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GROUP LEADER'S MANUAL

# Building Recovery by Improving Goals, Habits, and Thoughts

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An Integrated Group Cognitive Behavioral Therapy for Co-Occurring Depression and Alcohol and Drug Use Problems

*Thoughts, Alcohol/Drug Use, and Your Mood*



The research described in this report was sponsored by the National Institute on Drug Abuse and was conducted in RAND Health, a division of the RAND Corporation.

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**This is your book to keep. Feel free to write in it.**

**This workbook belongs to:**

---

**(Name)**

---

**(Date)**



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## LEADER TIPS

### Materials Needed

- **Group Member’s Workbooks** (“Thoughts, Alcohol and Drug Use, and Your Mood”)—enough for everyone in the group
- **Pens**—enough for everyone in the group
- **Dry erase board, chalkboard**, or large sheets of paper to present material to group
- **Kleenex** or other facial tissue
- **The PHQ-9 depression measure**—enough copies for everyone in the group
- **Index cards**—enough to give everyone in the group seven cards
- **Small binder clips**—enough to give one to every group member—so they can attach their index cards to their workbooks

### Group Leaders’ Goals

- Make all group members feel welcome.
- Discuss group rules.
- Introduce yourselves and provide phone numbers.
- Begin to encourage group sharing and support by having group members introduce themselves.
- Help group members understand what depression is.
- Help group members understand CBT and how it can help with depression and alcohol/drug use problems.
- Remind continuing group members of topics and skills introduced in the previous module (“People, Alcohol/Drug Use, and Your Mood”).
- Introduce the connections among thoughts, alcohol/drug use, and depression.

## LEADER TIPS

### Welcome Group Members

#### As group members arrive:

- Introduce yourselves and invite group members to sit anywhere.
- Pass out the Group Member's Workbooks ("Thoughts, Alcohol/Drug Use, and Your Mood").
- Pass out the PHQ-9 depression measure. Ask group members to fill them out, put their names on them, and return them to you. Tell group members that you will talk more about the questionnaire later.
- Scan the questionnaires quickly as you collect them. Notice any major changes in the severity of group members' depression symptoms, including thoughts of suicide. If a group member reports thoughts of suicide, follow the procedures that you have worked out with your supervisor in advance regarding how to handle these situations. Often this involves having one group leader meet privately with the client either during group or immediately following to further assess the client's risk of suicide or "handing off" the client to another clinician who will conduct this assessment. Consult with your supervisor immediately in the case of a client who is suicidal.

#### Begin the group:

- Welcome all group members. **Say:** *This is the BRIGHT-2 Cognitive Behavioral Therapy for depression and for alcohol and drug use. This is the module called "Thoughts, Alcohol/Drug Use, and Your Mood." We will talk more about Cognitive Behavioral Therapy in a few minutes.*
- **Say:** *Some of the group members may have attended one or more previous modules. Many of you are entering the group for the first time.*
- **Identify** members of the group, if any, who will be graduating (completing all three CBT modules) at the end of this module.
- **Say:**
  - *Congratulations to everyone for coming to this group and taking a step towards your recovery from both depression and alcohol/drug use.*
  - *Turn to the first page after the cover in your books and put your name and the date on the lines.*
  - *The workbooks belong to you. You will keep them when the group is over. You should bring your workbooks to every group meeting. You will be writing in them.*
  - *We will not take formal breaks, but you should feel free to get up and use the restroom whenever you need to.*

### Purpose and Outline

1. **Say:** *Every session begins with a few points about the purpose of the session and an outline of the session. We will go over these now.*
2. **Introduce** the Purpose and Outline.
3. **Ask:** *Does anybody have any questions so far?*

## PURPOSE

- Learn about this group, depression, and alcohol/drug use problems.
- Learn that there are connections among thoughts, depression, and cravings. (A “craving” is the desire to drink or use.)
- Learn that thoughts can be harmful or helpful to you.

## OUTLINE

Welcome

How Have You Been Feeling?

Group Rules

Announcements

Introductions

What Is Depression?

What Are Alcohol/Drug Use Problems?

What Is Cognitive Behavioral Therapy (CBT)?

Review

New Topic: Thoughts Can Be Harmful or Helpful

Thoughts Are Sentences We Tell Ourselves

Identify Your Harmful Thoughts

Examples of Harmful Thoughts

Examples of Helpful Thoughts

Key Messages

Practice

Feedback

Looking Ahead

# HOW HAVE YOU BEEN FEELING?

---

## LEADER TIPS

**Time: 5 minutes**

**Group Member's Workbook: Page 2**

- 1. Introduce** the text in the Group Member's Workbook.
- After the session, **compare** each group member's PHQ-9 scores with his or her previous scores (if the group member has filled out the questionnaire at a previous session). This comparison will allow you to monitor each group member's depression.

**Note:** In addition to the PHQ-9, choose another measure to monitor how group members are progressing in their recovery. See the Group Leader's Introduction for a discussion of how to select a measure that supplements the PHQ-9. Compare current and previous scores as you would with the PHQ-9 measure.



You filled out a questionnaire at the beginning of the session, the “Patient Health Questionnaire”—PHQ-9 for short.

You will fill out the questionnaire before the group begins at Sessions 1, 3, and 5 of each CBT module. The questionnaire allows you and your group leaders to keep track of how you are feeling while you are attending the group.



# GROUP RULES

## LEADER TIPS

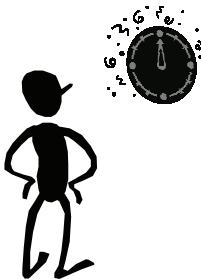
**Time: 5 minutes**

**Group Member's Workbook: Page 3**

**1. Go over group rules** before anyone discloses any personal information. Don't forget to talk about the exceptions to confidentiality. Tell the group the name of your supervisor. Consider the rules and expectations at your treatment setting and convey to group members how lapses in sobriety will be handled. Ask if anybody in the group has questions or comments about any of the rules.

**1. Come to every group meeting.** Important and useful new ideas will be discussed at each group session. The sessions will give you new tools that you can use to help your recovery from depression and alcohol/drug use. This is why it's so important to come to each group meeting. If you can't make it, call us at this number:

( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ (Contact number)



**2. Come to group meetings on time.**

**3. Do not come to group under the influence of alcohol or drugs.**

For the benefit of the group, you will be asked to leave the session if you are under the influence.



#### **4. Maintain the confidentiality of the group.**

Please do not share what you hear in the group with anybody else. Likewise, group leaders will not repeat what you say. There are three exceptions.

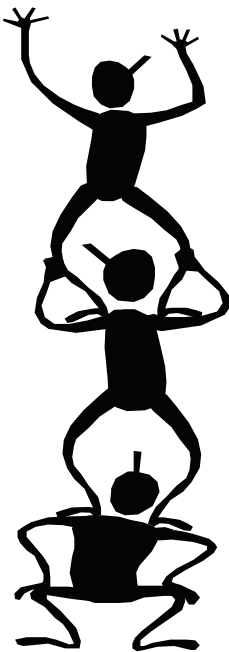


First, your group leaders share information with each other and with the licensed mental health professional that is supervising the group.

Second, if group leaders hear something that makes them think your health or safety is in danger they will talk with your doctor or others.

Finally, by law, a group leader must report:

- If a child or dependent adult is being abused or neglected.
- If an older adult is being abused or neglected.
- If someone is in danger of hurting himself or herself or someone else.

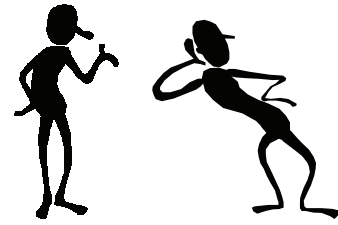


#### **5. Be respectful and supportive of others in the group.**

The group is based on respect for all people. If you have a problem with another group member and your feelings are getting in the way of your group therapy, discuss the problem with a group leader.

You may find that other group members have had experiences similar to yours, but feel differently about them. That's OK—it is important to respect each person's opinion.

**6. Find a balance between talking and listening.**



You and the other group members will get the most out of the group if everybody has a chance to talk about their thoughts, feelings, problems, and experiences.

Plus, in each session, the group leaders need time to introduce new ideas that will help everybody in the group. Unfortunately, the time allowed for each group session is limited. The group leaders will:

- Keep track of the time for each session.
- Gently remind you to give others a turn to talk.

**7. Know that you don't have to share everything.**

**8. Practice.** Practicing on your own will help you learn how to use the skills you learn in group and make it more likely that you will get well.

**9. Tell us if you are unhappy with the group or your treatment.**



# ANNOUNCEMENTS

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## LEADER TIPS

**Time: 2 minutes**

**Group Member's Workbook: Page 6**

1. Make announcements if there are any. Answer group members' questions right away if they relate to the way the group is run.
2. Time will not allow for group members to add big items to the agenda. However, each person should have a chance to talk about personal issues that add to his or her depression and cravings. Each person needs to feel that he or she has been heard and understood by the group. Many of the group members' concerns can be addressed in the work of the session. If necessary, arrange to talk with a group member individually after the session.

The group leader will make any announcements that might be necessary. For example, if the next session is scheduled on a day that is a holiday, the day of that session may be changed. During this time, you will have a chance to tell the group leader ahead of time if, for example, you need to be late for a session.

Is there anything you would like to let the leaders know about?



# INTRODUCTIONS

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## LEADER TIPS

**Time: 10 minutes**

**Group Member's Workbook: Page 7**

**1. Give group members phone numbers** where they can contact you. Also remind clients to call 911 if they are having thoughts of hurting themselves.

- Write your names and the phone numbers on the board.
- Suggest that group members write the information in their workbooks in the space provided.

**Say:** *Now we would like for everyone to get to know each other. You will have a chance to talk about your depression and drinking or using later during the sessions. For now, let's start the introductions with the subjects in your workbook.*

**2. Introduce** the text. Provide a model for the group members by introducing yourselves first. **Answer one or two questions** in the workbook.

- If some members begin to provide more information than necessary, gently remind them that they will have time to talk about other issues during the group. For now the focus is on introductions.
- It may be helpful to ask group members questions that result in short answers, such as, *"Where did you grow up?"*
- If members focus on their depression or their drinking or using when they describe themselves, stop them and remind them that the group wants to know who they are and what they are like apart from their depression or drinking/using.

## Group Leaders

Your group leaders are:

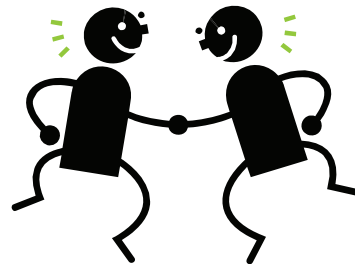
\_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
(Name) (Contact number)

\_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
(Name) (Contact number)

**In an emergency** (for example, if you are having thoughts of hurting yourself), **call 911**.

## Group Members

You will be coming to group CBT with the group of people you are meeting in this session. Talking with them will be an important part of CBT.



Now group members will introduce themselves. We will be talking about your experiences with depression and drinking/using later in the session. At this time, we want to know a bit about you as an individual. Begin by telling the group your name, and then **choose one or two of the following** subjects to talk about:

- Where you grew up
- Your family
- What kind of work you have done
- Your main interests or hobbies
- Something about yourself that you think is special

# WHAT IS DEPRESSION?

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## LEADER TIPS

**Time: 10 minutes**

**Group Member's Workbook: Page 8**

No matter how different group members might be from each other, the information about depression allows them to see that they are not alone. They share common feelings and a common problem—depression.

**1. Ask:** *What is depression like for you?* Encourage open discussion.

- One group leader should write group members' depression symptoms on the board.
- As group members mention a symptom, ask whether other group members have had similar concerns.
- If some symptoms of depression are not mentioned by group members, add them to the list at the end. **Say:** *Everybody in this group has experienced symptoms of depression, and what we're trying to do is help you overcome these symptoms and feel better.*

Remind group members that their workbooks are theirs to keep and that they should feel free to write in them.

**2. Introduce** “Depression Is,” “The 9 Symptoms of Depression,” and “Possible Triggers for Depression.” **Ask:** *What was happening in your life when you got depressed?*

- Take notes and use this information to understand the needs of group members and to plan the sessions to make them as helpful as possible. (You probably already know something about group members based on the contact you made with them before the group started.)
- If any of the triggers listed in the “Depression” box are not mentioned by group members, tell them that other things can cause depression and read from the list.

**3. Say:** *Tell one of the group leaders if you have thoughts of suicide. Depression is very treatable and you can feel better.*



### ***What is depression like for you?***

Feel free to write notes to yourself anywhere in your workbook. In some places, there is extra space for your notes.

### **Depression Is:**

- More than a passing sadness or bad mood.
- A period of feeling very sad that lasts a long time and that makes it hard to do daily activities.
- Possible at any point in your life.
- A possible diagnosis if you have five or more of the following symptoms most of the day, almost every day, for two weeks or more:

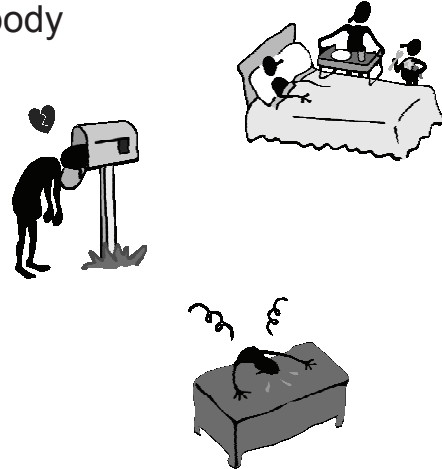
### **The Nine Symptoms of Depression**

1. Feeling depressed, down, or irritable nearly every day.
2. Loss of interest or pleasure in activities that you normally enjoy.
3. Significant increases or decreases in your weight or appetite.
4. Sleeping too much or too little.
5. Change in the way you move (moving restlessly or slowly).
6. Feeling tired or fatigued.
7. Feeling worthless or having terrible guilt.
8. Trouble concentrating or making decisions.
9. Repeated thoughts of death or suicide.

## ***What was happening in your life when you most recently got depressed?***

### **Possible Triggers for Depression**

- Use of alcohol or drugs
- Being sick with medical problems or in pain
- Biological/chemical imbalance in your body
- Financial/money problems
- Losing someone you love
- Upsetting things happening, or ongoing problems
- Struggles with people you are close to
- Big life changes
- Stress that lasts a long time
- Living with people who are addicts



***Did  
you know***

### **Depression is Common**

- 10–25% of women will have at least one serious episode of depression.
- 5–12% of men will have at least one serious episode of depression.
- Depression is the #1 cause of disability in the United States. (“Disability” is the inability to carry out daily living activities.)

Source: *Controlling Your Drinking* by William R. Miller, Ph.D. and Ricardo F. Munoz, Ph.D. Published by the Guilford Press, 2005.



# WHAT ARE ALCOHOL/DRUG USE PROBLEMS?

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## LEADER TIPS

**Time: 15 minutes**

**Group Member's Workbook: Page 10**

- 1. Say:** *Now that we have discussed your experiences with depression, let's talk about using alcohol and drugs and how using alcohol or drugs may have caused problems for you.*
- 2. Ask** group members: *How has your use of drugs or alcohol affected your depression symptoms?*
- 3. Ask** group members: *How has your drinking or using been a problem for you?*
- 4. Briefly go over** the bullets under "Common problems of alcohol/drug use" to help group members see if their drinking/using is a problem for them.
- 5. Ask:** *What would your life look like if you stopped drinking/using and your mood improved?* Encourage open discussion. Help group members think of specific areas of their lives that would improve. Ask group members to write their ideas on the lines in their workbooks.

### ***Common problems of alcohol/drug use:***

- Conflicts with other people, including family members.
- Problems at work or school, or difficulty keeping a job.
- Financial problems.
- Physical symptoms or health problems, or existing health problems becoming worse.
- A tolerance for the alcohol or drugs so that you require more to get the same "high."
- Not being able to stop on your own.
- Withdrawal symptoms (such as shakiness, feeling sick to your stomach, headaches, or fatigue) when you don't use that are relieved when you use again.

- Memory problems.
- Legal problems (such as an arrest for driving under the influence—DUI; arrest for possession or use of illegal drugs; or not meeting your financial obligations).

**What would your life look like if you stopped drinking/using and your mood improved?** Write your ideas below.



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*Did  
you know*

### **Many Americans Don't Drink**

34% of men and 44% of women in the United States do not drink alcohol.

Source: *Controlling Your Drinking* by William R. Miller, Ph.D. and Ricardo F. Munoz, Ph.D. Published by The Guilford Press, 2005.

# WHAT IS COGNITIVE BEHAVIORAL THERAPY?

## LEADER TIPS

**Time:** 10 minutes

**Group Member's Workbook:** Page 12

- 1. Say:** *Now we will talk a bit more about the treatment approach that we use in this group. Review the text.*
- 2.** Stop after each section and ask for questions and comments. Make sure to make this interactive. For example, elicit personal examples from group members.
- 3. Say:** *Now imagine an event such as losing a job, or even something less extreme such as being late to work or having an argument with a friend. It would be natural to feel upset. But other factors can make your suffering even worse.*
- 4. Go over** the CBT circle on page 13. Or ask for a volunteer among those who have been through other CBT modules to explain CBT to the group. Encourage questions and discussion.

**Thoughts.** *If a person lost a job, he or she might think that he or she has nothing to offer or that nothing can be done about the situation. This person might become depressed. Imagine a second person who instead thinks he learned a lot and got great experience at the job, so he feels that he is likely to do very well getting another job. The second person is less likely to become depressed*

**Activities.** *Another factor is how we act. When we feel down, we have less interest in doing things and as a result we often behave differently than we usually do. For example, when you're depressed you may not feel like taking a walk or even getting out of the house. Staying in bed all day could make your mood continue to spiral down.*

**People.** *Depression affects our mood in another way. When we are depressed, we often reduce the amount of contact we have with other people, or the interactions we do have are not healthy for us. This might be because the people we spend time with may be using drugs or alcohol. Maybe the people have completely different tastes in what activities they enjoy. Perhaps they aren't supportive in ways that make us feel good about ourselves. Spending time with old drinking friends may also cause your mood to spiral down.*

**Say:** *As you can see, depression and alcohol and drug use can become a destructive cycle. CBT can help prevent the cycle. This treatment will be most helpful to you if, at the end, you have learned many ways of managing your mood, and you feel confident using them in your daily life. This will take practice.*

This treatment provides a specific kind of help—cognitive behavioral therapy, or CBT for short—to people who are depressed and who have problems with alcohol/drug use. Depression and alcohol/drug use problems often go together, so it makes sense to treat them together.

CBT teaches skills to help you change your thoughts and behaviors to improve the way you feel and support your recovery. This approach does not mean that your thoughts and behaviors caused your depression and alcohol/substance use in the first place.

***CBT can help you “manage” your depression and your recovery. “Managing” means to:***

- Make feelings of depression and cravings for alcohol/drugs less intense, less frequent, and shorter.
- Learn ways to prevent getting depressed again and to stay free of alcohol/drugs, despite real life problems.
- Learn what thoughts, feelings, activities, and people interactions make it more likely you will get depressed or use. They are your “triggers.”

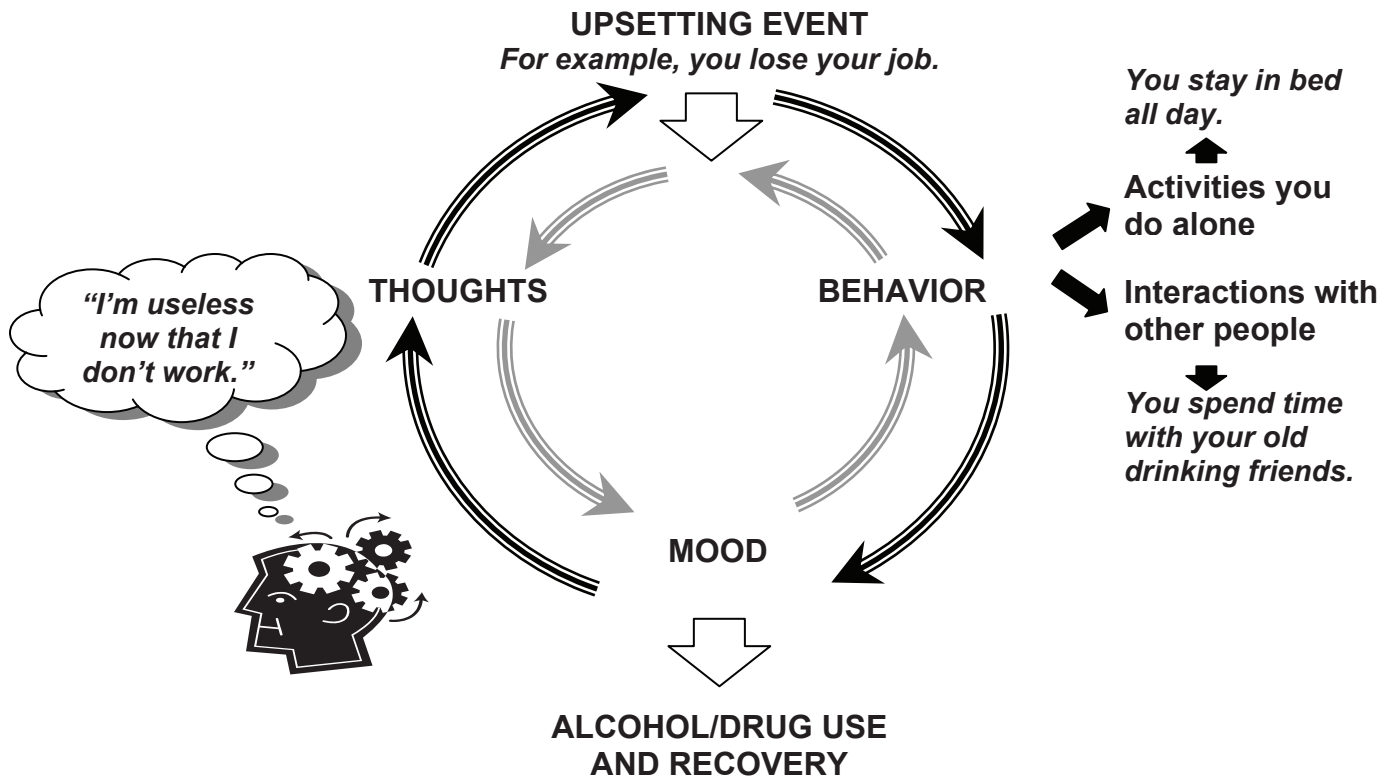
***What does the name “Cognitive Behavioral Therapy” mean?***

***Cognitive*** refers to **your thoughts**.

***Behavioral*** refers to **how you act** or **what you do**. In CBT, when we talk about behavior, we mean what activities you do and how you interact with other people.

