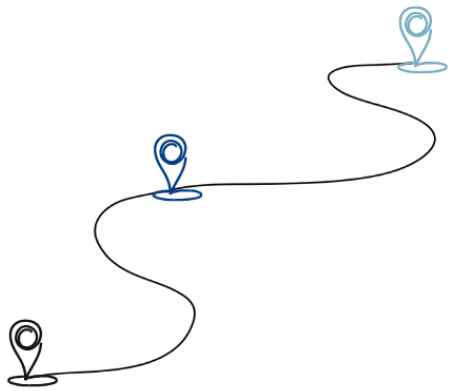
Depression Basics

Introducing You to Depression



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Chapter Goals

- Learn what depression is and how it is maintained
- Learn about a gold-standard treatment for depression
- Start to identify your own depression patterns

What is Depression?



Life isn't easy. At times we have too many problems, not enough enjoyment, and too few accomplishments. During these times, it is normal to feel depressed. With **depression**, it is common to feel tired or drained with little energy to do things we need or want to do. This can help us conserve our energy and re-evaluate our situations. This feeling may go away when events change or we get some rest. A **depressive disorder**, however, is characterized by *continuous* low mood and loss of interest in things that were once enjoyed, even if circumstances improve. In addition, these episodes are distressing and/or negatively impact our lives in some way, such as work, relationships, sleep, and health. Millions of people experience at least one of these depressive episodes in their life.

Why depression sticks around and how to manage depression is the focus of this workbook. A depressive disorder is a **psychological disorder**, which means that it is an *automatic* pattern of attending, thinking, feeling, and acting that is maintained in a *cycle* despite creating problems (Barlow, 2021; Bringmann et al., 2023). We want to highlight that a depressive disorder is automatic. People don't wake up in the morning and say, "You know what, I'm going to be depressed today." The

cycle just happens to them. A large body of research points to a set of factors that keep depression going, despite people wanting it to stop (Barlow, 2021).

Here's an example of a depression cycle. As you read, take note of anything with which you can relate. It's okay if you don't quite understand what is outlined here or if your situation is a bit different. Your therapist can help.

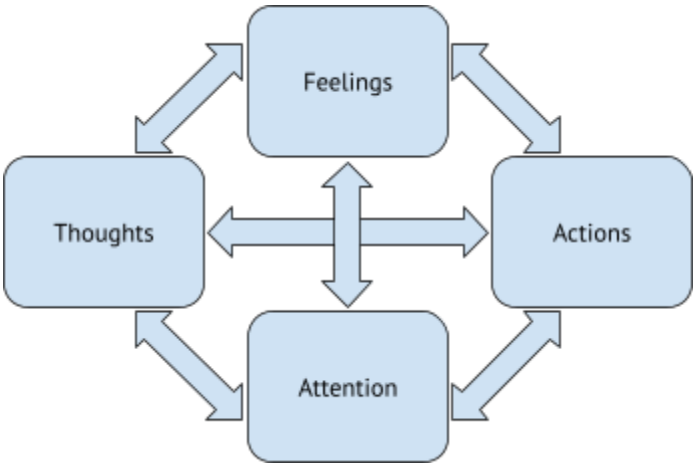
Those experiencing a depressive disorder tend to pull back from the world because it serves as temporary relief from the burdens of life. However, when left unchecked, this isolation can encourage self-focused attention and rumination about past failures or problems. Although there is some truth to these ruminations—sometimes we do experience failure, rejection, and disappointment, sometimes important people in our lives tell us harsh and critical things about ourselves—these experiences start to cloud our judgments and pessimistic beliefs start to form. People may find themselves predicting that they will fail at tasks, be rejected by others, and not enjoy activities. One way to deal with these potential problems is to avoid them. It's easy to think, "What's the point in facing them anyways?" Activities that have the possibility of failure, rejection, or disappointment are often avoided, which prevents corrective experiences—evidence that goes against their beliefs. These pessimistic beliefs are further supported by focusing on negative aspects of situations and minimizing positive aspects. Unfortunately, this "pulling back" from the world and focusing on the negatives limits moments of enjoyment and accomplishment, which makes people feel that life isn't worth living.

