chapter 3

think different

The feelings that accompany depression, such as guilt, worthlessness, fatigue, and feeling overwhelmed, can sometimes feel like they come "out of nowhere," but research has helped us understand that our feelings generally arise from thoughts we are having about ourselves, others, and the world (Beck 2005). When we become aware of our thoughts, the negative feelings that are a part of depression begin to make a lot more sense. These thoughts are incredibly powerful mediators of our experience, yet when we examine them, they are often inaccurate and unhelpful. The first step toward changing how you feel is beginning to identify the thoughts that underlie your mood.

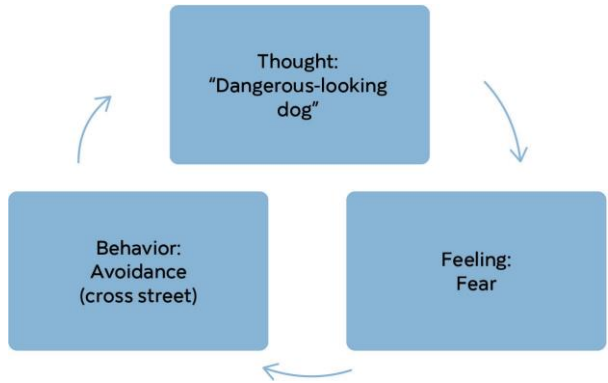
DIANE was a 63-year-old woman who lived with her three beloved dogs and husband of 40 years. Her children were grown and out of the house, living adult lives. She had retired from her job six months earlier and had looked forward to traveling more, walking daily, and volunteering. She suffered an injury to her leg that limited her mobility and ability to engage in the active lifestyle she had always enjoyed. Diane's painful injury curtailed her retirement plans. She found herself stuck at home, or spending her days going to tedious medical and physical therapy appointments. Diane started to stay in bed late into the morning "because I can" and because "there really isn't anything else that I can do." Diane's husband and friends tried to encourage her to modify her activities by using a walker or

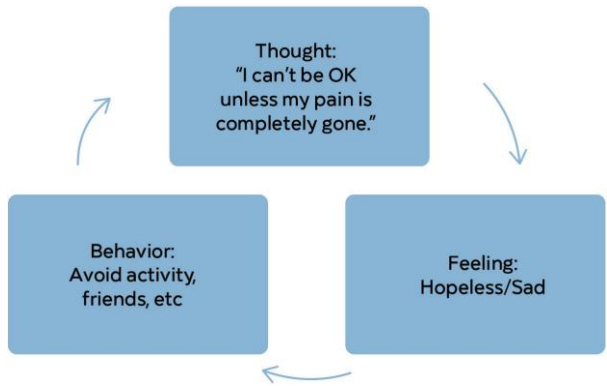
crutches to get around, but she ignored these suggestions, insisting that she simply couldn't accept that her life had become so limited. She was angry and disillusioned and refused to accept the pain that she was experiencing, further exacerbating her distress. Her doctor suggested that she see a CBT therapist, and she reluctantly agreed. When we met for the first time, she said that her goals for therapy were to "make the pain go away" and to "fix her depression."

Don't Believe Everything You Think

We live in a world that emphasizes the importance of words and thoughts. This book you are now reading is an expression of how human beings rely on words and stories to describe and make meaning of things. Thoughts can be a powerful way for us to make sense of ourselves, others, and the world around us, but we sometimes forget that many of the thoughts we have are inaccurate and unhelpful. For instance, how many times have you had the thought "I can't do this," and then actually found you were able to do something? If we believed every thought that we had, we would be at the mercy of our brains, which generate hundreds of thoughts in reaction to the world around us. You may be having the thought "this book can't possibly help me," but the only way to know if that thought is true is to begin reading and practicing the skills outlined in the next few chapters.

Within the CBT model's three domains of change (thoughts, feelings, and behavior), thoughts are always the first place to begin when we are trying to improve depression symptoms and want to explore ways to feel better. Of course, thoughts don't exist independently of the other elements of the CBT model. Thoughts are generally related to our mood. For instance, we might look at our partner and think, "I am the luckiest person in the world to have found her to spend the rest of my life with," and feel a wave of love and joy. And in another situation, we might look at our partner and think, "How did I manage to marry the most irritating person in the world?" and feel frustrated and annoyed. Same partner, very different thoughts and feelings. We may even have these very different thought-feeling sequences in the span of five minutes, giving us a very good example of how these mood states and thoughts are fleeting and





Figures 3.1 and 3.2 The CBT Model: Avoidance

mutable. But in the moment, we often believe our thoughts as if they are permanent facts rather than fleeting artifacts of our mood.

Identifying negative thinking and considering alternative thoughts that are more accurate and helpful is a critical skill in CBT treatment for depression. It seems like a very simple concept, but it can take time and practice to begin to notice our negative thoughts and how they are impacting our actions and moods. Once you have practiced the skill of

noticing your negative thinking and balancing your thoughts, you will begin to notice that you feel better and behave in different ways that move you back toward the things in life that matter to you. Don't worry if practicing this skill feels awkward or overly simplistic. The skill is not asking you to "turn that frown upside down," it is asking you to become more aware of how your thoughts are impacting you and sustaining your depression.