One way to think of CBT is that it teaches healthy ways to manage your depression and your recovery. Managing your depression and your recovery means to make feelings of depression and cravings for alcohol/drugs less intense, less frequent, and shorter.

## The CBT Circle



CBT helps you break the destructive cycle of depression and can help you manage your cravings by teaching you that for each of these factors—thoughts, activities, and people interactions—there is a part that you can manage and change. Also, because they are connected, changes in one area can affect the other areas.

***This CBT treatment program is organized into 18 sessions.***

- **Thoughts** module = 6 sessions
- **Activities** module = 6 sessions
- **People** module = 6 sessions

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**Total CBT = 18 sessions**

## LEADER TIPS

**Time: 5 minutes**

**Group Member's Workbook: Page 14**

1. **Ask** group members if they are familiar with the serenity prayer. Ask if any group member would like to recite it. Or, read it aloud from the workbook.
2. **Go over** the text after the Serenity Prayer.

### The Serenity Prayer



**“God, grant me the serenity to accept  
the things I cannot change,  
Courage to change the things I can,  
And the wisdom to know the difference.”**

CBT has something in common with the Serenity Prayer. It teaches that, even though you cannot change everything in your life, you can choose **how you think** about events and **how you react**.

**“*Changing the things I can*”** involves **thinking** and **doing**:

- Changing how you **think** about things, and
- Changing what you **do** to respond.

In this module, we will talk about the power of your thoughts and their important connection with depression and alcohol/drug use. You can learn how to manage your thoughts to feel better and support your recovery.

***The goal of CBT is to help you get closer to what you imagine your life would be like without depression and without drinking/using. The group will focus on practical strategies to improve things right now, and will teach you skills that you can continue to use even after the group ends.***



# REVIEW

## Last Module

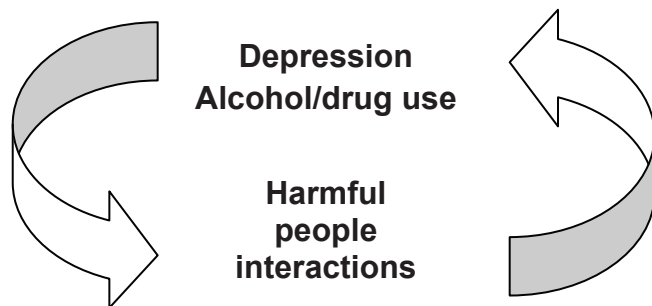
### LEADER TIPS

**Time: 5 minutes**

**Group Member's Workbook: Page 15**

1. It may be difficult for group members to remember what you talked about in the last module. Use this time to remind them of the key messages and to help them understand how this session builds on last session.
2. **Say:** *In the last session, we talked about people interactions and how they can be helpful and harmful.*
3. **Ask:** *What do you remember the last module? What did you learn that was most helpful for your mood and recovery?*
4. Review the key messages from the last module. Remind group members that they can learn how to catch (or notice) their harmful people interactions and choose to have helpful interactions with people.

- What do you remember most from the last module?
- What did you learn that was most helpful, in terms of improving your mood and supporting your recovery?
- What was less helpful?



The key take-home messages from the last module were:



1. You can **catch**, or notice, your people interactions.



2. You can **check**, or examine, your people interactions to see if they help you or harm you. A helpful people interaction is healthy for you—it makes you feel good and supports your recovery.



3. You can change the harmful people interactions that get in the way of your good mood and recovery, and choose helpful people interactions instead.



# Practice

## LEADER TIPS

**Time: 10 minutes**

**Group Member's Workbook: Page 16**

**Note to group leaders:** If everybody in your group is new to CBT, and nobody is continuing from a previous module, you may skip this review section.

**Say:** *At least some of you may be continuing CBT from the last module. We'll do a quick review of the module and the practice before we start a new topic.*

### Keep Using Catch It, Check It, Change It

**1. Say:** *Were you able to notice your harmful people interactions and change them? Did Catch It, Check It, Change It help you?*

### Using Coping Cards

**2. Ask:** *Where did you decide to keep your coping cards?*

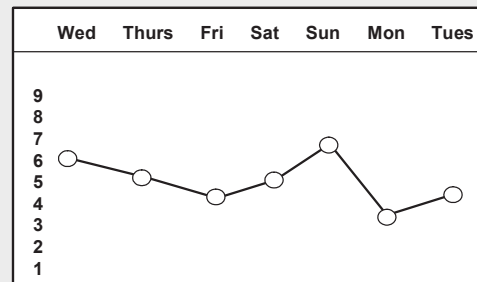
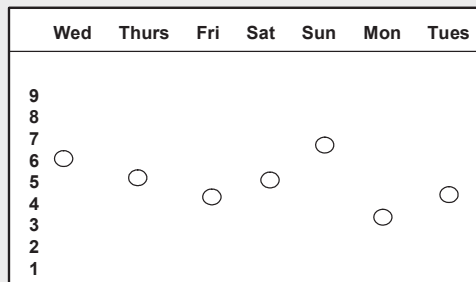
### Daily Check In

**Say:** *At least some of you may be continuing CBT from the last module. We'll do a quick review of the module and the practice before we start a new topic.*

Ask group members about how they did tracking their moods and coping on their Daily Check In. Make a graph based on one group member's Daily Check In.

**3.** Start the graph with the day of the week the group meets. If your group meets on a Wednesday, write "Wednesday" or "Wed" in the first space at the top of the graph.

**4.** Ask for a volunteer from the group to share the numbers **related to mood** on his or her Daily Check In. Make a graph on the board like the example below. If the group member's mood was a 6 on the first day, mark a dot at 6 below "Wed."

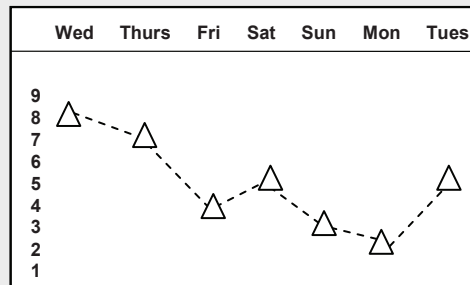
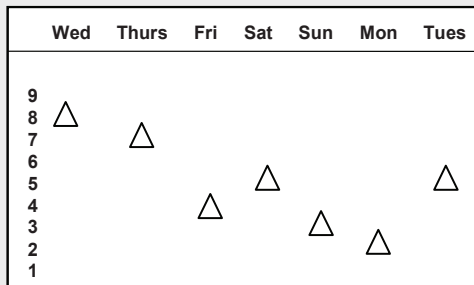


5. When you are finished adding dots that represent the volunteer’s mood for each day, draw lines between the dots to show how mood can change up and down.

**6. Possible follow-up questions:** *What did you notice about your mood? What kinds of interactions with people did you have on the day that your mood was the lowest? What kinds of interactions with people did you have on the day that your mood was the highest?* Help group members to notice the connection between having more healthy interactions with people and improved mood.

7. Repeat the process for coping, using a new graph. Ask the same volunteer to share the numbers **related to coping** on his or her scale. Add dots to the new graph. If the group member’s coping was 8 on the first day, mark a dot at 8 below “Wed.”

8. When you are finished adding dots that represent the volunteer’s coping for each day, draw lines between the dots to show how coping can change up and down.



**9. Possible follow-up questions:** *What did you notice about how well you coped with challenges? You coped very well on [day]. What kinds of people interactions were you having on that day? What was your mood? What do you notice about the connections among your people interactions, mood, and how you coped?*

**10. Note:** Depending on the size of the group, you may choose to chart the Daily Check In of all group members or just one or two. Some group members will be eager to share each week, but don’t focus only on them. In the course of the six-session modules, encourage as many group members as possible to share their Daily Check In—even those who are shyer and less vocal. For each member who shares, try to connect thoughts and mood/coping, activities and mood/coping, and people interactions and mood/coping. Have the person describe the thought, activity, or people interaction and help him or her to change harmful thoughts or behavior. The point is to teach how to apply the CBT skills to specific, real-life situations, but not necessarily to solve every difficult situation.

### **11. Note: What to do if group members don't do their practice**

Most group members will do their practice activities; you should begin with the assumption that they will. Checking early in each session on the practice is the best way to let group members know how important their practice is. However, there may be individuals in the group who consistently do not practice. Identify this problem as early as possible.

***Find out if there are returning group members that are not practicing.*** Is it an issue of time, reading ability, forgetfulness, or other responsibilities getting in the way? Once the obstacles are identified, you can help the group member figure out how to overcome them. You might say, “We want you to start feeling better, and we know how important practice is. Can we help you figure out what is getting in the way so that you can do the practice and start feeling better more quickly?”

***Identify thoughts that contribute to not practicing,*** such as “It doesn't matter what I do, nothing will change,” or “I don't feel like doing my practice.” You might ask him or her: “Are you sure that what you do won't make a change in the way you feel? Do you think you have a better chance of improving your mood and managing your cravings if you keep doing what you have done in the past, or if you try these practices that have helped others?” Help the group member come up with a more helpful thought that would encourage practice.

No one assignment is going to “cure” depression or alcohol/drug problems, but practicing outside of the group will help the group member learn to control his or her negative mood and cravings.

***Get reinforcement from other group members.*** You can ask other group members to help problem-solve. It is likely that other members will volunteer information as to what has helped them to practice.

***Complete the practice within the session.*** Be flexible about finding another way for the person to practice. Maybe he or she can complete the Daily Check In for the whole week just as the session begins, for example. Or ask the individual to practice some of the skills before and after the session. The individual should be reminded that the Daily Check In is best finished on a daily basis. Looking back at the past week's mood is less reliable than completing the Daily Check In each day. But asking members to complete the incomplete scale in-session indicates that you take practice seriously.

***Strike the right balance.*** It is important to give group members the message that practice is important. However, it is also important that they come to the CBT sessions whether they have completed their practice or not. In fact, the group member might tell you that they can't do anything right. Point out that they were successful in coming to the group, and coming to group is a first important step to feeling better. Be warm and supportive of the group member and let them know that you are glad they chose to come to the session whether or not they completed the practice.

If you were part of the CBT group for the last module (“People, Alcohol/Drug Use, and Your Mood”), you have been practicing CBT skills. How is your practice going? At the end of the last module, we asked you to:

- 1. Keep using Catch It, Check It, Change It.***
- 2. Find a place to keep your coping card.***
- 3. Track your mood and coping using the Daily Check In.***

# NEW TOPIC: THOUGHTS CAN BE HARMFUL OR HELPFUL

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## LEADER TIPS

**Time:** 5 minutes

**Group Member's Workbook:** Page 17

**1. Say:** *Thousands of thoughts pass through our heads each day. Thoughts are sentences we tell ourselves. Some are neutral or factual, such as "Today is Monday." Others may be more harmful or helpful because of how they make us feel. We often don't pay attention to all these thoughts, but with practice you can learn to notice your thoughts and decide whether they are harmful or helpful to your mood.*

**2. Introduce** the text about thoughts. **Ask:** *Try to remember some thoughts you have had. What are some other examples of thoughts?*

**3. Introduce** the text about feelings. **Ask:** *What other feelings have you had that aren't listed here?*

**4. Say:** *Identifying thoughts can be tricky at first, but it will get easier. You will see more examples of thoughts as we go through the rest of this module.*

**5. Say:** *Notice the two arrow diagrams in your workbooks. They illustrate the connection between your thoughts and your mood. Harmful thoughts can bring your mood down. Also, when your mood is low, you are more likely to have more harmful thoughts. But helpful thoughts can improve your mood and when you are feeling better, you are more likely to have more helpful thoughts.*

**6. Say:** *All this is not to say that depression is "all in your head." You may be dealing with real things such as recovery from substance abuse, health problems, financial problems, or loss of loved ones. Depression is affected by what you do, how you think, and what happens in your life—and how you react to what happens in your life.*

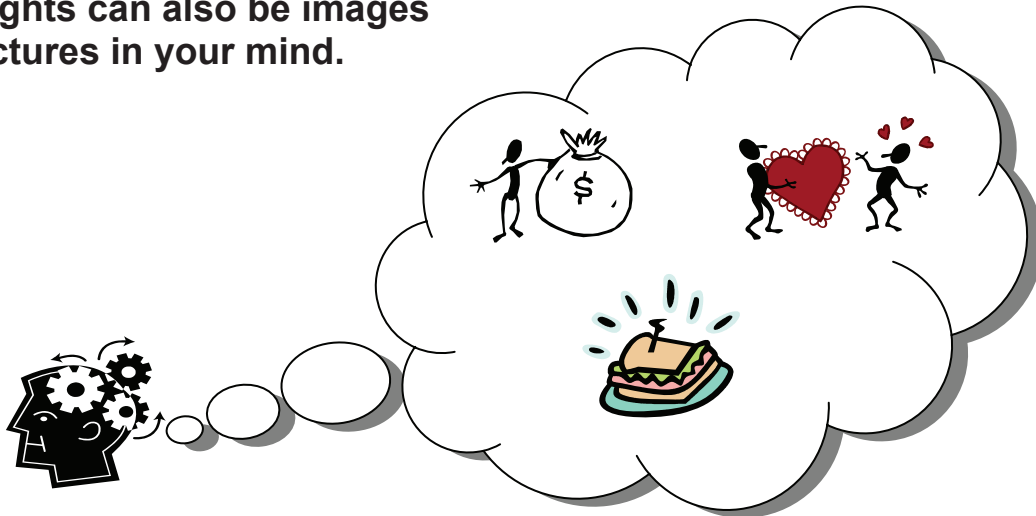
## Thoughts Are Sentences We Tell Ourselves

- I did a good job at work today.
- I will never amount to anything.



I will wear my blue shirt tonight.  
My throat is a little sore.  
This job is taking too long.  
Today is Thursday.  
I can't wait until lunch.  
That movie was really funny.  
I can't handle this without drugs.

## Thoughts can also be images or pictures in your mind.



## Feelings are emotions or moods. They can usually be described with one word.

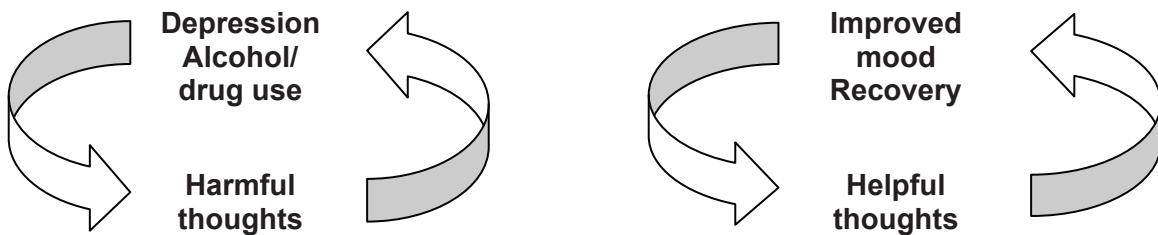
- Happiness
- Sadness
- Anger
- Shame
- Guilt



In this workbook we talk about “**harmful**” and “**helpful**” thoughts. These terms are just shortcuts—a thought is not good or bad, harmful or helpful, all by itself. The power of thoughts is in how they make you feel and act.

A thought that brings your mood down or makes you want to drink or use is ***harmful to you***.

A thought that lifts your mood or supports your recovery is ***helpful to you***.



# Identify Your Harmful Thoughts

## LEADER TIPS

**Time:** 10 minutes

**Group Member's Workbook:** Page 19

**1. Say:** *Let's take a closer look at your thoughts and try to identify some thoughts that bring your mood down. We call these thoughts "harmful thoughts." Can you remember a time in the last week when you felt down? Take a moment and try to picture yourself in the situation you were in when you felt down. If you feel comfortable closing your eyes, that might help you remember. [Wait a moment to allow the group members to picture the moment.] Now, with your eyes still closed, try to remember the thoughts you were having at the time. What was going through your mind? Ok, now open your eyes and write your thoughts on the lines in your workbook.*

**2. Say:** *What thoughts did you notice?* **Write** the group member's thought on the board.

**3. Repeat** the exercise focusing on a time when group members felt like drinking or using.

**4. Say:** *It takes practice, but you can learn to notice your thoughts.* **Review** final text.

Try to remember a time in the last week when you **felt really low**. You may have felt unsure of yourself, sad, or angry. Close your eyes and picture yourself in the situation you were in then. What thoughts were going through your mind at the time you felt low?

**Write your thoughts.**

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Try to remember a time in the last week when you **felt like drinking or using**. Close your eyes and try to picture yourself in the situation you were in then. What thoughts were going through your mind at the time you felt like drinking or using?

**Write your thoughts.**

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As you practice noticing your thoughts, you may find it interesting that not all of the thoughts you have are completely true or helpful. That's ok for now. Later on, we will work on questioning thoughts and changing some thoughts to improve your mood. Like learning any new skill, recognizing and changing harmful thoughts will take some practice.

## LEADER TIPS

**Time:** 5 minutes

**Group Member's Workbook:** Page 20

### Examples of Harmful Thoughts

- 1. Say:** *On the next page is a list with examples of harmful thoughts. Look at the list.*
- 2. Ask:** *Are any of these harmful thoughts similar to thoughts you have had? Which ones?*
- 3. Say:** *Maybe you have other thoughts you would like to add to the list at the bottom of the right-hand column. Take a few minutes and fill in numbers 45, 46, and 47.*
- 4.** After the group is done writing their own thoughts on the lines, **say:** *Who would like to share their thoughts?*

## Examples of Harmful Thoughts

1. I have wrecked my body.
2. My children's problems are my fault.
3. I have worked hard, so I deserve a drink.
4. I have wasted my life.
5. I am weak.
6. Nobody loves me.
7. I'll end up living all alone.
8. I have secrets I can never tell.
9. I had one drink so I might as well keep going.
10. It's no use to try.
11. I am stupid.
12. I am a burden to others.
13. Anybody who thinks I'm nice doesn't know the real me.
14. I'll never get my kids back.
15. I am ugly.
16. I can't express my feelings.
17. I'll never find what I really want.
18. I can't cope with my problems without using.
19. I am worthless.
20. I can't handle this unless I have a drink (or fix or joint).
21. Everything bad always happens to me.
22. My kids hate me.
23. I don't have what it takes.
24. Nobody knows what I have been through.
25. I'll never get over this depression.
26. Things are so messed up that doing anything is pointless.
27. I don't have enough willpower.
28. I've messed up my kids.
29. I wish I were dead.
30. There is no point in getting out of bed.
31. Things are just going to get worse.
32. One drink or hit won't hurt.
33. No matter how hard I try, it is never good enough.
34. Life is unfair.
35. My kids will never forgive me.
36. If I don't see my friends who use, I won't have any friends.
37. I can't provide for my family.
38. I can't control my bad temper.
39. I have wasted my life because I have used drugs or alcohol.
40. I will never have fun again.
41. If I have a relapse, all my hard work for recovery will be wasted.
42. I will always be alone.
43. I don't want to know how bad my health is.
44. I'm ashamed of myself.
45. I don't feel like going to group.

