what to do so you do nothing, you do not have the time to change, you do not have the money to change, etc. List them:

SUPPORTS TO SELF CHANGE (What is supporting your efforts for self change and to manage the problems you are experiencing right now? For example, do family and friends help you cope and deal with the problems now; do you read self help books and materials to get support, do you go to support programs such as SOLACE, 12 step groups and self help groups at church or in your community, etc. List these support activities that you do and plan on increasing them as needed:

Mini “Help Yourself” Program
Coping With Depression

Depression Management
Worksheet Page 2

What would you like to try that might help you get motivated and moving towards change and what are you afraid to try because you might fail or create a problem?

What has been your experience in the past when you have tried to change or modify your behavior? Did you succeed or did not accomplish your behavioral goals? List the positive things you did when you were successful before:

List the things that you did before which did not work which got in the way of your personal change and coping with the problems you were trying to address:

What are you willing to do this time that is positive and will lead to change?
What things should you not do which have negatively impacted you in the past when you tried to change in the past?

**Mini “Help Yourself” Program
Coping With Depression**

**Depression Management
Worksheet Page 3**

**Increasing Pleasurable Activities And
Coping Skills**

Use the following questions together with the list of pleasurable activities, to assist in coming up with your own ways of having more fun and of coping with your problems.

What types of things have you enjoyed learning and accomplishing?

What activities bring you a sense of fulfillment and satisfaction and feeling of accomplishment ?

What have you enjoyed doing alone?

What have you enjoyed doing with others?

What types of things are you willing to start doing today to improve your coping?

Mini “Help Yourself” Program
Coping With Depression

Depression Management
Worksheet Page 4

Self And Partner Coping Assistance Exercise

We soon discover that we can either work together to make it through stressful and difficult periods, or we can fail to support each other, or even turn on each other during times of stress and problems and loss which makes the adjustment process considerably more difficult. You have choices about how you want to handle the problems that you are experiencing and this worksheet will help you to better understand the process that you use to cope with the difficulties in your life.

Fill out the statements on this page independently and then share your responses with your partner, if you have one, and work on it yourself or you can work together to complete the next page if you have a partner in your life.

Complete independently without assistance from your partner:

2. . A. When I am coping with problems, I tend to:

1.B. When my partner is coping with problems, he/she tends to:

2. . A. My partner could help me when I’m trying to cope with problems by:

2.B. I could help myself when I am coping with problems by:

**Mini “Help Yourself” Program
Coping With Depression**

**Depression Management
Worksheet Page 5**

Date: _____ **Name:** _____

Goal: _____

Self Contracting Agreement

I understand that in order to overcome the difficulties that I am presently having I must decide on what action I want to take and then take the action that I agree to take. I understand that doing nothing will keep me where I am now and I want to change and grow and overcome the problems that I am facing today. I agree to contract with myself in order to help myself grow and develop and overcome the issues that I am facing which are interfering with my ability to cope and to manage my own life and to find the happiness and joy that I deserve. In order to accomplish this change, I agree to take the actions listed below and to give myself the best possible opportunity to be successful in overcoming my present issues.

PLEASE WRITE ALL INFORMATION IN CONCRETE BEHAVIORAL TERMS SO THAT YOU CAN MEASURE YOUR SUCCESS AND OUTCOME.

I agree to complete the following activities in order to meet the goal listed above:

Outcome measure(s) of success (How I know I will be accomplishing my goal):

When I achieve success level (How will I know I have been successful):

If I do not achieve success (What do I need to change to be successful in the future:

Mini “Help Yourself” Program
Coping With Depression

Depression Management
Worksheet Continued
Page 6

What are my consequences I assign to myself for being unsuccessful and not achieving my personal goals and problem resolution? What will motivate me in the future to “get the job done” for myself. What will get my attention and help motivate me to change the behaviors that are getting in the way of success?

REMEMBER: To be successful in overcoming the difficulty that you are having you must complete a contract that you believe in and want to keep. It can even be a daily contract to give you structure for your daily activities. The goal of “Feeling better” must be broken down into concrete steps such as going out of the house, attending a support meeting, going to a movie with a friend, reading supportive literature daily, etc. Do not try to fix too much at one time. **KEEP IT SIMPLE!** The goals you set must be related to the difficulties you are having that keep you from being happy and fulfilled and successful. Also, please understand that these goals can change from day to day as you change from day to day. Coping with any problem leads to change and you should be able to identify the changes you are seeking as well as how you will know when you have met your goals. If you have difficulty with this contracting process, email Dr. Garlock at jagvw@earthlink.net and he will assist you via email.

Signed: _____ Witnessed: _____ Date: _____

Self Help Depression Resources

Copeland, M. (1992) *The Depression Workbook: A Guide for Living With Depression and Manic Depression*. Oakland, CA: New Harbinger Publications.

The self help techniques in this book are helpful in raising self-esteem and learning self-advocacy.

Carson, S. (1986) *Out of Our Minds*. Buffalo, NY: Prometheus.

Part IV, "Coping: Rights and Responsibilities," of this handbook is an excellent source of information of patient and family rights.