I explained the elements of the CBT model to Diane and told her that we would begin by exploring how her thoughts were impacting her experience of her life. Diane was a little offended by this idea, saying, "It sounds like you're saying my thoughts aren't real. My thoughts are real, this pain is not acceptable, and I can't change the way I think about that." Diane was stuck in her negative thoughts about how her physical pain was responsible for her dissatisfaction and irritability. She believed that until the pain was 100 percent gone, she was not going to be able to engage in her life in a meaningful way. We spent a lot of time exploring how some of the thoughts she had about her life were impacting how she was feeling. As she became more aware of her thoughts and how they impacted her experience, she became more willing to consider alternative ways of thinking about her situation. Diane's physical pain was real, but how she responded and made sense of the pain with her thinking made a painful situation much worse.

These "stories" that our brains generate automatically are very powerful because often we are unaware of them and how they impact our experience and behavior. We believe them without evaluating their accuracy or helpfulness, leading us to respond in habitual ways that perpetuate more negative thinking. It can be difficult to learn the skill of noticing your thoughts before you choose your emotional and behavioral reactions. You may be walking down the street and see a large dog and automatically think "dangerous-looking dog" and cross the street. In these situations, the thought ("dangerous-looking dog"), feeling (fear), and action (avoidance) happen automatically, without examination.

In the example in figure 3.2, Diane really believed the thought, "I can't be okay unless my pain is completely gone," which led her to behave in ways that made her feel even more hopeless and unhappy, exacerbating her feelings of frustration and sadness and leading her to reject the

suggestion that she could do less intense physical activities that may make her feel better. She spent most of her time at home thinking about her pain, or going to doctors trying to find solutions to her pain. This all-or-nothing thought left her trapped inside her mood (frustration and sadness), and believing this story made it impossible for her to consider alternative ways of looking at her situation.

DIANE was convinced that her injury was going to "ruin her retirement," and that there was "nothing left to look forward to" now that the kids were grown and her career was over. Every time her leg hurt or she noticed her limitations, she would make sense of it with these distorted thoughts about her injury and retirement. When I talked to her about the thinking errors that are common to depression, she got offended that I was implying that she "wasn't thinking clearly." As a retired teacher, she was certain that she had a very good brain. I explained that even supersmart people are vulnerable to these thinking errors when they are struggling with depression. She reluctantly reviewed a list of common thinking errors and noticed several that she used frequently. She could see that her all-or-nothing thinking about her injury was keeping her trapped and immobilized. She could also admit that she was "catastrophizing" when she said that her injury had "ruined her retirement." She had looked forward to retiring her whole life, assuming that she would love having no commitments. She was disappointed that her injury had interfered with her plans and left her feeling isolated and angry.

Distorted Thoughts

Now that we have established that our thoughts are not always helpful or accurate, we can begin to examine the unique ways that thoughts are distorted when we are depressed. Distorted thinking is the fuel that feeds the depression, maintaining inaccurate and negative beliefs about ourselves, others, and the world around us. Dr. Aaron Beck was a psychiatrist who noticed that his depressed patients had unusually high numbers of negative and inaccurate thoughts, and he proposed the theory that distorted thinking is an important feature of depression (Beck 1967).

Research has isolated several common thinking errors that we are vulnerable to when we are depressed (Beck 1976). It is helpful to recognize these common thinking patterns, in order to confirm when our thoughts are veering into the negative thought distortions common to depression. These thinking errors are something all of us engage in, but when we are depressed, we are even more likely to engage in these distorted thought patterns. Diane found that her thoughts fit the descriptions of "all-or-nothing thinking" and "catastrophizing." Knowing the common thinking errors can help you to recognize when you are falling into distorted thinking that may be impacting your mood and behavior. As you review this list, you are likely to recognize some thinking errors that feel very familiar to you.

Common Thinking Errors

COMMON THINKING ERRORS	EXAMPLES
All-or-nothing thinking – Seeing things in terms of absolutes or extremes. Things are either "perfect" or they are unacceptable.	"I have to please everyone or they will hate me." "I have to be the best or it is a total waste of time." "If I get a bad grade, I'm a total failure."
Black-and-white thinking – Ignoring the gray area. You know that you are using black-and-white thinking when you use the words "always" or "never."	"I will never be able to happy." "He is never there for me." "People always misunderstand me."
Catastrophizing – Drawing conclusions that predict worst-case scenarios or cataclysmic outcomes. This results in believing that the situation is hopeless and dire.	A person makes a mistake at work and assumes that they will be fired. "If I don't get this right, I will be ruined."
Discounting the positive – Devaluing positive information or feedback.	Someone gives you positive feedback, and you assume that they are "just being nice" or have some ulterior motive.