### ***What are your harmful thoughts?***

46. \_\_\_\_\_  
\_\_\_\_\_
47. \_\_\_\_\_  
\_\_\_\_\_
48. \_\_\_\_\_  
\_\_\_\_\_

## LEADER TIPS

**Time: 5 minutes**

**Group Member's Workbook: Page 21**

### **Examples of Helpful Thoughts**

1. **Say:** *Notice the list of helpful thoughts. Take a few minutes to fill in your own helpful thoughts at the bottom of the second column.*
2. After the group is done writing their own thoughts on the lines, **say:** *Who would like to share the thoughts they wrote down?*

## Examples of Helpful Thoughts

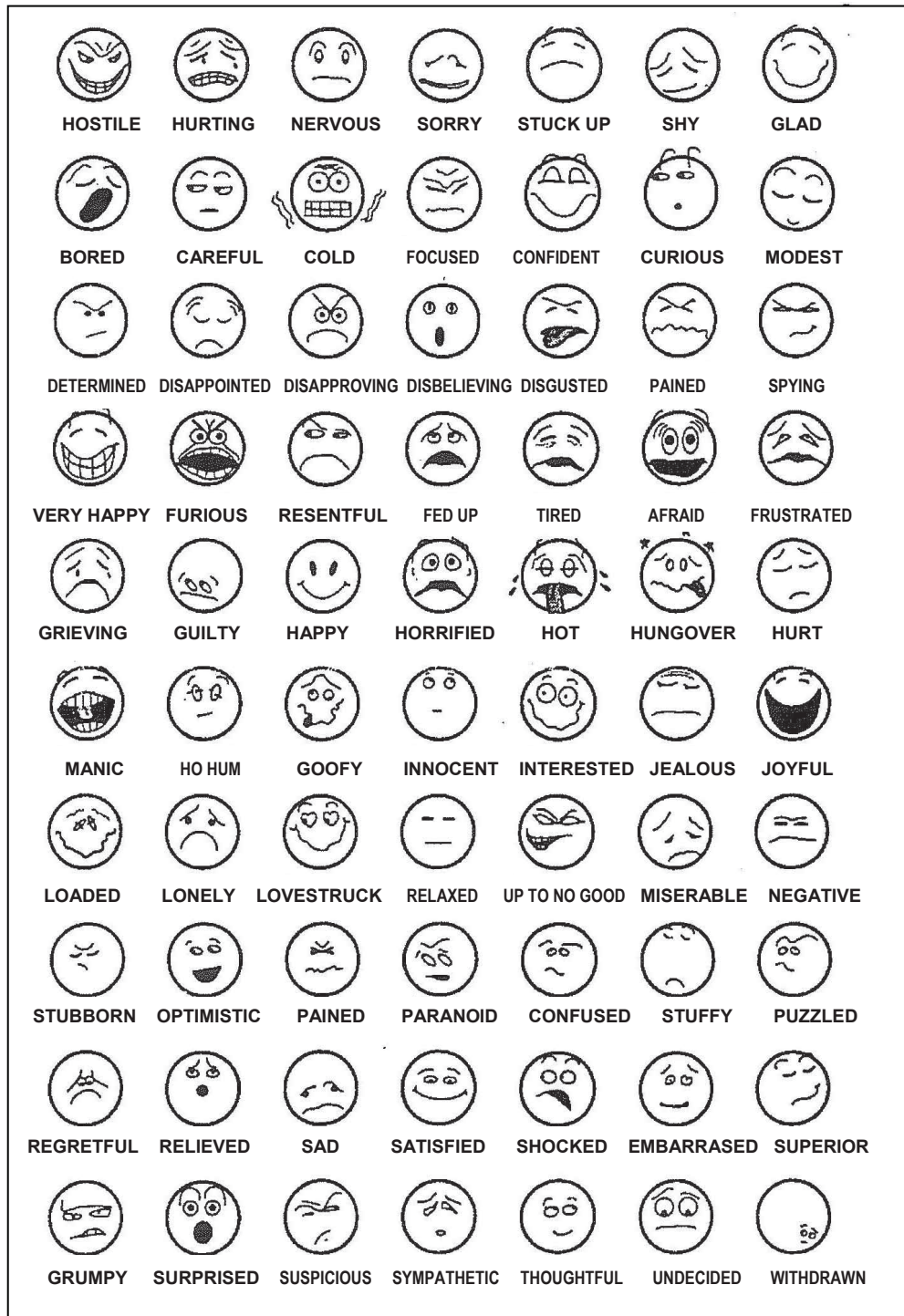
1. It will be fun going to a movie today.
2. It is OK to be good at a few things and not everything.
3. The weather is great today.
4. I did better than I thought.
5. Things are bad right now, but I can do things to make them better.
6. Today is a new day.
7. That was probably a reasonable solution to a tough problem.
8. I am taking a positive step in life by taking care of myself.
9. I am going to give myself credit for trying hard.
10. That was a nice thing for me to do.
11. Today I was there for my kids.
12. I feel healthier now that I haven't been using for a while.
13. It is nice not having to fake being sober—I really am.
14. I can do just about anything if I set my mind to do it.
15. I have great hopes for the future.
16. I have good self-control.
17. Staying sober is a learning process and I am up for the challenge.
18. I handled that situation really well.
19. People are OK once you get to know them.
20. I like to read.
21. I'm easy to get along with.
22. If I can just hold on until [a certain date] I'll be OK.
23. A relaxing evening without using can be enjoyable.
24. I have worked long enough—now it's time to have fun.
25. I'm considerate of others.
26. I have time to accomplish most things I want to do.
27. Someday I'll look back on today and smile.
28. I'm working hard to get my kids back.
29. I can find the strength to handle whatever comes up.
30. I'm a good parent/friend/spouse.
31. I'm a sensitive person.
32. I'm honest.
33. I could probably handle a crisis as well as anyone else.
34. Just because I had one slip does not mean that I can't stay sober.
35. I can be responsible.
36. My experiences have prepared me well for the future.
37. I can begin to change my life today.
38. I'm pretty smart.
39. I can choose to change the future.
40. I am looking forward to that event.
41. I am doing the best I can.
42. I was able to turn down drugs when that person offered them to me.
43. I didn't have even one drink last week.
44. There are things I am grateful for today.
45. If I practice new skills, I can learn to say no to alcohol/drugs.

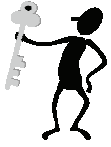
### ***What are your helpful thoughts?***

46. \_\_\_\_\_  
\_\_\_\_\_
47. \_\_\_\_\_  
\_\_\_\_\_
48. \_\_\_\_\_  
\_\_\_\_\_

## Examples of Feelings and Ways of Being

Do the pictures help you remember how you feel sometimes?





# KEY MESSAGES

## LEADER TIPS

**Time: 5 minutes**

**Group Member's Workbook: Page 23**

**1. Say:** *At the end of each session, we will review some important messages from the session. There is also space in your workbook where you can write your own key message.*

**2. Review** the key messages and ask group members if they have any questions or comments.

**3. Help** group members feel hopeful that CBT can help them get over their depression and support recovery.

### ***Key messages from this session include:***

- A thought is a sentence you say to yourself or a picture in your mind. A feeling is an emotion or mood.
- Thoughts are helpful or harmful to you depending on how they make you feel.
- You can learn to notice or “catch” your harmful thoughts.



What do you want to remember about this session?  
**Write your own key messages here.**

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# PRACTICE

## LEADER TIPS

**Time: 10 minutes**

**Group Member's Workbook: Page 24**

**Say:** *I would like to talk about the importance of practicing the skills you learn in the group. Some of you may be thinking: "What do you mean by practice?" Practice means doing brief activities on your own outside of the group that will help you apply what we have talked about in group to your daily life. You can think of the skills you learn here as tools to use in your everyday life to improve your mood. But just like tools, not all of them may work well for you. By trying out your new skills between sessions, you can report back to the group and let us know what worked for you and what didn't work. Then we can come up with ways to make them work better.*

### Keep Track of Your Thinking Each Day

- 1. Say:** *The first step in changing your thoughts, improving your mood, and managing your cravings is to identify those thoughts that are most powerful in terms of your own mood and coping. Your other practice activity is to keep track of your thinking each day.*
- 2. Pass out** index cards (one card for each day between sessions for each person) and one binder clip per person. **Read the directions (practice #2) aloud. Then say:** *You will notice that you also have room in your workbook to write your harmful and helpful thoughts each day. You may use the cards, or the workbook, or both. You can take a few minutes right now and put the plus signs and minus signs on your cards.*
- 3. Say:** *Try not to write down things that are happening to you. Instead, write down what you are thinking that makes you feel better or worse. We hope that you will be able to identify 5–10 thoughts each day. Bring the cards with you for next session. You can use the clip to attach them to your workbook. Take a moment to write down one harmful thought and one helpful thought to get you started.*



## **Daily Check In**

**4. Say:** *Between sessions, we would like all of you to keep track of your mood and coping using the Daily Check In. There is a copy of the Daily Check In in your workbook at the end of every session. With the Daily Check In, you can learn to recognize how you are feeling and how your thoughts and behaviors affect your mood and your ability to cope with challenges to your recovery. By coping, we mean using CBT skills or other helpful strategies to support your sobriety. This will help you to learn which thoughts and behaviors improve your mood and coping and which make them worse.*

**5. Draw** the Daily Check In on the board or ask group members to look in their workbooks.

**6. Say:** *The Daily Check In runs from 1 to 9, with 1 being the lowest mood or coped the worst ever and 9 indicating the best mood or coped the best ever. Each day, you circle the number that indicates what your mood was and another number indicating how well you coped with challenges to your recovery that day. This important tool will help you see the progress you are making in improving your mood and coping with challenges using CBT.*

**7. Go over** the instructions that are on the top of the Daily Check In.

**8. Say:** *We encourage you to do these practice activities, even though you may not feel like it. They are an important part of the treatment process. You are here for only a short time, and eventually you will have completed the entire CBT program. Once you have completed the group therapy, the skills you have learned will help you keep your mood healthy and improve how well you coped with challenges to your recovery. Therefore, it is important that you try them out until you feel confident that you can use them on your own. We will review how your practice went at the beginning of our next session.*

**9. Ask:** *does anybody have any questions about the practice activities? Can we help you think about any obstacles that might get in the way of doing the practice activities?*

This treatment will be successful for you if you learn skills for managing your mood and other coping skills you could use during challenges to your recovery. You will need to practice, just as you would if you were learning to play the piano or a new sport. If you don't practice the skills, you won't learn them. But the more you practice them, the more naturally you will use them, so that eventually you will do it even without making an effort.



Each session's practice will consist of one or more short activities that everybody in the group will try. This session's practice is:

**1. Write down your thoughts each day.**

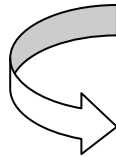
- Use one separate card for each day (using either the separate index cards or the "cards" printed in your workbook).
- Write the day of the week on the cards. For example, if you start tracking your thoughts for the week on a Wednesday, write "Wednesday" (or "W") on the first card.
- Mark one side of the first day's card with a minus sign (-) and write 4–5 negative (harmful) thoughts that you have that day. Mark the other side of the card with a plus sign (+) and on that side write 4–5 positive (helpful) thoughts that you have on the same day. You can look back at the lists of harmful and helpful thoughts for examples.
- Bring your cards with you to the next session.



**2. Track your mood and coping using the Daily Check In.** The Daily Check In and instructions for how to use it are on the next page. The scale provides a "quick" way for you to keep track of your moods and how well you coped with challenges to your recovery. Try to complete the Daily Check In at the same time each day—for example, before you go to sleep each night. As the treatment progresses and as you practice the skills you learn in each session, you will probably find that your mood improves and that you can cope well with challenges to your recovery.

## Example

<b>Thoughts, Day 1</b>	—	
Wednesday		
<hr/>		
(Write in the day of the week.)		
Trying to stay sober is impossible.		
		

Flip the card over



<b>Thoughts, Day 1</b>	+	
Wednesday		
<hr/>		
(Write in the day of the week.)		
Getting sober can be tough. But I will take things one day at a time and try my best.		
		

# DAILY CHECK IN



## Instructions

Today's Date: \_\_\_\_\_

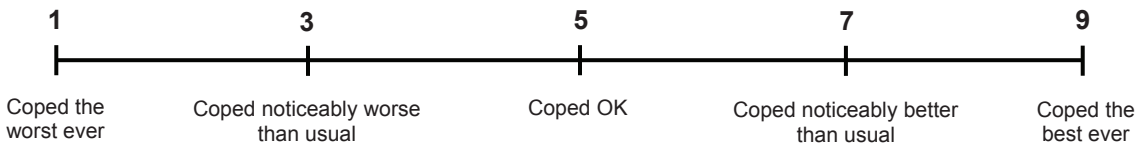
- Keep the scale beside your bed. Before you go to bed, think about your mood and how you coped with challenges to your recovery throughout the day.
- Circle a number on both scales. Try to use all the numbers, not just 1, 3, 5, 7, or 9. There are no wrong answers. Only you know how you have felt each day.
- Did you notice your thoughts? Circle "Yes" or "No" at the bottom.
- If you want to track your mood and how you coped with challenges over a period of time longer than a week, write down your ratings on a calendar.

1.



Write in the day of the week.		_____	_____	_____	_____	_____	_____	_____
<b>Mood</b>	Best mood ever	9	9	9	9	9	9	9
		8	8	8	8	8	8	8
	Noticeably better mood	7	7	7	7	7	7	7
		6	6	6	6	6	6	6
	Ok/average mood	5	5	5	5	5	5	5
		4	4	4	4	4	4	4
	Noticeably worse mood	3	3	3	3	3	3	3
	2	2	2	2	2	2	2	
Lowest mood ever	1	1	1	1	1	1	1	

2.

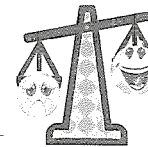


Write in the day of the week.		_____	_____	_____	_____	_____	_____	_____
<b>Coping with challenges to my recovery</b>	Coped the best ever	9	9	9	9	9	9	9
		8	8	8	8	8	8	8
	Coped noticeably better than usual	7	7	7	7	7	7	7
		6	6	6	6	6	6	6
	Coped OK	5	5	5	5	5	5	5
		4	4	4	4	4	4	4
	Coped noticeably worse than usual	3	3	3	3	3	3	3
	2	2	2	2	2	2	2	
Coped the worst ever	1	1	1	1	1	1	1	

3.

Write in the day of the week.	_____	_____	_____	_____	_____	_____	_____
Were you able to notice your harmful thoughts each day?	Yes	Yes	Yes	Yes	Yes	Yes	Yes
	No	No	No	No	No	No	No

# DAILY CHECK IN



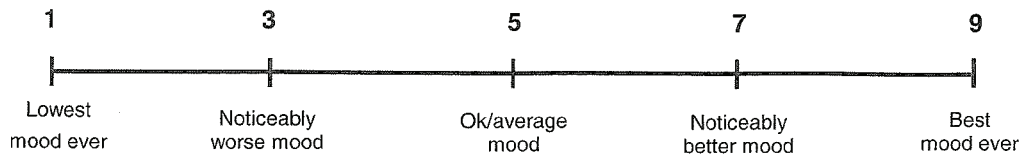
## Instructions

Today's Date: Oct. 24, 2007

- Keep the scale beside your bed. Before you go to bed, think about your mood and how you coped with challenges to your recovery throughout the day.
- Circle a number on both scales. Try to know how you have felt each day. There are no wrong answers. Only
- Did you notice your thoughts? Circle
- If you want to track your mood and how you coped with challenges to your recovery for a time longer than a week, write down your ratings on a calendar.

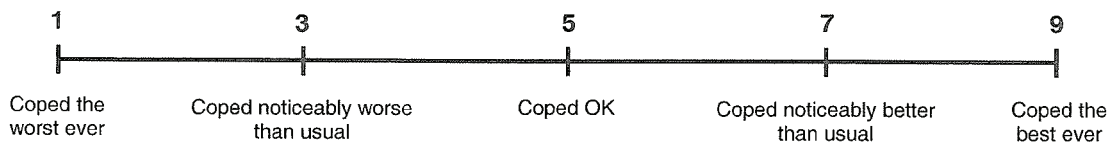
Sample

1.



Write in the day of the week.		<u>W</u>	<u>Th</u>	<u>FRI</u>	<u>SAT</u>	<u>SUN</u>	<u>M</u>	<u>TUES</u>
<b>Mood</b>	Best mood ever	9	9	9	9	9	9	9
		8	8	8	8	8	8	8
	Noticeably better mood	7	7	7	7	7	7	7
		6	6	6	6	6	6	6
	Ok/average mood	5	5	5	5	5	5	5
		4	4	4	4	4	4	4
	Noticeably worse mood	3	3	3	3	3	3	3
	2	2	2	2	2	2	2	
Lowest mood ever	1	1	1	1	1	1	1	1


2.





Write in the day of the week.		<u>W</u>	<u>Th</u>	<u>FRI</u>	<u>SAT</u>	<u>SUN</u>	<u>M</u>	<u>TUES</u>
<b>Coping with challenges to my recovery</b>	Coped the best ever	9	9	9	9	9	9	9
		8	8	8	8	8	8	8
	Coped noticeably better than usual	7	7	7	7	7	7	7
		6	6	6	6	6	6	6
	Coped OK	5	5	5	5	5	5	5
		4	4	4	4	4	4	4
	Coped noticeably worse than usual	3	3	3	3	3	3	3
	2	2	2	2	2	2	2	
Coped the worst ever	1	1	1	1	1	1	1	1


3.


Write in the day of the week.	<u>W</u>	<u>Th</u>	<u>FRI</u>	<u>SAT</u>	<u>SUN</u>	<u>M</u>	<u>TUES</u>
Were you able to notice your harmful thoughts each day?	Yes	Yes	Yes	Yes	Yes	Yes	Yes
	No	No	No	No	No	No	No


<b>Thoughts, Day 1</b>	<b>-</b>	
<hr/>		
(Write in the day of the week.)		


<b>Thoughts, Day 1</b>	<b>+</b>	
<hr/>		
(Write in the day of the week.)		

<b>Thoughts, Day 2</b>	<b>-</b>	
<hr/>		
(Write in the day of the week.)		

<b>Thoughts, Day 2</b>	<b>+</b>	
<hr/>		
(Write in the day of the week.)		


<b>Thoughts, Day 3</b>	<b>-</b>	
<hr/>		
(Write in the day of the week.)		

<b>Thoughts, Day 3</b>	<b>+</b>	
<hr/>		
(Write in the day of the week.)		

**Thoughts, Day 4**      —      


---

(Write in the day of the week.)

**Thoughts, Day 4**      +      

---


(Write in the day of the week.)


**Thoughts, Day 5**      —      


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(Write in the day of the week.)




<b>Thoughts, Day 5</b>	<b>+</b>	
<hr/>		
(Write in the day of the week.)		

<b>Thoughts, Day 6</b>	<b>-</b>	
<hr/>		
(Write in the day of the week.)		

<b>Thoughts, Day 6</b>	<b>+</b>	
<hr/>		
(Write in the day of the week.)		

<b>Thoughts, Day 7</b>	—	
<hr/>		
(Write in the day of the week.)		

<b>Thoughts, Day 7</b>	+	
<hr/>		
(Write in the day of the week.)		



# FEEDBACK

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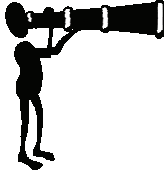
## LEADER TIPS

**Time: 2 minutes**

**Group Member's Workbook: Page 33**

- 1. Encourage** group members to comment on the session. When you plan later sessions, you can think about their comments and, as much as possible, tailor the treatment to the individuals in the group.
- 2. Read aloud** one or two of the questions.

- What was helpful about today's session?
- What was less helpful?
- What was difficult about today's session?
- What suggestions do you have to improve your treatment?
- If you are continuing CBT from a previous module, how have you made changes since beginning the group?



## LOOKING AHEAD

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### LEADER TIPS

**Time: 1 minute**

**Group Member's Workbook: Page 33**

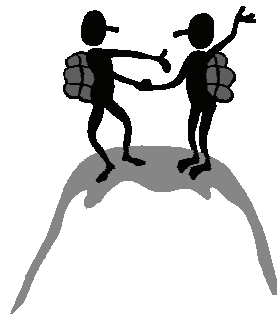
1. The purpose of the preview is to encourage group members to attend the next CBT session by giving them a glimpse of the topic to be covered. Group members are welcome to read ahead.

2. **Say:** *The workbooks are yours to keep, but **please bring them to the next session.***

*In the next session, we will talk more about how understanding some common ways of thinking can help you notice the thoughts you are having when you feel down or have strong cravings. Then you can begin to replace your harmful thoughts with helpful thoughts to help you feel better and manage your cravings.*

*Congratulations for coming to group CBT. Coming to the group is a big step in improving your mood and supporting your recovery.*

In Session 2, we will talk more about how your thoughts, mood, and alcohol/drug use are connected.



# GROUP LEADER SELF-EVALUATION FORM: THOUGHTS, SESSION 1

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## **Instructions**

**Taught/Done:** Were you able to cover the material? If you didn't do this in this session but you do it later, when it is done write in the date you covered it.

**Difficult to Teach:** How hard was it to teach this part of the session? Circle "easy," "OK," or "hard."

	<b>Taught/Done? (circle yes or no)</b>		<b>How difficult was it to lead this part of the session? (circle easy, OK, or hard)</b>		
Welcome	Yes	No	Easy	OK	Hard
Purpose and Outline	Yes	No	Easy	OK	Hard
How Have You Been Feeling?	Yes	No	Easy	OK	Hard
Group Rules	Yes	No	Easy	OK	Hard
Announcements	Yes	No	Easy	OK	Hard
Introductions	Yes	No	Easy	OK	Hard
What Is Depression?	Yes	No	Easy	OK	Hard
What Are Alcohol/Drug Use Problems?	Yes	No	Easy	OK	Hard
What Is Cognitive Behavioral Therapy (CBT)?	Yes	No	Easy	OK	Hard
Review					
Last Module	Yes	No	Easy	OK	Hard
Practice	Yes	No	Easy	OK	Hard
New Topic: Thoughts Can Be Harmful or Helpful					
Thoughts Are Sentences We Tell Ourselves	Yes	No	Easy	OK	Hard
Identify Your Harmful Thoughts	Yes	No	Easy	OK	Hard
Examples of Harmful Thoughts	Yes	No	Easy	OK	Hard
Examples of Helpful Thoughts	Yes	No	Easy	OK	Hard
Key Messages	Yes	No	Easy	OK	Hard
Practice	Yes	No	Easy	OK	Hard
Feedback	Yes	No	Easy	OK	Hard
Looking Ahead	Yes	No	Easy	OK	Hard





## LEADER TIPS

### Materials Needed

- **Group Member's Workbooks** ("Thoughts, Alcohol/Drug Use, and Your Mood")—a few copies to loan in case some group members forgot to bring their own workbooks
- **Pens**—enough for everyone in the group
- **Dry erase board, chalkboard**, or large sheets of paper to present material to group
- **Kleenex** or other facial tissue
- **Index cards**—enough to give everyone in the group seven cards
- **Small binder clips**—enough to give one to every group member—so they can attach their index cards to their workbooks

### Group Leaders' Goals

- Review the connections among thoughts, alcohol/drug use, and mood.
- Help group members begin to notice their thoughts.
- Reinforce the importance of outside practice.

### Welcome Group Members

As group members arrive, greet them by name. Ask them informally how their practice went.

### Purpose and Outline

**Introduce** the Purpose and Outline.



## PURPOSE

- Understand that your thoughts can affect your feelings and your feelings can affect your thoughts.
- Understand that catching and managing your thoughts can help you manage your mood and your cravings to feel better.
- Begin to notice, or “catch” your thoughts.

## OUTLINE

Announcements

Review

New Topic: Your Thoughts, Mood, and Alcohol/Drug Use Are Connected

What You Think Affects How You Feel

How Does Your Mood Affect Drinking/Using?