Ilardo, J. (1992) *Risk-Taking for Personal Growth: A Step-by-Step Workbook*. Oakland, CA: New Harbinger Publications.

This book will provide valuable assistance as you make life changes.

McKay, M., and P Fanning. (1992) *Self Esteem*. Oakland, CA: New Harbinger Publications. *This is the best book I have seen on raising self-esteem. I recommend it highly. Many people who have gotten well and stayed well have found this book to be a valuable resource.*

McKay, M., M. Davis, and P Fanning. (1981) *Thoughts and Feelings: The Art of Cognitive Stress Intervention*. Oakland, CA: New Harbinger Publications.

This widely used resource helps you overcome negative thought patterns that get in the way of taking positive action on your own behalf.

Spaniol, L., and M. Koehler. (1994) *The Experience of Recovery*. Boston: Center for Psychosocial Rehabilitation.

This is a compilation of educational and affirming writings by people who have recovered from psychiatric disabilities.

Spaniol, L., M. Koehler and D. Hutchinson. (1994) *The Recovery Workbook*. Boston: Center for Psychosocial Rehabilitation.

This is a highly recommended self-help resource for anyone who has experienced psychiatric symptoms.

Zinman, S., and H. Harp. (1994) *Reaching Across II*. Sacramento, CA: California Network of Mental Health Clients.

An excellent self-help resource filled with resources and information for anyone who has ever been involved in the mental health system. For your own copy, write to:

California Network of Mental Health Clients

1722 J Street, Suite 324

Sacramento, CA 95814

Resources And Organizations

Depression & Related Disorders Association

Meyer 4-181
600 N. Wolfe St.
Baltimore, MD 21205

National Alliance for the Mentally Ill

2101 Wilson Blvd, Suite 302
Arlington, VA 22201
(703) 524-7600
1-800-950-6264

Information, advocacy and support for family members and people with psychiatric symptoms.

National Association for Rights, Protection, and Advocacy

Mental Health Association of Minnesota
2021 E. Hennepin, Suite 412
Minneapolis, MN 55413

National Association of Protection and Advocacy Systems (NAPAS)

900 2nd St. NE Suite 211
Washington D.C. 20002
(202) 408-9514
FAX (202) 408-9520
TTD (202) 408-9521

Call for phone numbers of protection and advocacy agencies anywhere in the United States.

National Depression and Manic Depressive Association

730 North Franklin Suite 501
Chicago, ILL 60610
1-800-82-NDMDA

Numerous support groups around the country, national and regional conferences, bookstore, information.

National Empowerment Center

20 Ballard Road
Lawrence, MA 01843-1018
1-800-POWER-2-U

Information, education, resources, and support.

Information Resources

National Foundation for Depressive Illness

P0 Box 2257

New York, NY 10116

*Call 1-800-248-4344 to find out how to get more information on depressive illnesses.
informational newsletter and physician referral listings by state.*

National Institute of Mental Health

Depression Awareness, Recognition and Treatment (D/ART)

1-800-421-4211

National Mental Health Association Information Center

1021 Prince St.

Alexandria, VA 223 14—297

(703) 684-7722

Mini “Help Yourself” Program
Coping With Depression

MINI “HELP YOURSELF”
PROGRAM SUMMARY AND
RECOMMENDATIONS

Now that you have read through the program and, hopefully, started a new program of self change and increased personal coping, I want to personally thank you for taking the time and interest in yourself and in my program. I have spent long and countless hours developing these programs so that they will help you to find the resolution to your concerns. The goal of this program is to assist you to cope with the issues that you are experiencing and to help you find common sense solutions that will increase your happiness and well being.

This program is a mini version of our programs located for sale in our Self Help Bookstore. In addition, even more assistance is available should you decide that you would like to receive my services to help you to fully and effectively resolve the issues that you are presently experiencing. It is often difficult to make the first step to obtain assistance whether it is reading and completing this program or whether it is making the telephone call or writing the email to me. Either way, help is rewarding and confidential and you can be amazed at how much better you will feel when you do not have to suffer in silence any longer.

Please also take time to go to the homepage of this web site listed below on the link and to visit the “Site Map” on the side bar and learn more about me, my practice and the services that I have to offer you and your loved ones. Whatever your concern might be, I will have helped someone to resolve it in the past and I am ready to help you. The url to the web site “Site Map” is

www.helptochange.com/sitemap.htm

This web site visit and mini program activity may be your first introduction to self help and to my practice. Please acquaint yourself with the information contained in the web site. Please also read by Resume/Vita which outlines all of my degrees, education and qualifications and certifications and professional experience.

You will notice that it is possible to schedule an appointment with me via email, to complete new client forms either electronically or by fax or in person and you can complete the appropriate intake forms electronically or by fax or in person so that you can be ready to initiate services in my practice without delay or paperwork snafus.

I hope that the program that you have just viewed has helped you and hopefully resolved whatever concerns you might have. If you decide to contact me, please feel free to do so.

Dr. John Garlock, LPC, LMFT, LCDC, CEAP

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