Despite this continuous and automatic cycle, we can still make changes. Many researchers and clinicians agree that identifying patterns of attending, thinking, feeling, and acting that keep us stuck and practicing new ways of responding can really help us bounce back from a depressive disorder and move us closer to a life worth living (Hofmann et al., 2012). Making changes can even be observed in our nervous system, which inherently responds to our environments and can be shaped by our experiences (Linden, 2006). However, we need to start by getting a better sense of your own experience of depression.

Although there are common patterns across people, depression can look a little different from person to person, especially when considering the culture in which people live. Take a moment to write down your experience with depression: (1) when and where you feel most depressed, (2) how depression feels to you—such as what you notice in your body, (3) what you tend to pay attention to more or less, (4) how or what you tend to think, and (5) what you tend to do when you are depressed.

Cognitive Behavioral Therapy

Cognitive Behavioral Therapy (CBT) has been adapted to treat different psychological disorders within different cultures (Naeem et al., 2019). It is considered a "gold-standard" treatment because it is the most effective and reliable treatment with enduring long-term benefits (David et al., 2018). The basic idea behind CBT is that different events can trigger different responses—attention, thoughts, feelings, and actions. This happens because at some point in our lives, we learned to respond to certain events in particular ways. We call this our "learned history," which includes our personal experiences as well as cultural expectations. These responses can actually impact one another and form a depressive disorder.

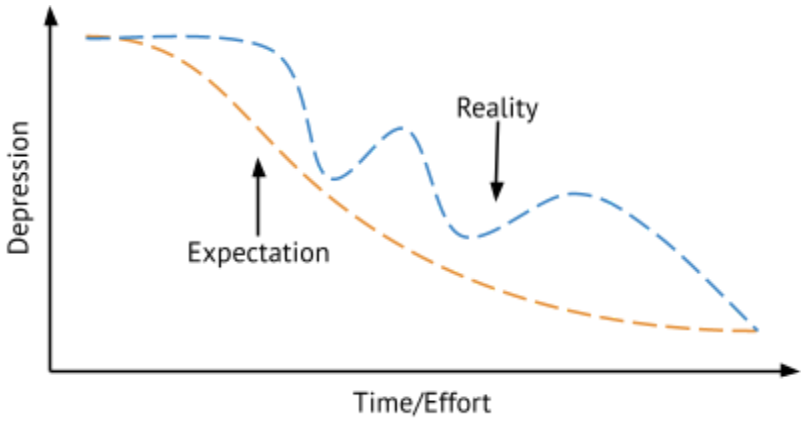


Characteristic responses of depression include:

- **Attention** - Towards negative information
- **Thoughts** - "My life will never get better.", "I'm a failure."
- **Feelings** - Down, tired, irritated, angry
- **Actions** - Sleeping more than usual, canceling get together

How these responses are triggered and maintained is what you and your therapists will uncover together. Developing this understanding is what we call a **case formulation** and it directly informs what your treatment will look like.

It is helpful to have clear expectations through treatment. CBT can help you improve your depression by helping you notice the thoughts, feelings, actions, and attention that keep you stuck as well as guide you towards new ways of dealing well with life's problems. However, CBT isn't guaranteed and there are a lot of factors that impact how successful someone may be—for example, how many sessions you have, how much effort you put into change, how supportive your environment is, etc. If you do see improvements, they likely won't be linear.



There are a number of what we call "core clinical change processes" that you and your therapists will consider when developing your **treatment plan**—for example, stimulus control, cognitive reappraisal, behavioral activation, mindful awareness, prolonged exposure, etc. A common change process utilized in depression treatment is behavioral activation (Jacobson et al., 2001), which aims to curb the avoidance that limits engagement in meaningful activities and replace this avoidance with more meaningful activities, thereby improving mood. Each process comes with different change techniques, which you could think of as different skills.