How Does Drinking/Using Affect Your Mood?

The “Oh, Whatever” Effect

You Can Learn to Notice Your Thoughts

Key Messages

Practice

Feedback

Looking Ahead



## ANNOUNCEMENTS

The group leaders will make any announcements that might be necessary.

Is there anything you need to let the leaders know about?



## REVIEW

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### Last Session

#### LEADER TIPS

**Time: 5 minutes**

**Group Member's Workbook: Page 36**

**1.** It may be difficult for group members to remember what you talked about in the last session. Use this time to remind them of the key messages and to help them understand how this session builds on last session.

**2. Say:** *In the last session, we welcomed new group members, introduced ourselves, and talked about what depression is. We talked about alcohol and drug use problems and cognitive behavioral therapy—CBT for short. We also talked about how thoughts can affect how you feel and your cravings.*

**3. Ask:** *Do you remember the circle diagram with arrows? It shows that there are connections among thoughts, mood, and cravings. And since the arrows point both ways, it shows that your thoughts can affect your mood and cravings, and your mood and cravings can affect your thoughts. Can anyone summarize what this diagram means or give an example? [Have a group member explain what the CBT circle is, if possible.]*

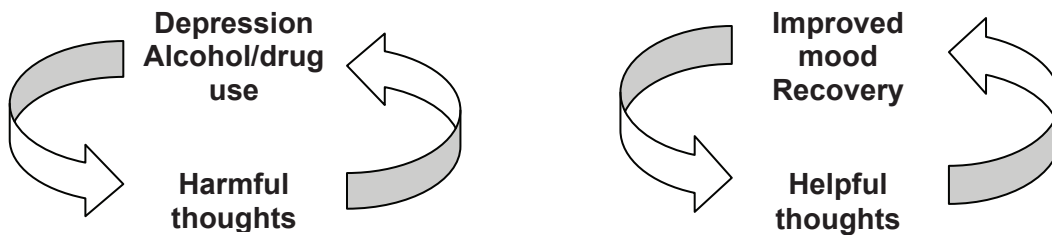
**4. Read aloud** the key messages or ask for a volunteer to read them.

**5. Ask:** *Does anybody have any questions?*

***Key messages from last session are:***

- A thought is a sentence you say to yourself or a picture in your mind. A feeling is an emotion or mood.
- Thoughts are helpful or harmful to you depending on how they make you feel.
- You can learn to notice or “catch” your harmful thoughts.

***Today we will talk more about the links among your thoughts, mood, and cravings.***



# Practice

## LEADER TIPS

**Time: 20 minutes**

**Group Member's Workbook: Page 37**

### Keep Track of Your Thoughts Each Day

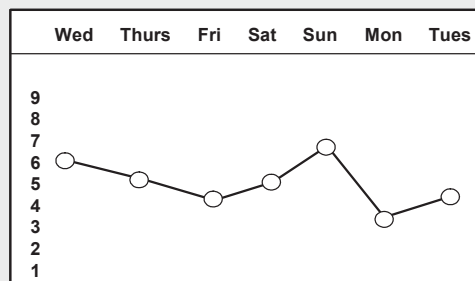
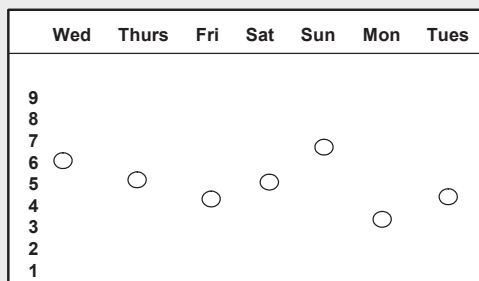
**1. Ask and discuss:** *Was it difficult to keep track of your harmful and helpful thoughts each day? Who would like to share some harmful and helpful thoughts?*

### Daily Check In

Ask group members about how they did tracking their moods and coping on their Daily Check In. Make graphs based on one group member's Daily Check In.

**2.** Start the graphs with the day of the week the group meets. If your group meets on a Wednesday, write "Wednesday" or "Wed" in the first space at the top of the graph.

**3.** Ask for a volunteer from the group to share the numbers **related to mood** on his or her scale. Make a graph on the board like the example below. If the group member's mood was a 6 on the first day, mark a dot at 6 below "Wed."

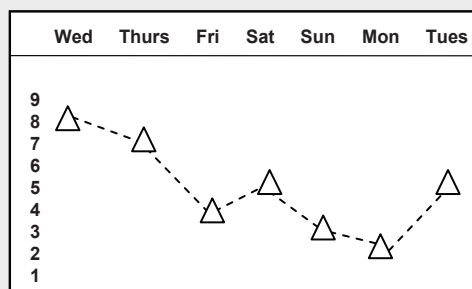
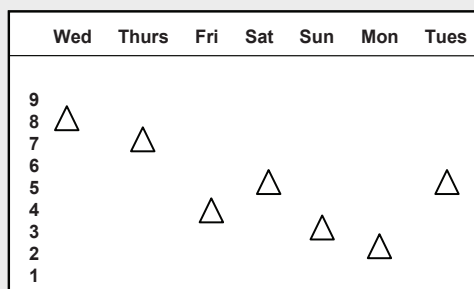


**4.** When you are finished adding dots that represent the volunteer's mood for each day, draw lines between the dots to show how mood can change up and down.

**5. Possible follow-up questions:** What did you notice about your mood? Your mood was the lowest on [day]. What were your thoughts on that day [integrate thoughts recorded on index cards or workbooks]? Your mood was higher on [day]. What thoughts were you having on that day? What do you notice about the connection between your thoughts and your mood? Is there a weekly pattern? Are some days more likely to bring about low moods? If so, what tools can you use to prevent low moods?

**6.** Repeat the process for coping, using a new graph. Ask the same volunteer to share the numbers **related to coping** on his or her scale. Add dots to the new graph. If the group member’s coping was 8 on the first day, mark a dot at 8 below “Wed.”

**7.** When you are finished adding dots that represent the volunteer’s coping for each day, draw lines between the dots to show how coping can change up and down.



**8. Possible follow-up questions:** *What did you notice about how well you coped with challenges? You coped very well on [day]. What kinds of helpful thoughts were you having on that day? What was your mood? What do you notice about the connections among thoughts, mood, and how you coped?*

**9. Note: What to do if group members don’t do their practice**

Most group members will do their practice activities; you should begin with the assumption that they will. Checking early in each session on the practice is the best way to let group members know how important their practice is. However, there may be individuals in the group who consistently do not practice. Identify this problem as early as possible.

Last session, we asked you to complete these practice activities.  
How did your practice go?

***1. Write down your thoughts each day.***

***2. Track your mood and coping using the Daily Check In.***

# NEW TOPIC: YOUR THOUGHTS, MOOD, AND ALCOHOL/DRUG USE ARE CONNECTED

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## What You Think Affects How You Feel

### LEADER TIPS

**Time: 15 minutes**

**Group Member's Workbook: Page 38**

**1. Say:** *Look at the cartoons in your workbooks. What do you think is happening in the pictures? What might the person be thinking in the first cartoon? In the second cartoon? What is the person's mood like after he has these thoughts?*

Some examples of possible thoughts:

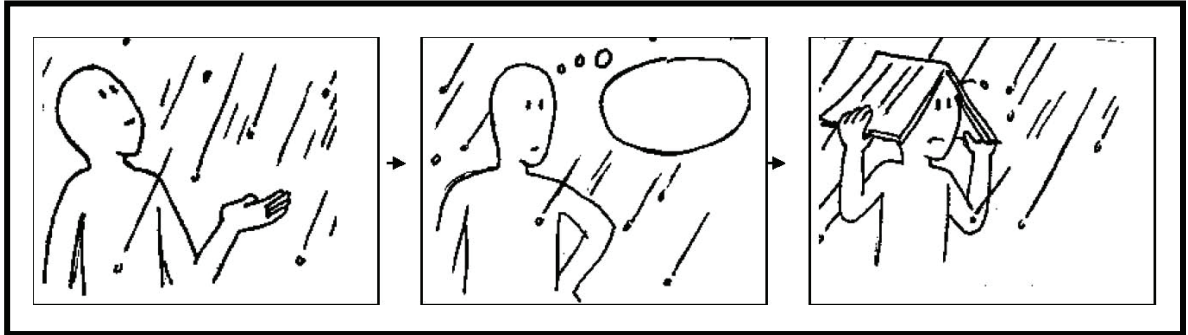
- First cartoon: "I hate rain. I'm getting all wet, and I'll probably catch a cold."
- Second cartoon: "Oh, how fun, it's raining. I can run home, make hot chocolate, and feel cozy."

**2. Say:** *The person in the cartoons can't change what is real—it is raining. But he can change what he thinks about the rain, and that can change his mood. When he had more helpful thoughts, his mood was better.*

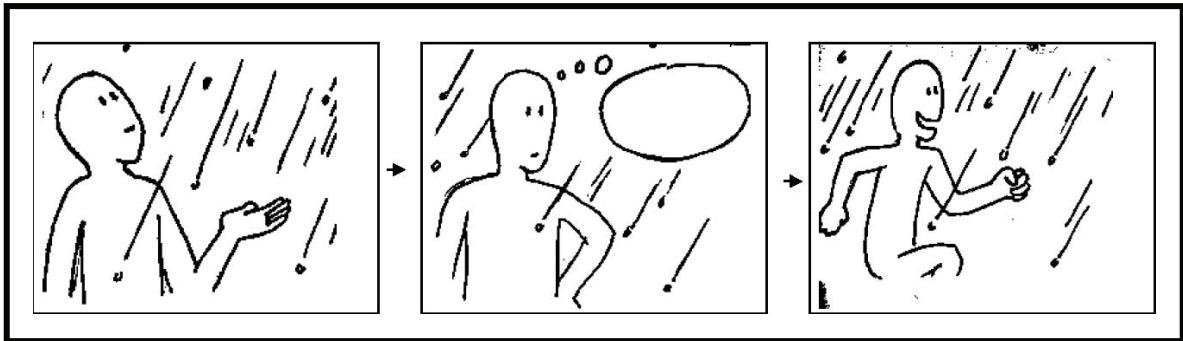
**3. Say:** *On the other hand, CBT doesn't expect you to see the world through rose-colored glasses. But it will teach you to notice your thoughts, identify your harmful thinking habits, and choose helpful thoughts that improve your mood and decrease your cravings. It's important to remember that EVERYONE has BOTH helpful and harmful thoughts so this is normal. You are in no way "bad" if you have harmful thoughts. The most important thing, as we will learn in this module, is how you manage or "work with" your harmful thoughts and change them to more helpful thoughts.*

Look at the cartoons below. What do you think the person is thinking in each cartoon? (There are no right or wrong answers.)

1.



2.



- The person was faced with the same reality in both cartoons: it is raining.
- The person's mood was different in the two cartoons.
- Why did the person have different moods?

***Your mood can be improved and your cravings decreased by how you think and how you react to what happens in your life.***



## How Does Your Mood Affect Drinking/Using?

### LEADER TIPS

**Time: 15 minutes**

**Group Member's Workbook: Page 39**

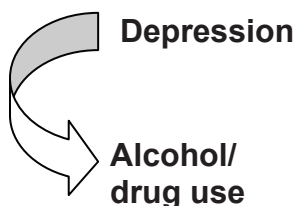
**1. Say:** *Have you noticed any connection between your mood and your use of alcohol or drugs? Let's explore the idea of a connection. Think back. Can you remember a time when you were feeling down and you decided to use drugs or have a drink in order to feel better or stop the pain?*

**2. Give** the group time to think. Read aloud question #1 and ask group members how they might answer it. Write their answers on the board using one column labeled "Feelings" and one column labeled "Thoughts." Ask the group members to write their answers in the space in their workbooks. Go over the second question together.

**3. Ask:** *What do you notice about the connection between your thoughts and feelings, and your decision to drink or use?*

Group members should start to see that feeling depressed can lead to thoughts and feelings that make it more likely they will want to use.

***Let's find out how your mood affects your use of alcohol/drugs.***  
Can you remember a time when you...



- Felt down or depressed?  
**and then**
- Used alcohol or drugs, even though you were trying not to?

1. What **feelings** were you having **before** you used alcohol/drugs? (For example, were you feeling sad, anxious, fearful, guilty, ashamed, angry?)



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2. What **thoughts** were you having **before** you used alcohol/drugs? (For example, “What’s the point of trying anymore?”)



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***What do you notice about the connections between your thoughts and feelings, and your decision to drink or use?***

## How Does Drinking/Using Affect Your Mood?

### LEADER TIPS

**Time:** 15 minutes

**Group Member's Workbook:** Page 41

**1. Say:** *OK, we just talked about what can happen when you are feeling down. You may be more likely to use alcohol or drugs. Now let's look at this connection from the other side: How does drinking or using affect your mood?*

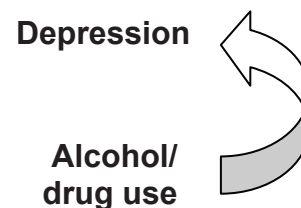
**2. Say:** *Think back to a time when you drank or used. How did you feel **after the high wore off**?*

Give the group time to think. Introduce question #1. Write their answers on the board, again using columns for "Feelings" and "Thoughts," and ask the group to write their answer in the space in their workbooks. Go through the rest of the questions together.

**3. Ask:** *What do you notice about the connections between your decision to drink or use and your thoughts and feelings?* Group members should start to see that using drugs or alcohol is often eventually followed by feelings of sadness and other symptoms of depression.

Just as your mood can affect your use of alcohol or drugs, using alcohol or drugs can affect your mood. Are you more likely to feel down after using alcohol or drugs?

Recall a time when you used alcohol or drugs. ***Now think about how you felt after you used alcohol/drugs (when the high wore off).***



1. What **feelings** did you have? For example, did you feel sad, ashamed, guilty, hopeless, irritable, or down on yourself?

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2. What **thoughts** did you have? Can you remember a specific thought? For example, “I will always be a drunk” or “I keep messing up” or “I’ll never be clean, I might as well keep using,” or “I deserve to suffer the rest of my life because of all the bad things I have done.”

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3. Did you notice changes in:

- How your body felt?       Appetite?       Sleep?  
 Energy level?       Your ability to think and make decisions?



***What do you notice about the connections between your decision to use alcohol or drugs and your thoughts and feelings?***

## The “Oh, Whatever” Effect

### LEADER TIPS

**Time:** 10 minutes

**Group Member’s Workbook:** Page 43

1. **Review the text** on this page.
2. **Ask:** *Can any of you think of a time this has happened to you?* Allow discussion.
3. **Remind** group members of the CBT circle (on the next page). **Say:** *In Session 1, you saw that harmful thoughts can lead to a destructive cycle. Today let’s see how the circle idea can be helpful to you too.*
4. **Review** the text and the circle.

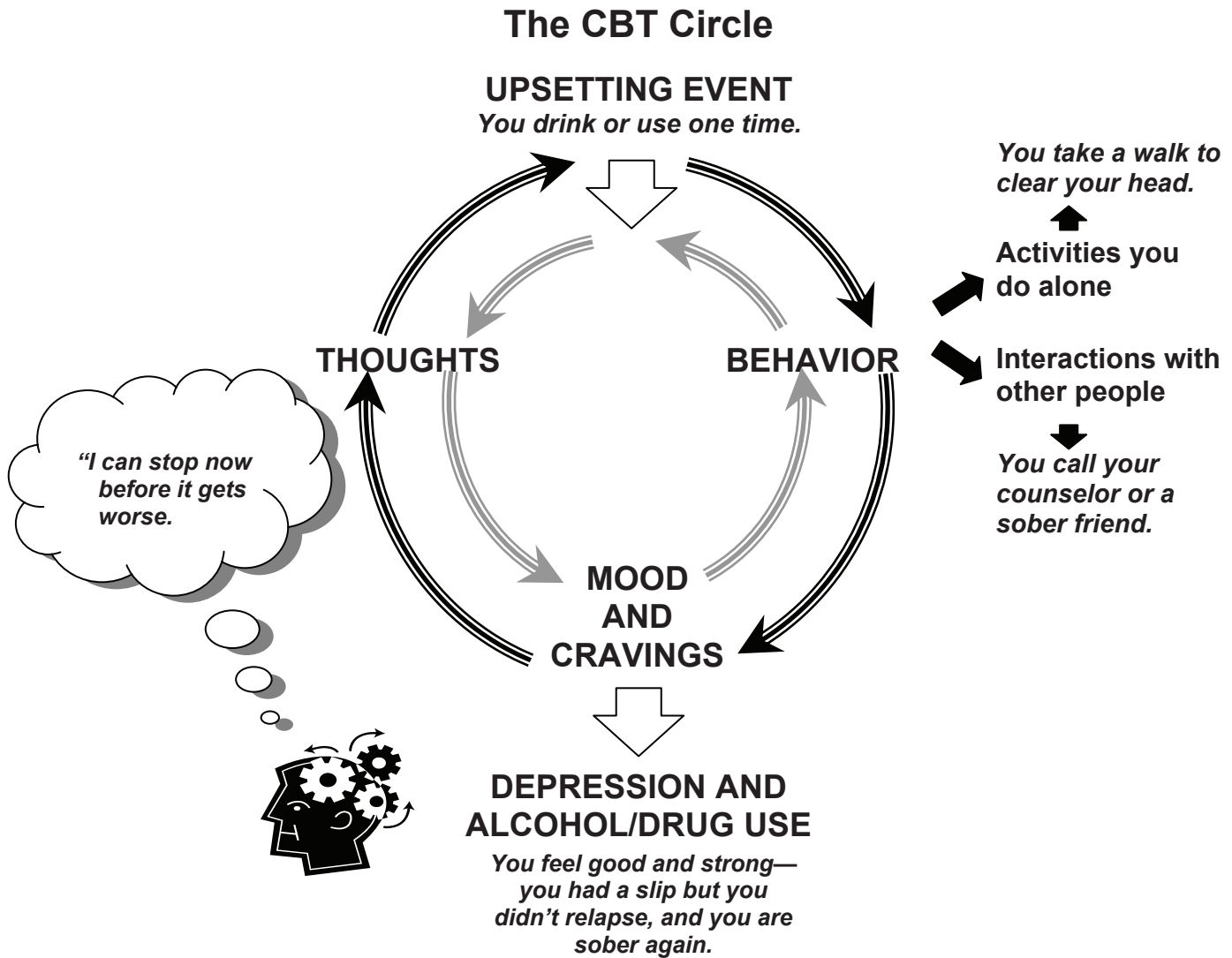
### ***Has this ever happened to you?***

Pat is trying to quit drinking or using. Pat has been in recovery for awhile. But one day Pat thinks, “Just one drink or hit won’t hurt, I deserve it” and Pat has a drink or uses. Pat then feels bad, ashamed, and guilty. Instead of stopping after one mistake, Pat says, “Oh, whatever, I already blew it” and continues to drink or use. Pat enters the destructive cycle of harmful thoughts, feelings, and behavior.

**We call this the “Oh, Whatever” effect.**

**What could you do next time instead of saying “Oh, whatever”?**

You can use the cycle of *helpful thoughts* and behavior to help you resist your cravings.



## You Can Learn to Notice Your Thoughts

### LEADER TIPS

**Time:** 20 minutes

**Group Member's Workbook:** Page 45

**1. Introduce** the text “Catch It, Check It, Change It.” **Ask** for questions as you discuss the material.

**2. Say:** *We will be working with the idea of catching your thoughts, checking your thoughts, and changing your thoughts throughout the module.*

CBT teaches you how to manage your thoughts to improve your mood and support your recovery. But many people find that it is difficult to know what their thoughts are in the first place!

You have been practicing how to notice, or “**catch**,” a thought. The next steps will be to “**check**” the thought out and then “**change**” the thought if it is harmful to you. We call this approach Catch It, Check It, Change It. A summary of what it means to “catch,” “check,” and “change” a thought is presented on the next page. “Catch It, Check It, Change It” will be explained in further detail and practiced later in this module.



## 1. Catch It

The first step is to notice—or “catch”—your thoughts.

If you find that your feelings are easier to catch than your thoughts, you can use your feelings as a signal to stop and focus on what you are thinking. For example, when you notice that your mood changes or that you feel sad or angry, stop. Ask yourself some questions.



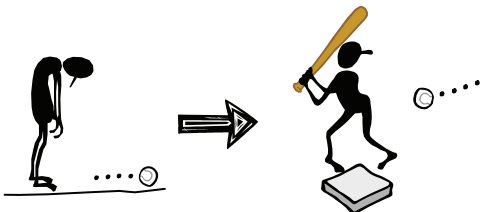
- What thought was I having when I noticed a change in my mood?
- What was happening at the time?



## 2. Check It

CBT will teach you to examine your thought more closely. What evidence do you have against your thought being true? How could your thought be more accurate (i.e., true), complete (i.e., includes all the facts?), and balanced (i.e., fair and accurate)?

## 3. Change It



How could you change your harmful thought? What helpful thought could replace your harmful thought?

If you find it hard to believe your helpful thought to be true, this is normal and will get easier with time.





## KEY MESSAGES

### LEADER TIPS

**Time: 5 minutes**

**Group Member's Workbook: Page 47**

1. **Say:** *Today we have talked about how you can learn to notice or “catch” your thoughts and about how your thoughts, feelings, mood, and cravings are connected.*
2. **Read aloud** the key messages and ask group members if they have questions or comments.

### **Key messages from this session include:**

- You can use your helpful thoughts to improve your mood and decrease your cravings.
- Your mood can affect your drinking/using.



ALCOHOL/DRUG USE

- Drinking/using can affect your mood.

ALCOHOL/DRUG USE





What do you want to remember about this session?  
**Write your own key messages here.**

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# PRACTICE

## LEADER TIPS

**Time: 10 minutes**

**Group Member's Workbook: Page 49**

### Keep Track of Your Thinking Each Day

- 1. Say:** *The first step in changing your thoughts, improving your mood, and managing your cravings is to identify those thoughts that are most powerful in terms of your own mood and cravings. Your other practice activity is to continue to practice keeping track of your thinking each day.*
- 2. Pass out** index cards, seven cards for each person, and one binder clip per person. **Read the directions (practice #2) aloud. Then say:** *You also have room in your workbook to write your harmful and helpful thoughts each day. You may use the cards, or the workbook, or both. You can take a few minutes right now and put the plus signs and minus signs on your cards.*
- 3. Say:** *Try not to write down things that are happening to you. Instead, write down what you are thinking that makes you feel better or worse. Thoughts are not just what is happening (for example, "it's raining."). Thoughts are what you tell yourself about what is happening (for example, "it's raining and that is terrible!") We expect that you will be able to identify 5–10 thoughts each day. Bring the cards with you for next session. You can use the clip to attach them to your workbook. Take a moment to write down one harmful and one helpful thought to get you started.*

### Daily Check In

- 4. Read aloud** the directions for the Daily Check In.
- 5. Remind** the group that it is important that they do the practice activities. **Ask** the group members if they have any questions.

**1. Write down your thoughts each day.**

**2. Track your mood and coping using the Daily Check In.**

Notice at the bottom of the Daily Check In a place where you answer “Yes” or “No” to whether you were able to notice your harmful thoughts each day. Of course you won’t notice every thought that you have in the course of a day—but try to become more aware of what your thoughts are when you are more depressed. Eventually, you may notice that on the days when you have fewer negative thoughts, your mood will be better.

# DAILY CHECK IN

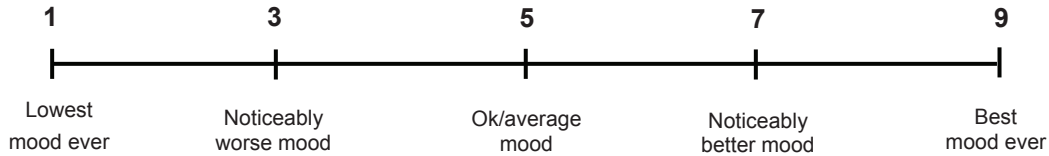


## Instructions

Today's Date: \_\_\_\_\_

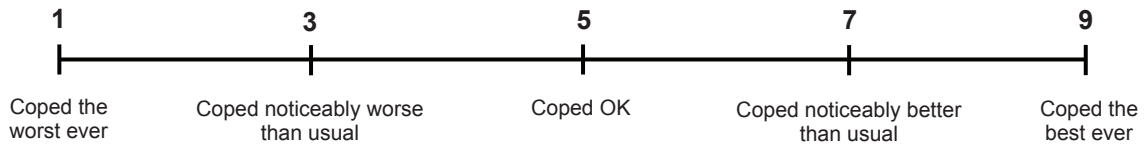
- Keep the scale beside your bed. Before you go to bed, think about your mood and how you coped with challenges to your recovery throughout the day.
- Circle a number on both scales. Try to use all the numbers, not just 1, 3, 5, 7, or 9. There are no wrong answers. Only you know how you have felt each day.
- Did you notice your thoughts? Circle "Yes" or "No" at the bottom.
- If you want to track your mood and how you coped with challenges over a period of time longer than a week, write down your ratings on a calendar.

1.



Write in the day of the week.		_____	_____	_____	_____	_____	_____
<b>Mood</b>	Best mood ever	9	9	9	9	9	9
		8	8	8	8	8	8
	Noticeably better mood	7	7	7	7	7	7
		6	6	6	6	6	6
	Ok/average mood	5	5	5	5	5	5
		4	4	4	4	4	4
	Noticeably worse mood	3	3	3	3	3	3
	2	2	2	2	2	2	
Lowest mood ever	1	1	1	1	1	1	1


2.





Write in the day of the week.		_____	_____	_____	_____	_____	_____
<b>Coping with challenges to my recovery</b>	Coped the best ever	9	9	9	9	9	9
		8	8	8	8	8	8
	Coped noticeably better than usual	7	7	7	7	7	7
		6	6	6	6	6	6
	Coped OK	5	5	5	5	5	5
	Coped noticeably worse than usual	4	4	4	4	4	4
	Coped the worst ever	3	3	3	3	3	3
	2	2	2	2	2	2	
	1	1	1	1	1	1	1

3.

Write in the day of the week.	_____	_____	_____	_____	_____	_____	_____
Were you able to notice your harmful thoughts each day?	Yes	Yes	Yes	Yes	Yes	Yes	Yes
	No	No	No	No	No	No	No

<b>Thoughts, Day 1</b>	<b>—</b>	
<hr/>		
(Write in the day of the week.)		

<b>Thoughts, Day 1</b>	<b>+</b>	
<hr/>		
(Write in the day of the week.)		

<b>Thoughts, Day 2</b>	<b>—</b>	
<hr/>		
(Write in the day of the week.)		

## Thoughts, Day 2

+



---

(Write in the day of the week.)

## Thoughts, Day 3

-



---

(Write in the day of the week.)

## Thoughts, Day 3

+



---

(Write in the day of the week.)

## Thoughts, Day 4

—



---

(Write in the day of the week.)

## Thoughts, Day 4

+



---

(Write in the day of the week.)

## Thoughts, Day 5

—



---

(Write in the day of the week.)



**Thoughts, Day 5**

+



---

(Write in the day of the week.)

**Thoughts, Day 6**

-



---

(Write in the day of the week.)


**Thoughts, Day 6**


+



---

(Write in the day of the week.)

<b>Thoughts, Day 7</b>	<b>—</b>	
<hr/>		
(Write in the day of the week.)		

<b>Thoughts, Day 7</b>	<b>+</b>	
<hr/>		
(Write in the day of the week.)		



# FEEDBACK

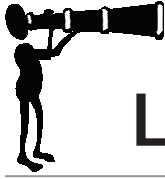
## LEADER TIPS

**Time: 2 minutes**

**Group Member's Workbook: Page 56**

Before ending the group, ask group members to comment on the session.

- What was helpful about today's session?
- What was less helpful?
- What suggestions do you have to improve your treatment?



## LOOKING AHEAD

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### LEADER TIPS

**Time: 1 minute**

**Group Member's Workbook: Page 56**

1. **Read aloud** the text.
2. **Congratulate** group members for attending the group.

We have talked about how to catch your thoughts. In Session 3 we will begin to talk about how to “check” your thoughts to evaluate whether they are completely true.



# GROUP LEADER SELF-EVALUATION FORM: THOUGHTS, SESSION 2

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## **Instructions**

**Taught/Done:** Were you able to cover the material? If you didn't do this in this session but you do it later, when it is done write in the date you covered it.

**Difficult to Teach:** How hard was it to teach this part of the session? Circle "easy," "OK," or "hard."

	<b>Taught/Done? (circle yes or no)</b>		<b>How difficult was it to lead this part of the session? (circle easy, OK, or hard)</b>		
Welcome	Yes	No	Easy	OK	Hard
Purpose and Outline	Yes	No	Easy	OK	Hard
Announcements	Yes	No	Easy	OK	Hard
Review					
Last Session	Yes	No	Easy	OK	Hard
Practice	Yes	No	Easy	OK	Hard
New Topic: Your Thoughts, Mood, and Alcohol/Drug Use Are Connected					
What You Think Affects How You Feel	Yes	No	Easy	OK	Hard
How Does Your Mood Affect Drinking/Using?	Yes	No	Easy	OK	Hard
How Does Drinking/Using Affect Your Mood?	Yes	No	Easy	OK	Hard
The "Oh, Whatever" Effect	Yes	No	Easy	OK	Hard
You Can Learn to Notice Your Thoughts	Yes	No	Easy	OK	Hard
Key Messages	Yes	No	Easy	OK	Hard
Practice	Yes	No	Easy	OK	Hard
Feedback	Yes	No	Easy	OK	Hard
Looking Ahead	Yes	No	Easy	OK	Hard





## LEADER TIPS

### Materials Needed

- **Group Member’s Workbooks** (“Thoughts, Alcohol/Drug Use, and Your Mood”)—a few copies to loan in case some group members forgot to bring their own workbooks
- **Pens**—enough for everyone in the group
- **Dry erase board, chalkboard**, or large sheets of paper to present material to group
- **Kleenex** or other facial tissue
- **The PHQ-9 depression measure**—enough copies for everyone in the group

### Group Leaders’ Goals

- Help group members identify their own habits of harmful thinking.
- Give group members tools for examining their thoughts and deciding if they are harmful or helpful.
- Help group members feel hopeful that they can notice their harmful thoughts, examine them, and change them.

### Welcome Group Members

1. As group members arrive, greet them by name. Ask them informally how their practice went.

2. **Pass out** the PHQ-9 depression measure. Ask group members to fill them out, put their names on them, and return them to you. Tell group members that you will talk more about the questionnaire later.

Scan the questionnaires quickly as you collect them. Notice any major changes in the severity of group members’ depression symptoms, including thoughts of suicide. If a group member reports thoughts of suicide, follow the procedures that you have worked out with your supervisor in advance regarding how to handle these situations. Often this involves having one group leader meet privately with the client either during group or immediately following to further assess the client’s risk of suicide or “handing off” the client to another clinician who will conduct this assessment. Consult with your supervisor immediately in the case of a client who is suicidal.

### Purpose and Outline

**Introduce** the Purpose and Outline.



## PURPOSE

- Identify some common habits of harmful thinking.
- Notice your own habits of harmful thinking.
- Learn to manage your thoughts using “Catch It, Check It, Change It.”

## OUTLINE

Announcements

How Have You Been Feeling?

Review

New Topic: How to Identify Harmful Thoughts

Common Habits of Harmful Thinking

Harmful Thoughts Are Not Accurate, Complete, and Balanced

Catch It, Check It, Change It

Key Messages

Practice

Feedback

Looking Ahead



## ANNOUNCEMENTS

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The group leaders will make any announcements that might be necessary.

Is there anything you need to let the leaders know about?

# HOW HAVE YOU BEEN FEELING?

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## LEADER TIPS

**Time: 5 minutes**

**Group Member's Workbook: Page 58**

- 1. Introduce** the text in the Group Member's Workbook.
- After the session, **compare** each group member's PHQ-9 scores with his or her previous scores (if the group member has filled out the questionnaire at a previous session). This comparison will allow you to monitor each group member's depression.

**Note:** In addition to the PHQ-9, choose another measure to monitor how group members are progressing in their recovery. See the Group Leader's Introduction for a discussion of how to select a measure that supplements the PHQ-9. Compare current and previous scores as you would with the PHQ-9 measure.



You filled out a questionnaire at the beginning of the session, the “Patient Health Questionnaire”—PHQ-9 for short.

You will fill out the questionnaire before the group begins at Sessions 1, 3, and 5 of each CBT module. The questionnaire allows you and your group leaders to keep track of how you are feeling while you are attending the group.



## REVIEW

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### Last Session

#### LEADER TIPS

**Time:** 5 minutes

**Group Member's Workbook:** Page 59

**1. Ask:** *Can anybody remind the group of what ideas the rain cartoon illustrates for us?*

If nobody volunteers, remind the group that the characters' moods were different because they thought about the rain differently.

**2. Say:** *We also talked about two other important ideas. First, when you are depressed you are more likely to drink or use. And when you drink or use, you are more likely to feel depressed.*

**3. Read aloud** the key messages or ask for a volunteer to read the messages.

**4. Ask:** *Does anybody have any questions?*

**Key messages from last session were:**

- You can use your helpful thoughts to improve your mood and decrease your cravings.



- Your mood can affect your drinking/using.



- Drinking/using can affect your mood.



# Practice

## LEADER TIPS

**Time: 20 minutes**

**Group Member's Workbook: Page 60**

### Keep Track of Your Thoughts Each Day

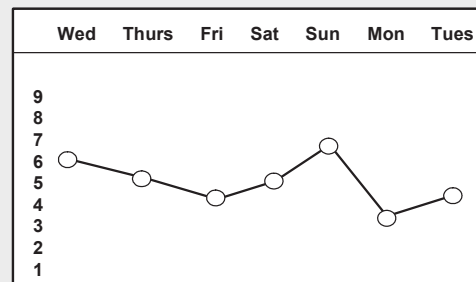
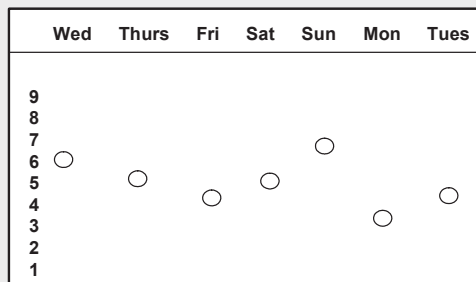
**1. Ask and discuss:** *Was it difficult to keep track of your harmful and helpful thoughts each day?*

### Daily Check In

Ask group members about how they did tracking their moods and coping on their Daily Check In. Make graphs based on one group member's Daily Check In.

**2.** Start the graphs with the day of the week the group meets. If your group meets on a Wednesday, write "Wednesday" or "Wed" in the first space at the top of the graph.

**3.** Ask for a volunteer from the group to share the numbers **related to mood** on his or her scale. Make a graph on the board like the example below. If the group member's mood was a 6 on the first day, mark a dot at 6 below "Wed."

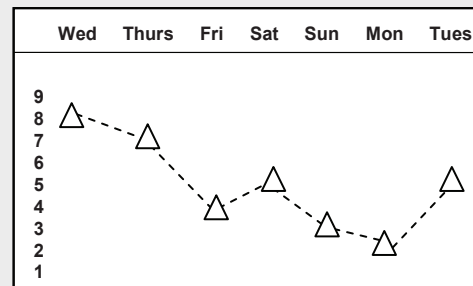
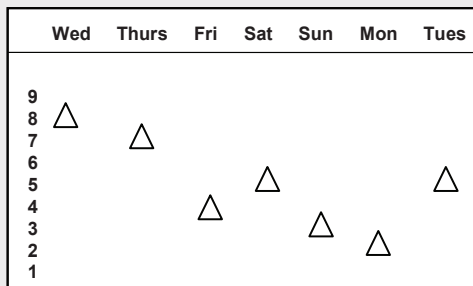


**4.** When you are finished adding dots that represent the volunteer's mood for each day, draw lines between the dots to show how mood can change up and down.

**5. Possible follow-up questions:** *What did you notice about your mood? What thoughts were you having on the day your mood was lowest? Your mood was higher on [day]. What thoughts were you having on that day? What do you notice about the connection between your thoughts and your mood? Is there a weekly pattern? Are some days more likely to bring about low moods? If so, what tools can you use to prevent low moods?*

**6.** Repeat the process for coping, using a new graph. Ask the same volunteer to share the numbers **related to coping** on his or her scale. Add dots to the new graph. If the group member’s coping was 8 on the first day, mark a dot at 8 below “Wed.”

**7.** When you are finished adding dots that represent the volunteer’s coping for each day, draw lines between the dots to show how coping can change up and down.



**8. Possible follow-up questions:** *What did you notice about how well you coped with challenges? You coped very well on [day]. What kinds of helpful thoughts were you having on that day? What was your mood? What do you notice about the connections among thoughts, mood, and how you coped?*

**9. Note:** Depending on the size of the group, you may choose to chart the Daily Check In of all group members or just one or two. Some group members will be eager to share each week, but don’t focus only on them. In the course of the six-session Thoughts module, encourage as many group members as possible to share their Daily Check In—even those who are shy and less vocal. For each member who shares, try to connect thoughts, mood, and coping. Have the person describe the event and his or her thinking, and help him or her to change negative thinking. The point is to teach how to apply the CBT skills to specific, real-life situations, but not necessarily to solve every difficult situation. (This would be an example of all-or-nothing thinking: “*If CBT doesn’t solve all my problems, then it doesn’t work.*”)

At the end of the last session, we asked you to do the following practice activities.

- 1. Write down your thoughts each day.***
- 2. Keep track of your moods and coping on the Daily Check In.***

# NEW TOPIC: HOW TO IDENTIFY HARMFUL THOUGHTS



## Common Habits of Harmful Thinking

### LEADER TIPS

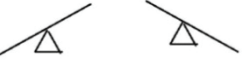
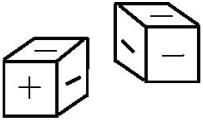
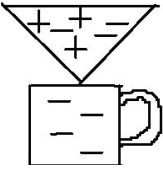
**Time:** 30 minutes

**Group Member's Workbook:** Page 61

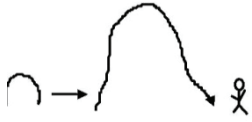

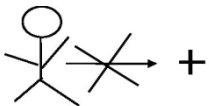
- 1. Say:** *Let's talk about some common categories of harmful thinking. Understanding these will help you notice your harmful thoughts and change them to helpful thoughts.*
- 2. Say:** *The first common way of thinking is called "All-or-nothing" thinking. The picture shows teeter-totters that are completely off balance.*
- 3. Read aloud** the text in the second column (under the heading "Catch' the thought") that goes with all-or-nothing thinking. **Say:** *Does everybody understand how all-or-nothing thinking could make your mood worse? Can anybody think of another example of this type of thinking?*
- 4.** Do the same with the other categories—**read the text** in the **second column** aloud. As you describe each category, ask the group if they can suggest an example.
- 5. Say:** *Now let's take a closer look at some of these ways of thinking. Which categories of harmful thoughts do you tend to have? Could you share a thought that you have had that fits in that category? OR Think back to the harmful thoughts you tracked after last session. Let's see if the harmful thoughts you wrote down fall into one of these categories.* Then read aloud the text in the **third column** (under the heading "Check' the thought") that goes with that category. Work to begin to examine the group members' thoughts using these questions. Do the same for several categories that group members would like to discuss, as time permits.
- 6.** When a group member offers a thought, ask the group to help the person decide if the thought fits any of the common ways of harmful thinking. Also clarify that a single thought can sometimes fall into several categories.
- 7. Say:** *These categories of thoughts may help you notice your own ways of thinking. Once you notice your own thinking habits, you can learn how to change your harmful thoughts to helpful thoughts to improve your mood.*




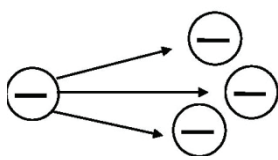
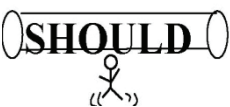
Many people think in the harmful ways described below. Which categories describe your habits of harmful thinking?

Symbol	"Catch" the thought—does it fit the common habits of harmful thinking?	"Check" the thought—examine it to see if it is harmful or helpful
	<p><b>All-or-Nothing Thinking</b></p> <p>Can only be at one end of the scale, top or bottom. Black or white. All good or all bad. Best or worst. Perfect or a failure.</p> <p>Examples:</p> <ul style="list-style-type: none"> <li>• I am not capable of loving.</li> <li>• I can't express my feelings.</li> </ul>	<p>Are there shades of gray? Maybe a more accurate thought is somewhere in the middle. Try to think in a more balanced way.</p>
	<p><b>Pessimism</b></p> <p>Believing negative things are more likely to happen and positive things are never or hardly ever going to happen</p> <p>Example:</p> <ul style="list-style-type: none"> <li>• Why bother talking to the doctor; he/she probably can't help me.</li> <li>▪ Why try to stop using? I'll never stop.</li> </ul>	<p>Why choose to believe that negative things are more likely to happen? Are you really giving positive and negative things an equal chance?</p>
	<p><b>Negative Filter (Ignoring the Positive)</b></p> <p>Only remember negative events. Filtering out positive events.</p> <p>Examples:</p> <ul style="list-style-type: none"> <li>• I can't work, so I am useless.</li> <li>• If we lose, it will be all my fault.</li> <li>• Nothing good happened to me this week.</li> <li>• My life is worthless if I can't see.</li> </ul>	<p>Is it true that there is nothing positive about your situation?</p>

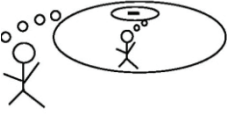
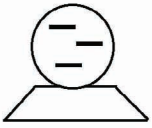
## Common Habits of Harmful Thinking

Symbol	Category	Examination
	<p><b><i>Exaggerating</i></b></p> <p>Exaggerating problems and the possible harm they could cause, and underestimating your ability to deal with them. Making a “mountain out of a mole hill.”</p> <p>Examples:</p> <ul style="list-style-type: none"> <li>• I can’t stand it.</li> <li>• I will never be able to complete this task.</li> </ul>	<p>How big is the problem really? Where is it likely to lead? How might you deal with the problem?</p>
	<p><b><i>Labeling (either yourself or others)</i></b></p> <p>Attaching a negative label, instead of seeing an error or problem. Labels can become self-fulfilling prophecies. “Stupid” vs. not good at math. “Clumsy” vs. drop things occasionally.</p> <p>Examples:</p> <ul style="list-style-type: none"> <li>• I can’t believe I don’t know the answer. I must be stupid.</li> <li>• I am ugly (or unattractive).</li> <li>• I’m an addict and I am worthless.</li> </ul>	<p>What is it specifically that you can’t do or that you are upset about? Think about what you did rather than who you are. Have there been times when people seemed to enjoy doing something in your company?</p>
	<p><b><i>Not Giving Oneself Credit</i></b></p> <p>Thinking positive things that happen are either just luck or somebody else’s doing and never the results of one’s effort.</p> <p>Example:</p> <ul style="list-style-type: none"> <li>• Yes, I came to group today, but it’s no big deal.</li> </ul>	<p>Are you overlooking your strengths and accomplishments? Pat yourself on the back for something good that you made happen. Did you contribute in some way?</p>