Keep in mind that CBT is an effortful process. It is imperative that once you learn a new technique/skill, you practice it over and over and over again. We want you to retain your new pattern of responding so that it—and not the disordered pattern—becomes automatic. You may find that you take two steps forward and one step back. This is normal. Change is hard and it takes time to develop new patterns. Try not to get too discouraged. Anything worth doing is typically hard. Remember, if you're ever having a hard time understanding anything in this workbook or doing the activities in this workbook, reach out to your therapist.

Illuminating Your Patterns

What we mean by that is, shine a big ol' light on your depression cycle. Really look at the events and subsequent responses—attention, thoughts, feelings, and actions—that keep you stuck. This process, which we call **self-monitoring**, can increase the likelihood of changing unproductive habits (Zhao et al., 2021). Put simply, we can't change something that we aren't aware of.

To do this, you will need to make note of five things: events, attention, thoughts, feelings, and actions. **Events** are the triggers for depression responses. Situations you are in can automatically trigger specific responses. These situations can be anything, such as working on a project or being in a social gathering. Triggers can also be memories from past events or images of future events that haven't happened yet. Sometimes we can change these events. More often than not, we are changing how you respond to them.

Attention is where your focus is. It is the built-in flashlight that we have. It is what you notice outside and inside your body. What we attend to can bias our cognitive processing. Do you find yourself overly focused on past problems? Are you more likely to see the trash on the ground than the flowers?	**Thoughts** are how you make sense of events. Sometimes how we perceive an event is more important than the event itself. For instance, how well did a project go? Are you or is someone else to blame for it going poorly? Do you think an upcoming social gathering will go well or not? Why do you see it going poorly?
Feelings are the sensations in your body. Feelings can be tension in your muscles, heaviness in your body, a sense of irritation. Try not to mix up feelings and thoughts. For instance, sometimes people "Feel like a failure." This is really two things. First, it is a thought, "I'm a failure." Second, it is a feeling of disappointment.	**Actions** are the things you do to try to address or cope with the events or feelings. Actions related to "pulling back" are common with depression. These include staying home, sleeping in, canceling plans, and the like. Actions may be verbal, such as telling people to leave you alone. Actions may also be facial expressions, such as crying.

See the next page for your first "Change Task," which outlines how to monitor your depression along with a helpful worksheet.





Change Task

Illuminate Your Depression Cycle

It is helpful to get in the habit of tracking the ebb and flow of your depression. So, what triggers your depression and what is your depression made of—your attention, thoughts, feelings, and actions? On the flip side, what makes your depression better? If you are unclear on whether something is a trigger or not, just write down what is going on when you are experiencing depression. You can start to monitor your depression using the worksheet on the next page. It's helpful to get a couple weeks of data before you can start to see a pattern emerge. As you monitor, write down the events and responses as soon as you can. You may find that it is helpful to keep this workbook with you or jot down some notes on a piece of paper and then transfer your notes to this worksheet.

Self-Monitoring Worksheet

Events The triggers of your depression	**Attention** What you tend to notice or focus on	**Thoughts** How you make sense of different events	**Feelings** The sensations in your body	**Actions** How you cope with the event or feelings

Chapter Summary

You have learned quite a bit in this chapter. You learned:

1. that depression is a natural response to certain situations,
2. that a depressive disorder is a cycle of depression that creates problems,
3. how cognitive-behavioral therapy can help,
4. what are reasonable expectations for progress,
5. the difference between events, attention, thoughts, feelings, and actions, and
6. the importance of knowing your depression cycle.

Your **change task** for the week is to write down when and where you are experiencing depression and any responses—attention, thoughts, feelings, and actions—while you are experiencing depression.

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