## Common Habits of Harmful Thinking

Symbol	Category	Examination
	<p><b><i>Blaming Oneself</i></b></p> <p>Thinking negative things happen, and they are always entirely your fault.</p> <p>Examples:</p> <ul style="list-style-type: none"> <li>• Things would have gone well if I hadn't been there.</li> <li>• My partner seems very upset today, I must have done something wrong.</li> <li>• If we lose it will be all my fault.</li> </ul>	<p>Are you to blame for everything, always? Do bad things happen only to you? Are there good things that you have made happen? Are there things that went well because you were there?</p>
	<p><b><i>Overgeneralization</i></b></p> <p>Taking one negative characteristic or event and seeing it as a never-ending pattern. He/she doesn't like me = no one likes me = no one will ever like me.</p> <p>I couldn't do this one thing = I can't do anything.</p> <p>Examples:</p> <ul style="list-style-type: none"> <li>• If I can't get this job, then everything's lost. I might as well give up.</li> <li>• I can't believe my friend did what she did.</li> <li>• I don't think I can trust anyone ever again.</li> </ul>	<p>Are you assuming that every situation and every person are the same? This is just one situation and one person. Can you remember other situations and people that are different? Even the same person may act differently next time—do you always act the same?</p>
	<p><b><i>"Should"ing on yourself</i></b></p> <p>Telling yourself you should and must do something. Makes you feel forced to do things, controlled, and resentful. Weighing yourself down with "shoulds."</p> <p>Example:</p> <ul style="list-style-type: none"> <li>• I should be the best.</li> <li>• This shouldn't have happened to me.</li> </ul>	<p>Do you really have to do anything? Do things have to turn out a certain way? Is it necessary for things to turn out the way you want in order for you to be happy?</p>

## Common Habits of Harmful Thinking

Symbol	Category	Examination
	<p><b><i>Mind Reading</i></b></p> <p>Thinking that you know what others are thinking, and they are thinking negatively about you.</p> <p>Examples:</p> <ul style="list-style-type: none"> <li>• My partner seems very upset today; I must have done something wrong.</li> <li>• I can't tell others how I feel because they will think I am crazy.</li> <li>• Other people think I am boring (or depressing).</li> <li>• My counselor thinks I'm hopeless.</li> </ul>	<p>Can you really know what others are thinking? Most people are focused on their own problems. Maybe they are acting in a certain way for reasons that don't have anything to do with you. What are some possible reasons?</p>
	<p><b><i>Negative Fortune Telling</i></b></p> <p>Thinking that you can see how things will be in the future and it is bad.</p> <p>Examples:</p> <ul style="list-style-type: none"> <li>• I will never be able to maintain my recovery.</li> <li>• The party is going to be really boring so why bother going.</li> <li>• I'll never be happy again.</li> <li>• I am not capable of loving.</li> <li>• I will never have a romantic relationship again.</li> </ul>	<p>Can you predict the future? What would it be like to help shape the future rather than just imagining that it will be bad? Things may change from how they used to be.</p>

# Harmful Thoughts Are Not Accurate, Complete, and Balanced

## LEADER TIPS

**Time: 10 minutes**

**Group Member's Workbook: Page 65**

**1. Say:** *To identify what kinds of thoughts you are having, it may be helpful to look at thoughts in a different way. Look at the table of harmful and helpful thoughts in your workbook. One kind of harmful thought is a thought that is inaccurate, or not true. For example, "I never do anything right."*

**2. Ask:** *Can it possibly be true that you NEVER do anything right? Here is a thought that might be more accurate: "I have made mistakes, but I do many things right." Can you see how this accurate thought might be more helpful at improving your mood?*

**3. Go over** the rest of the information in the table. **Ask:** *Can anybody think of other thoughts that are inaccurate, incomplete, or unbalanced?*




**4. Say:** *When you notice a thought, you can ask yourself: Is this thought accurate? Is this thought complete? Is this thought balanced? Harmful thoughts are likely to be inaccurate, incomplete, and unbalanced.*

**If you have time or if clients have difficulty sharing their own thought, read aloud** two or three of the statements on the list below. **Say:** *Let's try to think of some harmful and helpful thoughts. What harmful and helpful thoughts do you think you might have if you were in the same situation? What thoughts could make your mood worse and what thoughts could make your mood better, in spite of real life challenges?*

- I have just been diagnosed with diabetes.
- The rent is due, and I don't have any money.
- I am in a big hurry for an important appointment.
- I am unable to work right now because I am very depressed.
- I had unprotected sex.
- I haven't talked to my relatives for years. I want to now. I don't know how they'll react.
- People treat me different because I am Latino/Black/gay/female/old/poor/disabled/overweight/alcoholic/a substance abuser.
- I have recently stopped using drugs.
- I can't hang out with my friends who are still using.
- I think my drinking has caused me to have problems with my memory.

## Harmful

## Helpful

<b>Inaccurate (not true)</b>		<b>Accurate (true)</b>
I never do anything right.	<b>vs.</b>	I have made mistakes, but I do many things right.
I will never be able to trust people.	<b>vs.</b>	My trust has been broken in the past, but I am working to build relationships with trustworthy people.
<b>Incomplete (leaves out some facts)</b>		<b>Complete (includes all the facts)</b>
My marriage was a failure.	<b>vs.</b>	During my previous marriage, I learned to identify what I want from a relationship.
I can't work, so I am useless.	<b>vs.</b>	I can't work now, but I am providing emotional support to my family. Or: I used to both not work <u>and</u> use. Now I am not working, but I am not using. Next, I will be working <u>and</u> not using. One step at a time.
<b>Unbalanced (too extreme)</b>		<b>Balanced (fair and reasonable)</b>
I don't know anything.	<b>vs.</b>	I know a lot of things and I don't have to know everything.
I am a failure.	<b>vs.</b>	I've made mistakes, but I'm trying hard to do the right thing now.

# Catch It, Check It, Change It

## LEADER TIPS

**Time: 30 minutes**

**Group Member's Workbook: Page 66**

(**Note:** This activity is repeated in the other modules. In this module the focus is on thoughts.)

**1. Say:** *The Catch It, Check It, Change It method combines some of the other strategies that we have been talking about. We briefly introduced Catch It, Check It, Change It during our last session, but now we will go over this in more detail. This exercise ties together the process of identifying a thought, deciding if the thought is helpful or harmful, and then coming up with a replacement thought.*

**2. Introduce** the text “Catch It, Check It, Change It.” **Ask** for questions as you discuss the material.

**3. Say:** *Look at the table in your workbook. Read the instructions for the table.*

**4. Catch It. Say:** *For “Catch It,” we are trying to catch the thought that made our mood go down. Sometimes it is easier to notice your feeling first. Think of a negative emotion or low mood as a stop sign to “catch” your thought. Think about a time in the last week when you noticed your mood get worse. What was the situation? What were your feelings? What were your thoughts?*

**5. Check It. Say:** *Now, let's “check” the evidence. Is your thought leaving out some important information? What evidence do you have against your thought?*

- *How could the thought be more accurate or true?*
- *How could the thought be more complete? Remember, a complete thought includes all the important and relevant facts.*
- *How could the thought be more balanced? If the thought is balanced, it isn't too extreme. It is fair and reasonable. Unbalanced thoughts often have words like “never” or “always” attached to them (for example, “I'll never get sober”).*
- *Does this thought fall into any of the categories of harmful thinking habits?*

**6. Change It. Say:** *Now, let's “change” this harmful thought to a more helpful thought. Can you think of a replacement thought for the harmful thought?*

**7. Practice the exercise one or two times on the board, then say:** *Take a minute and try filling out the table with your own example.*

**8.** After allowing time to complete the exercise, try to review as many examples from the group as possible.

In the last session, we talked briefly about a tool to improve your mood and support your recovery. Today we will practice “Catch It, Check It, Change It.”



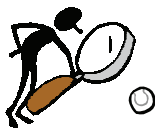
## 1. Catch It

The first step is to notice—or “catch”—your thought. If you find that your feelings are easier to catch than your thoughts, you can use your feelings as a signal to stop and focus on your thoughts. For example, when you notice that your mood changes or that you feel sad or angry or have cravings, stop. Ask yourself some questions.



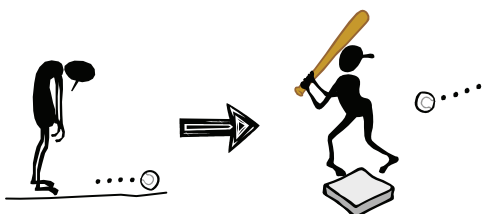
- What thought was I having when I noticed a change in my mood?
- What was happening at the time?

## 2. Check It



Examine your thought more closely. Is it harmful or helpful for you? What evidence do you have against your thought being true? How could your thought be more accurate, complete, and balanced? Does the thought fall into any of the categories of harmful thinking?

## 3. Change It



How could you change your harmful thought? What helpful thought could replace your harmful thought?

If you find it hard to believe your helpful thought to be true, this is normal and will get easier with time.

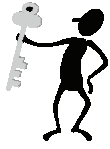


## Catch It, Check It, Change It

Think about a time in the last week when you noticed a change in your mood or increase in cravings. Then try to answer the questions in the table below. (Examples are provided, but think about your own situation.)



What happened?	What were your feelings?	What was your thought?	Examine your thought. What evidence do you have against your thought?	Replace the harmful thought with a helpful thought.
<i>I had a fight with my partner.</i>	<i>Sad, angry.</i>	<i>My partner always gets his/her way.</i>	<i>My partner and I sometimes agree to do things my way.</i>	<i>We won't always agree. My partner gets his/her way sometimes, but I often get what I want too.</i>
<i>I had a dream that I used.</i>	<i>Scared, confused</i>	<i>I'll never get sober.</i>	<i>I've been clean for a week and am clean today.</i>	<i>I had a dream about using, but I'm clean now and am working towards being clean long-term.</i>



# KEY MESSAGES

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## LEADER TIPS

**Time: 5 minutes**

**Group Member's Workbook: Page 68**

1. **Say:** *Today we have talked about some common habits of harmful thinking. You also started to question your thoughts so you can come up with more helpful thoughts.*
2. **Read aloud** the key messages and ask group members if they have questions or comments.

### ***Key messages from this session include:***

- You can learn to notice or “catch” your harmful thoughts by being aware of common habits of harmful thinking.
- You can use “Check It” to examine your thoughts and see if other alternatives are possible.
- You can use “Change It” to change your harmful thoughts to helpful ones.



What do you want to remember about this session?  
**Write your own key messages here.**

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## LEADER TIPS

**Time:** 10 minutes

**Group Member's Workbook:** Page 69

### **Catch It, Check It, Change It**

1. **Say:** *Look at the chart in your workbooks after the Daily Check In. It is like the one we looked at when we talked about "Catch It, Check It, Change It." We would like you to practice completing this exercise when you notice your mood gets worse.*
2. **Go over** the directions at the top of the chart and in the first row.

### **Notice Categories of Harmful Thoughts**

3. **Say:** *Try to notice whether your harmful thoughts tend to fall in one or more of the categories of harmful thoughts. You can review the categories in your workbook and they may help you to notice your harmful thoughts. You can make a note of the category in the "Examine your thought. What evidence do you have against your thought?" column in the Catch It, Check it Change It chart.*
4. **Remind** the group that it is important that they do the practice activities. **Ask** the group members if they have any questions.

### **Daily Check In**

5. **Review** the directions for the Daily Check In. **Point out** to group members that the Daily Check In now includes a place at the bottom where they should indicate how many harmful and helpful thoughts they had each day.

**1. Use the *Catch It, Check It, Change It* steps** in the next week to notice your thoughts and feelings, examine them, and change your harmful thoughts to helpful thoughts. **Fill in the *Catch It, Check It, Change It* chart.** This process takes practice, so give it your best try and we will review these ideas during our next session.

**2. Try to notice** which categories of harmful thoughts your thoughts fall into. You can make a note of the category in the “Examine your thought. What evidence do you have against your thought?” column in the *Catch It, Check it, Change It* chart.

**3. Track your mood and coping using the *Daily Check In*.**

Notice at the bottom of the *Daily Check In* a place where you write in the number of harmful and helpful thoughts you have each day. Of course you won't notice every thought that you have in the course of a day—but try to become more aware of the thoughts you have when you are depressed or have cravings to drink/use. Eventually, you may notice that on the days when you have fewer harmful thoughts, your mood and coping will be better.

# DAILY CHECK IN



## Instructions

Today's Date: \_\_\_\_\_

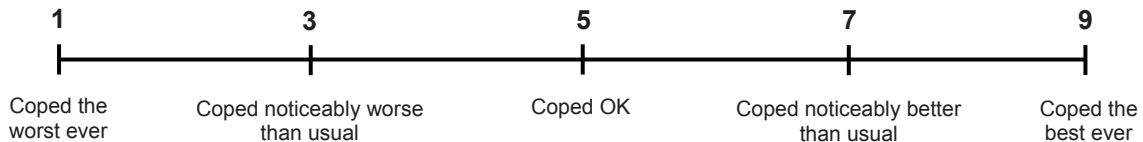
- Keep the scale beside your bed. Before you go to bed, think about your mood and how you coped with challenges to your recovery throughout the day.
- Circle a number on both scales. Try to use all the numbers, not just 1, 3, 5, 7, or 9. There are no wrong answers. Only you know how you have felt each day.
- Did you notice your thoughts? At the bottom, write in the number of harmful and helpful thoughts you had each day.
- If you want to track your mood and how you coped with challenges over a period of time longer than a week, write down your ratings on a calendar.

1.



Write in the day of the week.		_____	_____	_____	_____	_____	_____
<b>Mood</b>	Best mood ever	9	9	9	9	9	9
		8	8	8	8	8	8
	Noticeably better mood	7	7	7	7	7	7
		6	6	6	6	6	6
	Ok/average mood	5	5	5	5	5	5
		4	4	4	4	4	4
	Noticeably worse mood	3	3	3	3	3	3
	2	2	2	2	2	2	
	Lowest mood ever	1	1	1	1	1	1

2.



Write in the day of the week.		_____	_____	_____	_____	_____	_____
<b>Coping with challenges to my recovery</b>	Coped the best ever	9	9	9	9	9	9
		8	8	8	8	8	8
	Coped noticeably better than usual	7	7	7	7	7	7
		6	6	6	6	6	6
	Coped OK	5	5	5	5	5	5
		4	4	4	4	4	4
	Coped noticeably worse than usual	3	3	3	3	3	3
	2	2	2	2	2	2	
	Coped the worst ever	1	1	1	1	1	1

3.

Write in the day of the week.	_____	_____	_____	_____	_____	_____
<b>Number of harmful thoughts</b>						
<b>Number of helpful thoughts</b>						

## Catch It, Check It, Change It

Think about a time in the last week when you noticed a change in your mood or cravings. Then try to answer the questions in the table below. (Examples are provided, but think about your own situation.)



What happened?	What were your feelings?	What was your thought?	Examine your thought. What evidence do you have against your thought?	Replace the harmful thought with a helpful thought.
<i>I had a fight with my partner.</i>	<i>Sad, angry.</i>	<i>My partner always gets his/her way.</i>	<i>My partner and I sometimes agree to do things my way.</i>	<i>We won't always agree. My partner gets his/her way sometimes, but I often get what I want too.</i>
<i>I had a dream that I used.</i>	<i>Scared, confused</i>	<i>I'll never get sober.</i>	<i>I've been clean for a week and am clean today.</i>	<i>I had a dream about using, but I'm clean now and am working towards being clean long-term.</i>



# FEEDBACK

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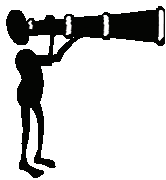
## LEADER TIPS

**Time: 2 minutes**

**Group Member's Workbook: Page 72**

Before ending the group, ask group members to comment on the session.

- What was helpful about today's session?
- What was less helpful?
- What was difficult about this session?
- What suggestions do you have to improve your therapy?



## LOOKING AHEAD

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### LEADER TIPS

**Time: 1 minute**

**Group Member's Workbook: Page 72**

1. **Read aloud** the text.
2. **Congratulate** group members for attending the group.

In Session 4, you will have a chance to consider what thoughts and feelings are most likely to cause you to feel depressed or to use.





# GROUP LEADER SELF-EVALUATION FORM: THOUGHTS, SESSION 3

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## **Instructions**

**Taught/Done:** Were you able to cover the material? If you didn't do this in this session but you do it later, when it is done write in the date you covered it.

**Difficult to Teach:** How hard was it to teach this part of the session? Circle "easy," "OK," or "hard."

	<b>Taught/Done? (circle yes or no)</b>		<b>How difficult was it to lead this part of the session? (circle easy, OK, or hard)</b>		
Welcome	Yes	No	Easy	OK	Hard
Purpose and Outline	Yes	No	Easy	OK	Hard
Announcements	Yes	No	Easy	OK	Hard
How Have You Been Feeling?	Yes	No	Easy	OK	Hard
Review					
Last Session	Yes	No	Easy	OK	Hard
Practice	Yes	No	Easy	OK	Hard
New Topic: How to Identify Harmful Thoughts					
Common Habits of Harmful Thinking	Yes	No	Easy	OK	Hard
Harmful Thoughts Are Not Accurate, Complete, and Balanced	Yes	No	Easy	OK	Hard
Catch It, Check It, Change It	Yes	No	Easy	OK	Hard
Key Messages	Yes	No	Easy	OK	Hard
Practice	Yes	No	Easy	OK	Hard
Feedback	Yes	No	Easy	OK	Hard
Looking Ahead	Yes	No	Easy	OK	Hard





## LEADER TIPS

### Materials Needed

- **Group Member’s Workbooks** (“Thoughts, Alcohol/Drug Use, and Your Mood”)—a few copies to loan in case some group members forget to bring their own workbooks
- **Pens**—enough for everyone in the group
- **Dry erase board, chalkboard**, or large sheets of paper to present material to group
- **Kleenex** or other facial tissue
- **Index cards**—enough to give everyone in the group seven cards
- **Small binder clips**—one for everyone in the group—so group members can attach their index cards to their workbook

### Group Leaders’ Goals

- Help group members understand that a single thought can start a chain of thoughts up or down.
- Help group members feel powerful to stop a downward chain of thoughts at any point. Reinforce the idea that they have choices.
- Give group members tools for stopping the downward chain of thoughts.

### Welcome Group Members

As group members arrive, **greet** them by name. Ask them informally how their practice went.

### Purpose and Outline

**Introduce** the Purpose and Outline.

## PURPOSE

- Understand that one harmful thought may lead to another harmful thought, and that one helpful thought may lead to another helpful thought.
- Understand that some harmful thoughts have extra power to set off your depression or alcohol/drug use.
- Identify your high-risk thoughts and begin changing them.

## OUTLINE

Announcements

Review

New Topic: How to “Catch” and “Check” Your Harmful Thoughts

One Thought Can Lead to Another: A Chaining Activity

What Harmful Thoughts Are High-Risk for You?

Coping with Cravings

Key Messages

Practice

Feedback

Looking Ahead



## ANNOUNCEMENTS

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The group leaders will make any announcements that might be necessary.

Is there anything you need to let the leaders know about?

# REVIEW

## Last Session

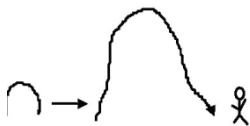
### LEADER TIPS

**Time:** 5 minutes

**Group Member's Workbook:** Page 74

- 1. Say:** *In the last session, we talked about some common ways of thinking that can be harmful to you because they bring your mood down. The purpose was to help you learn how to notice your own harmful thoughts so you can replace them with helpful thoughts and feel better.*
- 2. Ask:** *Can anybody remember what habits of thinking go with the pictures? You can look back at pages 61–64 if you want to. What do you remember about Catch It, Check It, Change It?*
- 3. Say:** *Let's review the key messages from last session.*

What do you remember about **common habits of harmful thinking?**



What do you remember about **Catch It, Check It, Change It?**

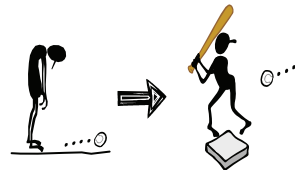
**Catch** the thought,



**check** the thought,



and **change** the thought.



***Key messages from last session are:***

- You can learn to notice or “catch” your harmful thoughts by being aware of common habits of harmful thinking.
- You can use “Check It” to examine your thoughts and see if other alternatives are possible.
- You can use “Change It” to change your harmful thoughts to helpful ones.

# Practice

## LEADER TIPS

**Time: 20 minutes**

**Group Member's Workbook: Page 76**

### Complete the Catch It, Check It, Change It table

**1. Say:** *Your practice also included filling in the Catch It, Check It, Change It table. Who would like to share what they wrote down? Write examples on the board. Try to connect replacing harmful thoughts with helpful thoughts to their mood and cravings ratings on the Daily Check In.*

### Notice What Categories Your Harmful Thoughts Fall Into

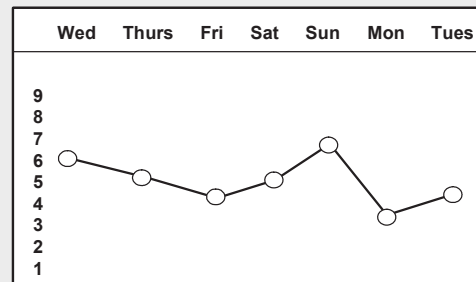
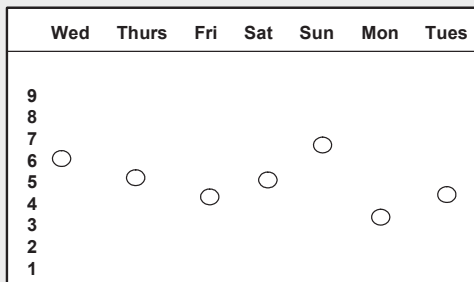
Do you remember the categories of harmful thoughts we discussed last week? Did you notice if your thoughts fit any of the categories?

### Daily Check In

Ask group members about how they did tracking their moods and cravings on their Daily Check In. Make graphs based on one group member's Daily Check In.

**2.** Start the graph with the day of the week the group meets. If your group meets on a Wednesday, write "Wednesday" or "Wed" in the first space at the top of the graph.

**3.** Ask for a volunteer from the group to share the numbers **related to mood** on his or her scale. Make a graph on the board like the example below. If the group member's mood was a 6 on the first day, mark a dot at 6 below "Wed."



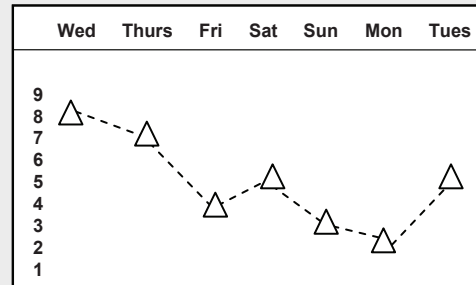
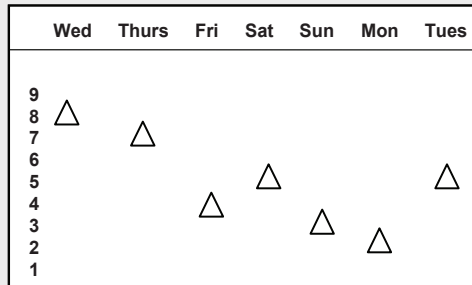
**4.** When you are finished adding dots that represent the volunteer's mood for each day, draw lines between the dots to show how mood can change up and down.

**5. Possible follow-up questions:** *What did you notice about your mood during the last week? What were your thoughts on the day your mood was lowest? Your mood was higher on [day]. What thoughts were you having on that day? What do you notice about the connection between your thoughts and your mood? Is there a weekly pattern? Are some days more likely to bring about low moods? If so, what tools can you use to prevent low moods?*



6. Repeat the process for coping, using a new graph. Ask the same volunteer to share the numbers **related to coping** on his or her scale. Add dots to the new graph. If the group member's coping was 8 on the first day, mark a dot at 8 below "Wed."

7. When you are finished adding dots that represent the volunteer's coping for each day, draw lines between the dots to show how coping can change up and down.



**8. Possible follow-up questions:** *What did you notice about how well you coped with challenges? You coped very well on [day]. What kinds of helpful thoughts were you having on that day? What was your mood? What do you notice about the connections among thoughts, mood, and how you coped?*

**9. Remember,** depending on the size of the group, you may choose to chart the Daily Check In of all group members or just one or two. Some group members will be eager to share each week, but don't focus only on them.

**1. Use the *Catch It, Check It, Change It* steps** to notice your thoughts and feelings, examine them, and change your harmful thoughts to helpful thoughts.

**2. Try to notice** which categories of harmful thoughts your thoughts fall into.

**3. Track your mood and coping using the *Daily Check In*.**

# NEW TOPIC: HOW TO “CATCH” AND “CHECK” YOUR HARMFUL THOUGHTS

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## One Thought Can Lead to Another: A Chaining Activity



### LEADER TIPS

**Time:** 30 minutes

**Group Member’s Workbook:** Page 77

(**Note:** This activity is repeated in the other modules. In this module the focus is on thoughts.)

**1. Say:** *We have talked about how the destructive cycle of depression or using can begin with a simple fact, or event. For example, “I got a divorce” or “I stopped drinking.” The event doesn’t have to be big. It could be that you lost your house keys or were late to work.*

*We will do a “chaining” exercise in which you can see how your mood can cycle down or up from the event, in a continuous chain, depending on your thoughts. The goal of the exercise is to help you understand that your thoughts affect how you feel and that you can make choices about how you think that can make you feel better or worse.*

*The chaining activity applies to your cravings also. After an event, your cravings can go up or down. But depending on differences from person to person and on the situation, cravings may not go up and down in the same way that mood does.*

**Ask:**

*As your mood gets **worse**, how do you think this affects your cravings (desire to use)?*

*As your mood gets **better**, how do you think this affects your cravings (desire to use)?*

**Say:** *An example of this exercise is included in your workbook, but we will do one together on the board.*

**2.** Quickly draw on the board the numbers 1 through 9, with 9 at the top, 8 on the next line, etc. (See the example on the next page.)

**3. Say:** *Just like the Daily Check In, the chaining activity uses a scale of 1 to 9 to rate your mood. "1" is the worst mood and "9" is the best. The chaining activity begins with a fact or an event. Can anybody suggest a statement of fact that we can put in the middle on line #5? Would you like to share something that happened recently?*

Use a real event in one of the group member's lives and use the chaining activity to illustrate how thoughts can help that person feel better or worse. An example is provided on the next page.

**4. Say:** *Now I'd like you to think of a thought you might have that would bring your mood down to a 4. What would bring you down just a little bit?*

If you are working with a person in the group, ask other group members to help him or her think of thoughts he or she might have that would make the mood worse.

If the first response seems too drastic, check with the group for guidance by saying: *If you had that thought, would it bring your mood down to a 4? Or even lower?* Write the thought next to the number where the group feels it belongs. You may need to let group members know that how one person rates a thought may be different than how another person might rate the same thought (for example, one person might feel a thought is a 3 but another person might think it's a 4).

If someone in the group suggests an activity instead of a thought, say: *If you did that activity, what thought might you be having?* Write the thought on the board.

**5.** Next ask for a thought that would lead to a mood of about 3, and write it on the board next to the 3. Do the same for moods rated 2 and 1.

Note: While it is best to complete all the numbers, you do not need to fill in all the numbers in this exercise. If group members understand the idea, just fill in one or two going down and one or two going up.

<i>Best mood</i>	9.
	8.
	7.
	6.
	<b>5. I have just stopped drinking alcohol.</b>
	4. I'm not sure I can cope with the cravings for alcohol.
	3. I'll probably be miserable while I am trying to quit drinking.
	2. My recovery probably won't last for more than a month.
<i>Worst mood</i>	1. I'll probably be a drunk for the rest of my life.

**6.** Complete the rest of the chaining activity cycling up (see the example on the next page).

**Say:** *Let's return to the statement of fact that we wrote at number 5. What's a thought that might make your mood improve a little and become a 6?*

Repeat the process for moods up to 9.

*Best mood*

9. I feel proud of my recovery.
8. I am doing things to help me maintain my recovery, like getting treatment for depression and going to AA.
7. I'm glad I finally made the decision to stop drinking.
6. Quitting drinking is hard, but I know people who have been able to do it.
- 5. I have just stopped drinking alcohol.**
4. I'm not sure I can cope with the cravings for alcohol.
3. I'll probably be miserable while I am trying to quit drinking.
2. My recovery probably won't last for more than a month.

*Worst mood*

1. I'll probably be a drunk for the rest of my life.

7. Ask group members if they have any questions or comments.

**8. Say:** *Now try the same activity on your own—fill in the blanks in the table in your workbook. (Allow five minutes for this.)* **Then say:** *Who would like to read what they wrote?*

**9. Say:** *What do you notice about how thoughts, alcohol/drug use, and mood are related?*

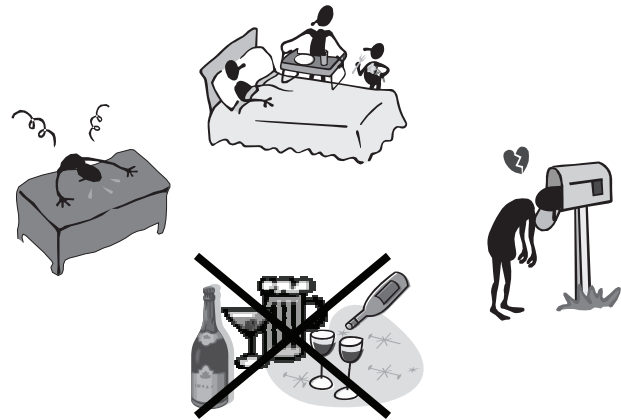
**10.** Here are two more examples of the chaining activity. These do not relate to using drugs or alcohol.

9. I will keep trying until I find a job that is right for me.
8. I have skills that employers will want.
7. I learned a lot at my last job.
6. I will work hard to find another job.
- 5. I have just lost my job.**
4. I'm not sure if I can find another job.
3. I don't think I did my job well.
2. I will never be a good worker.
1. I am no good.

9. I can focus on what is positive in my life and make positive changes.
8. I am still capable of doing many things.
7. There are things I can do to take care of myself.
6. I need to learn more about my health problem.
- 5. I have a serious health problem.**
4. This is really awful.
3. Why me? Why am I being punished?
2. I'm not normal. I won't be able to do anything.
1. Everyone else is having fun, so I am sure that no one cares about me.

The destructive cycle of depression and drinking/using can begin with a fact or event, such as:

- You lose a job.
- A relative or friend dies.
- You get sick.
- You have been diagnosed with diabetes.
- You have no energy.
- You have recently stopped drinking or using.



The chaining activity illustrates how your mood can get better or worse depending on how you respond to the fact or event.

As your mood changes, how do you think this affects your cravings (desire to use)?

Are you more likely to crave (want to use) when your mood is good or bad?

## Instructions

1. In the table on page 80 **write a statement of fact or an event** on the line next to #5.
2. What thought might cause your mood to go down just a little? **Write that thought next to #4.**
3. Think of a chain of thoughts that make you feel worse until your mood is at its lowest. **Write that chain of thoughts on lines #3, #2, and #1.**

4. Complete the rest of the chaining activity going up. What is a thought that would make your mood improve just a little? **Write that thought next to #6.**

5. Fill in lines #7 and #8.



6. What thought might make you feel really happy? Write that thought next to #9.

7. **Do you see the links among thoughts, mood, and drinking/using?**

- Your thoughts affect how you feel and act. For example, when you have harmful thoughts you may be more likely to feel down, and more likely to drink or use.
- You can make choices about the way you think.



# Sample

<b>Best mood</b>	<b>9.</b>	I will keep trying until I find a job that is right for me.
	<b>8.</b>	I have skills that employers will want.
	<b>7.</b>	I learned a lot at my last job.
	<b>6.</b>	I will work hard to find another job.
<b>Okay/average mood</b>	<b>5.</b>	<b>I have just lost my job.</b>
	<b>4.</b>	I'm not sure if I can find another job.
	<b>3.</b>	I don't think I did my job well.
	<b>2.</b>	I will never be a good worker.
<b>Worst mood</b>	<b>1.</b>	I am no good.

## Your chaining activity



<b>Best mood</b>	9.	
<b>↑</b>	8.	
	7.	
	6.	
<b>Okay/ average mood</b>	5.	<b>Statement of fact</b> _____
<b>↓</b>	4.	
	3.	
	2.	
<b>Worst mood</b>	1.	

The chaining activity illustrates that:

- Thoughts, mood, and cravings are connected. When you have harmful thoughts, you are more likely to feel down or to use. When you have helpful thoughts, your mood is likely to improve and your cravings decrease.
- A harmful thought can lead to another harmful thought, bringing your mood down and increasing your cravings.
- A helpful thought can lead to another helpful thought, bringing your mood up and decreasing your cravings.

Most of the time, your mood won't be either the worst mood possible (a "1") or the best mood possible (a "9") but somewhere in between.



## What Harmful Thoughts Are High- Risk for You?

### LEADER TIPS

**Time:** 20 minutes

**Group Member's Workbook:** Page 81

1. **Review the text** on this page.
2. **Ask:** *What do you notice when you are having cravings?*
3. **Ask:**
  - *What is a risky thought for you?*
  - *What feelings are high-risk for you?*
4. **Say:** *We would like you to write down some of the thoughts and feelings that have extra power for you. These are “high-risk” because they can quickly make your mood spiral down or almost always make you feel like drinking or using. Remember: When you know what your high-risk thoughts and feelings are, you can be ready for them and fight back.*

Some harmful thoughts seem to have extra power to bring your mood down or cause cravings. These are your high-risk thoughts.

Thoughts such as “I will never be any good” or feelings such as hopelessness, anxiety, sadness, or anger could be triggers for depression, drinking, and using. The thoughts and feelings that might be very powerful for you might not be so bad for somebody else.

Some activities or interactions with people can also be extra harmful—we will talk more about those in the other CBT modules.

When you know what your triggers are, you can learn ways to cope with your cravings.

**Write down some of your risky thoughts and feelings.**

**Thoughts (for example)**

“I can’t do this.”  
“One drink won’t hurt.”  
“There’s nothing to do here.”  
“This calls for a celebration.”  
“I deserve this.”  
“All my hard work paid off.”

**Feelings (for example)**

Hopelessness  
Anger  
Fear  
Boredom  
Excitement  
Joy  
Pride

***Thoughts:***

***Feelings:***

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These risky thoughts and feelings can make you having cravings for alcohol and drugs. Next, we are going to talk about how to cope with those cravings.

# Coping With Cravings

## LEADER TIPS

**Time: 25 minutes**

**Group Member's Workbook: Page 83**

**1. Lead a discussion** about cravings. **Ask** group members to describe the pattern of their cravings:

- *When you have cravings for alcohol or drugs, how do they start?*
- *Do the cravings go down with time?*
- *What do you do to help the cravings go down?*

**2. Say:** *Cravings usually come and go, and they can be managed with coping strategies. Everybody in this group has had challenges with cravings, and what we are trying to do is help you cope with the cravings and feel better.*

**3. Review the text** and talk about the “storm” idea. **Ask:**

- *If you think of your cravings as waves that get bigger and bigger but eventually go down, how might that help your recovery?*
- *How does it feel to know that you are the “driver” through the cravings storm, and that you are in control?*

**4. Review the text** on helpful thoughts to cope with cravings. **Ask:** *What thoughts could help you when you have strong cravings? Take a few minutes to write down some helpful thoughts on the lines in your workbook.*

**5. Say:** *When you have strong cravings, it may feel like you are not the one in charge. But you have the power to control what happens—you are the captain through the storm.*



When you have cravings for alcohol/drugs, you can imagine that you are on a ship in the middle of a storm. Your cravings are like waves that become bigger and bigger. You might feel afraid, but you can expect that your cravings will go down eventually.

**You are the captain in charge of the ship.**

You are the one who decides what will happen. Positive thoughts can help you steer your ship through the waves of cravings and find a peaceful place where the cravings have decreased.



***How does this example fit in with your experiences with cravings?***

**Here are some examples of helpful thoughts** that might help you cope with cravings:

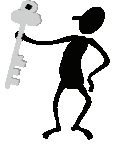
- I have resisted my cravings before, and I can do it now.
- My other cravings have passed, and these will too.
- It is normal for my body to crave the alcohol/drugs I used to use, but I can choose to resist the cravings.
- Sometimes I tell myself “I can’t stand it if I don’t use!” But, if I don’t give in to the craving, nothing bad will happen. If I do give in, I will have to deal with the bad things that happen.
- I have used alcohol and drugs to calm down. Now I can learn other ways to calm down.
- I will think about steering past the big waves and reaching a peaceful sea.
- Having a craving does not mean that I have to drink or use.
- I am feeling sad now, but drinking or using would make me feel better for only a short time and then I would feel worse.
- I have the strength to get through this.
- I will take a few slow, deep breaths and try to relax.
- My family/counselor/friends believe that I can stay clean, and I can believe in myself too.
- I won’t let drugs or alcohol keep me from getting where I want to be in life.

**What are your helpful coping thoughts? Write them here.**

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# KEY MESSAGES

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## LEADER TIPS

**Time: 5 minutes**

**Group Member's Workbook: Page 85**

1. **Say:** *Today we have talked about how your thoughts can cause a chain reaction for better or for worse.*
2. **Read aloud** the key messages and ask group members if they have questions or comments.

### ***Key messages from this session are:***

- A harmful thought can lead to another harmful thought, bringing your mood down.
- A helpful thought can lead to another helpful thought, bringing your mood up.
- Helpful thoughts can help you cope with cravings.



What do you want to remember about this session?

**Write your own key messages here.**

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# PRACTICE

## LEADER TIPS

**Time: 10 minutes**

**Group Member's Workbook: Page 86**

### **Track Your Thoughts**

**1. Write down your thoughts each day.**

### **Catch Your Risky Thoughts and Use Coping Thoughts**

**2. Say:** *We talked about the fact that each of you probably has thoughts and feelings that can trigger your depression or drinking and using. You wrote down some helpful thoughts that can help you cope with these risky thoughts and feelings. Part of your practice will be to use the coping thoughts to help you keep your mood up and resist cravings.*

### **Daily Check In**

**3. Review** the directions for the Daily Check In.

**4. Ask** the group members if they have any questions.

**1. Write down your thoughts each day.**

**2. Try to catch a risky thought and use a coping thought** to keep your mood up and manage your cravings.

**3. Track your mood and coping** using the Daily Check In.

# DAILY CHECK IN

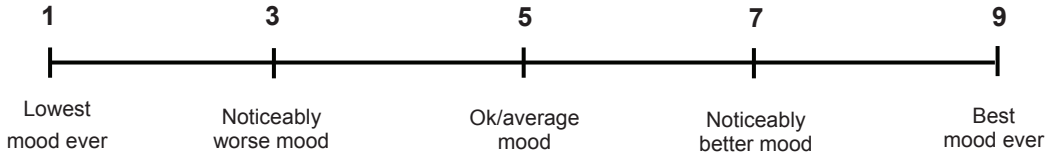


## Instructions

Today's Date: \_\_\_\_\_

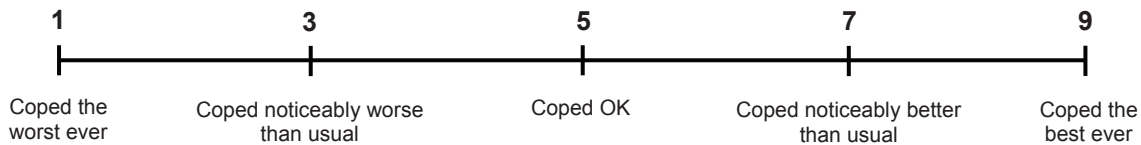
- Keep the scale beside your bed. Before you go to bed, think about your mood and how you coped with challenges to your recovery throughout the day.
- Circle a number on both scales. Try to use all the numbers, not just 1, 3, 5, 7, or 9. There are no wrong answers. Only you know how you have felt each day.
- Did you notice your thoughts? At the bottom, write in the number of harmful and helpful thoughts you had each day.
- If you want to track your mood and how you coped with challenges over a period of time longer than a week, write down your ratings on a calendar.

1.



Write in the day of the week.		_____	_____	_____	_____	_____	_____	_____
<b>Mood</b>	Best mood ever	9	9	9	9	9	9	9
		8	8	8	8	8	8	8
	Noticeably better mood	7	7	7	7	7	7	7
		6	6	6	6	6	6	6
	Ok/average mood	5	5	5	5	5	5	5
		4	4	4	4	4	4	4
Noticeably worse mood	3	3	3	3	3	3	3	
	2	2	2	2	2	2	2	
Lowest mood ever	1	1	1	1	1	1	1	

2.



Write in the day of the week.		_____	_____	_____	_____	_____	_____	_____
<b>Coping with challenges to my recovery</b>	Coped the best ever	9	9	9	9	9	9	9
		8	8	8	8	8	8	8
	Coped noticeably better than usual	7	7	7	7	7	7	7
		6	6	6	6	6	6	6
	Coped OK	5	5	5	5	5	5	5
		4	4	4	4	4	4	4
Coped noticeably worse than usual	3	3	3	3	3	3	3	
	2	2	2	2	2	2	2	
Coped the worst ever	1	1	1	1	1	1	1	

3.

Write in the day of the week.	_____	_____	_____	_____	_____	_____	_____
<b>Number of harmful thoughts</b>							
<b>Number of helpful thoughts</b>							



**Thoughts, Day 1**

—



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(Write in the day of the week.)

**Thoughts, Day 1**

+



---

(Write in the day of the week.)


**Thoughts, Day 2**


—




---

(Write in the day of the week.)

<b>Thoughts, Day 2</b>	<b>+</b>	
<hr/>		
(Write in the day of the week.)		

<b>Thoughts, Day 3</b>	<b>-</b>	
<hr/>		
(Write in the day of the week.)		

<b>Thoughts, Day 3</b>	<b>+</b>	
<hr/>		
(Write in the day of the week.)		

**Thoughts, Day 4**

—



---

(Write in the day of the week.)

**Thoughts, Day 4**

+



---

(Write in the day of the week.)


**Thoughts, Day 5**


—





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(Write in the day of the week.)

<b>Thoughts, Day 5</b>	<b>+</b>	
<hr/>		
(Write in the day of the week.)		

<b>Thoughts, Day 6</b>	<b>-</b>	
<hr/>		
(Write in the day of the week.)		

<b>Thoughts, Day 6</b>	<b>+</b>	
<hr/>		
(Write in the day of the week.)		

<b>Thoughts, Day 7</b>	<b>-</b>	
<hr/>		
(Write in the day of the week.)		

<b>Thoughts, Day 7</b>	<b>+</b>	
<hr/>		
(Write in the day of the week.)		



# FEEDBACK

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## LEADER TIPS

**Time: 2 minutes**

**Group Member's Workbook: Page 93**

Before ending the group, ask group members to comment on the session.

- What was helpful about today's session?
- What was less helpful?



## LOOKING AHEAD

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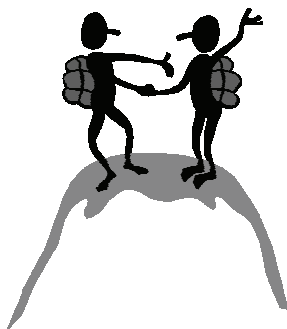
### LEADER TIPS

**Time: 1 minute**

**Group Member's Workbook: Page 93**

1. **Review** the text.
2. **Congratulate** group members for attending the group.

In Session 5, you will you will learn how to examine your thoughts and change them to improve your mood and support your recovery.



# GROUP LEADER SELF-EVALUATION FORM: THOUGHTS, SESSION 4

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## **Instructions**

**Taught/Done:** Were you able to cover the material? If you didn't do this in this session but you do it later, when it is done write in the date you covered it.

**Difficult to Teach:** How hard was it to teach this part of the session? Circle "easy," "OK," or "hard."

	<b>Taught/Done? (circle yes or no)</b>		<b>How difficult was it to lead this part of the session? (circle easy, OK, or hard)</b>		
	Yes	No	Easy	OK	Hard
Welcome	Yes	No	Easy	OK	Hard
Purpose and Outline	Yes	No	Easy	OK	Hard
Announcements	Yes	No	Easy	OK	Hard
Review	Yes	No	Easy	OK	Hard
Last Session					
Practice	Yes	No	Easy	OK	Hard
New Topic: How to "Catch" and "Check" Your Harmful Thoughts	Yes	No	Easy	OK	Hard
One Thought Can Lead to Another: A Chaining Activity					
What Harmful Thoughts Are High-Risk for You?	Yes	No	Easy	OK	Hard
Coping with Cravings	Yes	No	Easy	OK	Hard
Key Messages	Yes	No	Easy	OK	Hard
Practice	Yes	No	Easy	OK	Hard
Feedback	Yes	No	Easy	OK	Hard
Looking Ahead	Yes	No	Easy	OK	Hard





## LEADER TIPS

### Materials Needed

- **Group Member’s Workbooks** (“Thoughts, Alcohol/Drug Use, and Your Mood”)—a few copies to loan in case some group members forgot to bring their own workbooks
- **Pens**—enough for everyone in the group
- **Dry erase board, chalkboard**, or large sheets of paper to present material to group
- **Kleenex** or other facial tissue
- **The PHQ-9 depression measure**—enough copies for everyone in the group

### Group Leaders’ Goals

- Help group members examine their thoughts and see if there are other possible alternatives.
- Give group members strategies for managing their harmful thoughts.
- Help group members feel hopeful that they can notice their harmful thoughts (catch them), examine them (check them), and change them to improve their mood and decrease cravings.

### Welcome Group Members

- As group members arrive, greet them by name. Ask them informally how their practice went.
- Pass out the PHQ-9 depression measure. Ask group members to fill them out, put their names on them, and return them to you. Tell group members that you will talk more about the questionnaire later.
- Scan the questionnaires quickly as you collect them. Notice any major changes in the severity of group members’ depression symptoms, including thoughts of suicide. If a group member reports thoughts of suicide, follow the procedures that you have worked out with your supervisor in advance regarding how to handle these situations. Often this involves having one group leader meet privately with the client either during group or immediately following to further assess the client’s risk of suicide or “handing off” the client to another clinician who will conduct this assessment. Consult with your supervisor immediately in the case of a client who is suicidal.

### Purpose and Outline

**Introduce** the Purpose and Outline.

## PURPOSE

- Learn to examine your harmful thoughts and see if there are other possible alternatives.
- Learn strategies for changing your thoughts—“talking back” to harmful thoughts and replacing them with helpful thoughts.

## OUTLINE

Announcements

How Have You Been Feeling?

Review

New Topic: How to “Check” and “Change” Your Harmful Thoughts

Examine the Evidence

Balance Your Thoughts with “Yes, But” Statements

Find a Replacement Thought for Your Harmful Thought

Key Messages

Practice

Feedback

Looking Ahead



## ANNOUNCEMENTS

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The group leaders will make any announcements that might be necessary.

Is there anything you need to let the leaders know about?

# HOW HAVE YOU BEEN FEELING?

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## LEADER TIPS

**Time: 5 minutes**

**Group Member's Workbook: Page 96**

- 1. Introduce** the text in the Group Member's Workbook.
- After the session, **compare** each group member's PHQ-9 scores with his or her previous scores (if the group member has filled out the questionnaire at a previous session). This comparison will allow you to monitor each group member's depression.

**Note:** In addition to the PHQ-9, choose another measure to monitor how group members are progressing in their recovery. See the Group Leader's Introduction for a discussion of how select a measure that supplements the PHQ-9. Compare current and previous scores as you would with the PHQ-9 measure.



You filled out a questionnaire at the beginning of the session, the “Patient Health Questionnaire”—PHQ-9 for short.

You will fill out the questionnaire before the group begins at Sessions 1, 3, and 5 of each CBT module. The questionnaire allows you and your group leaders to keep track of how you are feeling while you are attending the group.

 **REVIEW**

## Last Session

### LEADER TIPS

**Time: 5 minutes**

**Group Member's Workbook: Page 97**

- 1. Say:** *Last session we talked about how thoughts can make a chain go up or down. Remember, you have the power to interrupt a chain of harmful thoughts and change them to helpful thoughts so that your mood improves and you manage your cravings. Today we will talk about more strategies for changing your harmful thoughts to helpful thoughts.*
- 2.** Read aloud the key messages or ask a volunteer to read them. **Ask:** *What do you remember most from last session?*
- 3. Ask:** *Does anybody have any questions?*

What do you remember most from the last session?

***Key messages from last session are:***

- A harmful thought can lead to another harmful thought, bringing your mood down.
- A helpful thought can lead to another helpful thought, bringing your mood up.
- Helpful thoughts can help you cope with cravings.

# Practice

## LEADER TIPS

**Time: 20 minutes**

**Group Member's Workbook: Page 97**

### Write Down Your Thoughts Each Day

**1. Ask and discuss:** *Was it difficult to write down your harmful and helpful thoughts each day?*

### Catch a Risky Thought and Use a Coping Thought to Manage Your Mood and Cravings

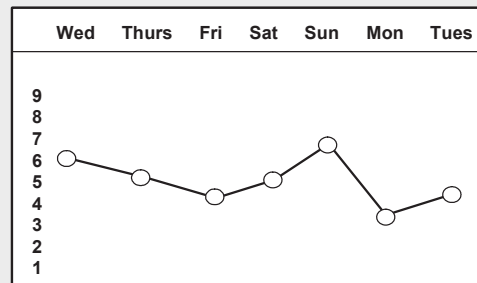
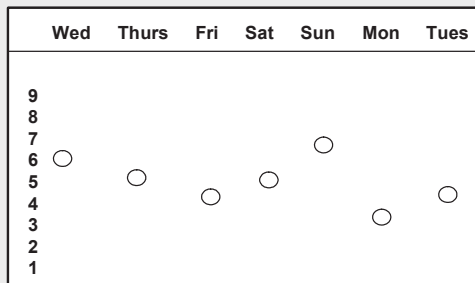
**2. Ask and discuss:** *Was it difficult to notice your risky thoughts?*

### Daily Check In

Ask group members about how they did tracking their moods and coping on their Daily Check In. Make graphs based on one group member's Daily Check In.

**3.** Start the graph with the day of the week the group meets. If your group meets on a Wednesday, write "Wednesday" or "Wed" in the first space at the top of the graph.

**4. Ask** for a volunteer from the group to share the numbers **related to mood** on his or her scale. Make a graph on the board like the example below. If the group member's mood was a 6 on the first day, mark a dot at 6 below "Wed."

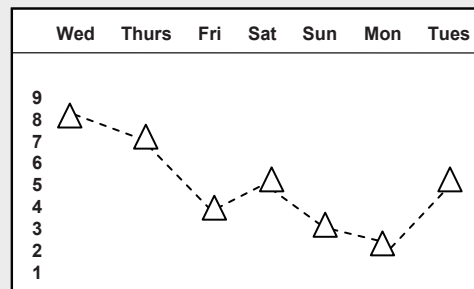
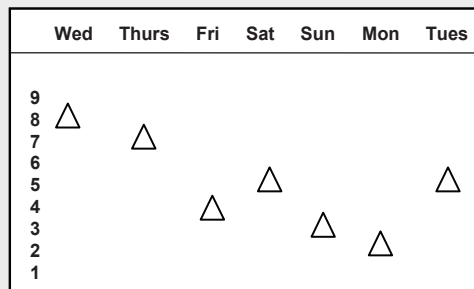


5. When you are finished adding dots that represent the volunteer’s mood for each day, draw lines between the dots to show how mood can change up and down.

6. **Possible follow-up questions:** *What did you notice about your mood? Your mood was the lowest on [day]. Do you remember what your thoughts were on that day? Your mood was higher on [day]. What thoughts were you having on that day? What do you notice about the connection between your thoughts and your mood? Is there a weekly pattern? Are some days more likely to bring about low moods? If so, what tools can you use to prevent low moods?*

7. Repeat the process for coping, using a new graph. Ask the same volunteer to share the numbers **related to coping** on his or her scale. Add dots to the new graph. If the group member’s coping was 8 on the first day, mark a dot at 8 below “Wed.”

8. When you are finished adding dots that represent the volunteer’s coping for each day, draw lines between the dots to show how cravings can change up and down.



9. **Possible follow-up questions:** *What did you notice about how well you coped with challenges? You coped very well on [day]. What kinds of helpful thoughts were you having on that day? What was your mood? What do you notice about the connections among thoughts, mood, and how you coped?*

10. **Note:** Depending on the size of the group, you may choose to chart the Daily Check In of all group members or just one or two. Some group members will be eager to share each week, but don’t focus only on them.

**1. Write down your thoughts each day.**

**2. Try to catch a risky thought and use a coping thought to keep your mood up and manage your cravings.**

**3. Track your mood and coping** using the Daily Check In.

# NEW TOPIC: HOW TO “CHECK” AND “CHANGE” YOUR HARMFUL THOUGHTS

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## LEADER TIPS

**Time: 5 minutes**

**Group Member’s Workbook: Page 98**

- 1. Say:** *We have talked about how to notice your harmful thoughts and some different ways that you can manage or “talk back” to them. Today we will talk about more strategies. Feel free to try out different methods. You may find that one works better for you than others.*
- 2. Review** the text.

The way you think is probably familiar, comfortable, and automatic. Changing your thinking habits may be difficult at first. Just like learning a new sport, it takes practice. But it is possible!

You can use several strategies to “talk back” to your harmful thoughts to improve your mood and decrease cravings. Three strategies are described in this session.

- Be a detective—gather evidence to find out more about your thoughts and decide whether they are harmful or helpful. Are there alternative ways to look at the same things?
- Use “Yes, But” statements to turn your harmful thoughts into helpful thoughts.
- Replace a harmful thought with a helpful thought.



## Examine the Evidence

### LEADER TIPS

**Time:** 20 minutes

**Group Member's Workbook:** Page 99

- 1. Say:** *One way you can manage a harmful thought is to look at it more closely and see if it is really true. Pretend that you are a detective. You will gather evidence about the thought and examine the thought more closely to discover whether it is accurate, complete, and balanced.*
- 2. Say:** *Take a minute to remember a thought that brought your mood down recently. Write it in your workbook under #1.*
- 3. Say:** *Now let's look at the questions in #2 and examine the evidence related to this thought. Allow group members to write.*
- 4. Ask:** *Who would like to share what you wrote for #1 and #2?*
- 5. Go over** instructions for #3.
- 6. Say:** *Now share your thought to the person sitting next to you and ask the person what he or she thinks about it.*
- 7. Say:** *Now we will look at some other ways you can learn more about your thought.*
- 8. Go over** the instructions in #4.
- 9. Ask:** *For those of you who shared your thought with us earlier, what experiment would you be willing to try to gather more evidence about your thought? The experiment is designed to help you decide whether the thought is accurate, complete, and balanced.*
- 10. Brainstorm** additional experiments with the group and ask the group to write a more helpful thought on #5. Ask the group to volunteer their helpful thoughts.

The next time you have a thought that brings your mood down or causes a strong bad feeling or cravings, take a closer look. Check it out—examine it to find out more about it. Follow these steps.

**1. First, write down a thought that recently brought your mood down or increased your cravings.**



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**2. Ask yourself:** Is the thought mostly true, mostly false, or neither? You can think about these questions to help figure this out.

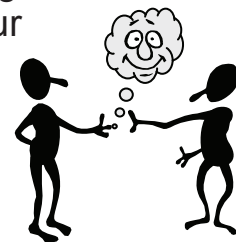
- What is the evidence (i.e., relevant FACTS) that your thought is totally true? For example, what in your past experience suggests that this thought is true?



- What is the evidence (i.e., relevant FACTS) that your thought is totally false? For example, what in your past experience suggests that this thought is false?
- How much of your thought do you think is true vs. false (e.g., 25% true vs. 75% false or 50/50, etc.)?

**3. Share your thought with the person sitting next to you.**

Saying your thought out loud can help you see the thought more clearly. Ask the person what he or she thinks about your thought.



On the other hand, the opinion of someone else is only one piece of evidence. You, as the detective, should consider all the evidence and come to your own conclusions.

**4. Gather more evidence by experimenting.** If you're still not sure whether your thought is accurate, complete, and balanced, you might need to gather more evidence. For example:

**Thought:** "If I go to the party, I will not have a good time."  
(This thought is an example of negative fortune telling.)

**Experiment to gather more evidence:** Go to the party with an open mind and see how you really feel about it.

To test the accuracy of your thought and gather more evidence, what experiment could you try?

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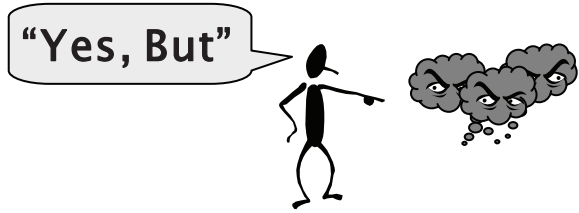
**5. Now that you have examined the evidence, do you think that your thought could be more helpful?** Write a more helpful thought here.

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# Balance Your Thoughts with “Yes, But” Statements



## LEADER TIPS

**Time:** 20 minutes

**Group Member's Workbook:** Page 101

- 1. Say:** *In the last session we talked about strategies for replacing harmful thoughts. Today, we'll continue to discuss some ways to have more helpful thoughts. When you have more helpful thoughts and feel less depressed, you can start to think about how you want your life to be.*
- 2. Introduce the text.** Discuss the ideas with the group members.
- 3. Say:** *Let's look at the "Yes, but" table. I will read the first example aloud. **Read aloud** the text in the first row.*
- 4. Say:** *Now I would like you to try filling in your own example. Group members will work individually but help them as much as they need.*
- 5.** After a few minutes, **ask:** *Would anybody like to read what they wrote?*
- 6. Ask:** *Do you have any comments or questions before we look at another way to have more helpful thoughts?*

What if you examine the evidence and find that your thought is true? For example, it may be true that when you were depressed and using alcohol or drugs, you were not able to do your best work and you lost a job.

Can you accept what has happened in the past and let go? Remind yourself that your future is not yet determined and you can make changes now to avoid repeating past mistakes.

***Accept the Truth and Move On—Add “Yes, But” to Your Thinking***

You might find it difficult to think helpful thoughts about yourself or your situation. One way to fight back against a harmful thought is to add a “yes, but” to it. You don’t have to ignore or deny your problems, but you can add balance to your thinking.

Example of a harmful thought	Add a “Yes, but” statement
I was fired because I performed poorly at my job. Nobody will want to hire such a terrible worker.	<b>Yes</b> , I was fired because I didn’t do my best work, <b>but</b> now I am putting a lot of effort into improving my depression and maintaining my recovery. I will find another job and do great work.
I am always depressed.	<b>Yes</b> , I may be depressed right now, <b>but</b> I am going to group therapy to help me change my mood.
I will never stop drinking.	<b>Yes</b> , I have relapsed in the past, <b>but</b> I am working hard at a realistic plan for staying sober.

**My examples of harmful thoughts**

**Add “yes, but” statements**

	Yes,  <b>but</b>
	Yes,  <b>but</b>
	Yes,  <b>but</b>

# Find a Replacement Thought for Your Harmful Thought

## LEADER TIPS

**Time: 25 minutes**

**Group Member's Workbook: Page 103**

**1. Say:** *After you notice a harmful thought, you can replace your harmful thought with a helpful thought. If your thought is incomplete, for example, you can replace it with a complete thought. There are different ways to generate helpful thoughts when faced with harmful thoughts. Examining the evidence and coming up with a more helpful thought is one such process that we discussed earlier today. Using the "Yes, But" technique is another process. Now we will discuss another method of finding replacement thoughts.*

**2. Introduce** the text through #2.

**3. Say:** *Can everybody identify one harmful thought? Write* one or more harmful thought on the board.

**4.** Make sure that group members have not identified a statement of fact about things that are difficult, such as "I have diabetes" or "Someone in my family just died." Help them understand the difference between having thoughts about a difficult situation and having thoughts that add unnecessary suffering to an already difficult situation. For example, a person might think "I have diabetes" (a statement of fact) "and therefore I will never have fun" (a harmful thought). You can help a group member understand this difference by asking him or her to fill in the rest of this sentence: "I have diabetes and because of that ...." Or, "I am a former drug user and because of that ...."

**5. Say:** *OK, now we have a harmful thought. Is it accurate, complete, and balanced?*

**6. Say:** *Can anybody suggest a thought that would be more helpful? Write* the replacement thought on the board.

**7. Say:** *Your workbook has several examples of replacement thoughts. Notice that they are organized around the common habits of harmful thinking that we talked about in Session 2. Do you notice any harmful thoughts that you have had in the past?*

**8. Say:** *Once you have identified your harmful thoughts, it is easier to respond to them. You can take a good look at them; decide whether they are accurate, complete, and balanced; and replace them with a helpful thought.*

1. The next time you have a moment during the day when you notice a change in your mood, stop and take a deep breath. Look into your mind. What are your thoughts at that moment? Do you notice your thoughts as harmful or helpful?



2. Try to replace a harmful thought with a helpful one. Think about these questions:

- If you apply a replacement thought, how does your thinking change?
- When your thinking changes, how does your mood change?

The tables on the next few pages give examples of some helpful thoughts to replace harmful thoughts. Notice that the helpful thoughts are **accurate, complete, and balanced**.

<i>Harmful Thoughts</i>		<i>Helpful Thoughts</i>
Not totally true	→	Accurate, true
Only part of the whole story	→	Complete, whole
Too extreme one way or another	→	Balanced, reasonable



## Examples of Replacement Thoughts

Harmful  
Thought



Helpful  
Thought



All-or-nothing thinking	Replacement (alternative) thoughts
I was a terrible parent.	<b>Yes</b> , I made mistakes as a parent, <b>but</b> I tried my best.
I had one drink. Now I will never be sober.	Yes, I had one drink, but I will learn from this experience and use my new skills to support my recovery.
My mistake ruined everything.	Yes, my mistake cost me some time, but I can learn from it.
I am a complete mess.	I do some things well and I need to improve on others.
I have wasted my entire life because of using alcohol/ drugs.	Even though some time has been lost, I am now sober/ drug-free, and I can still do things that are important to me in order to shape the rest of my life.
<b>Pessimism</b>	
Why even try?	I know if I try hard I will succeed at some things, but not everything.
Once a drug user, always a drug user.	Just because I used drugs in the past doesn't mean I can't get clean now. Many other people have.
Once a drinker, always a drinker.	Many people who drink too much try several times before they quit drinking. I am working hard to stop drinking, and I can be successful if I keep trying.
<b>Negative filter</b>	
Everything in the news is terrible.	Some things in the news are upsetting (dramatic news sells newspapers), but good things happen every day.
Today was awful.	Yes, some really bad things happened today, but some good things probably did, too. And I can try to make tomorrow better.
All you do is criticize me.	I feel bad when you criticize me, but I appreciate it when you bring me coffee in the morning.

**Harmful Thought** 

**Helpful Thought** 

<b>Exaggerating</b>	
If he leaves me, I'll die.	I would like to keep my marriage, but many people go on to live happily after a divorce if they have to, and I could too.
My kid is a terrible mess.	Yes, my kid is having some problems right now, but I know he will learn from his mistakes.
Life is too hard.	Sometimes it feels hard to have the energy to keep trying, but I know that I can take one step at a time. And sometimes things don't seem as hard.
Trying to maintain my recovery is impossible.	Yes, staying sober can be tough, but I will take things one day at a time and try my hardest.
<b>Labeling</b>	
I am a total mess.	I have trouble with some things, but I am good at others; for example, I am good at being a friend.
My daughter is terrible.	I don't like my daughter's behavior right now, but I am proud that she is so bright.
My life is a disaster.	I have had many difficult losses, but many things in my life are good, including my friends and my health.
I'm nothing but a drunk.	I have had trouble drinking too much alcohol, but I am working hard on my recovery. And there are good parts of me that have nothing to do with drinking.
<b>Not giving oneself credit</b>	
I'm lucky I lived.	I lived because I worked hard with my doctors and did everything they said before the surgery.
I don't deserve my job.	Yes, I have made mistakes in my job, but I have also made valuable contributions.
My husband makes our household work.	I contribute to our family in different ways from my husband.
It's just luck that I got clean.	I worked really hard to get off drugs.
<b>Blaming oneself</b>	
I should support my family better.	I supported my family for years and there are still many things I can do for them.
My divorce is my fault.	I made some mistakes in my marriage, but not all of the problems were my fault.
I failed at my job.	I was fired from this job, but I did the best I could at the time.

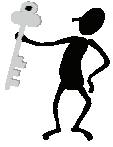
Harmful  
Thought



Helpful  
Thought



<b>Overgeneralization</b>	
When I had that drink, I ruined my recovery.	Yes, I had a lapse, but that doesn't mean that I'll have a full-blown relapse. I can still be proud of the time I was sober and of my efforts to continue my recovery now.
You can't trust anyone.	There are some people you can trust and others you cannot.
<b>"Should'ing"</b>	
I should have known better than to trust him.	I am learning that I need to move slowly when learning to trust others and wait to make sure they are trustworthy.
He should be nicer to me.	Yes, I would like it if he wasn't so rude, but I only have control over how I respond.
<b>Mind reading</b>	
I know John is mad at me; he didn't even speak.	John is acting really grouchy; he may be having his own problems.
My boss frowned at me; I'm going to get fired.	I don't really know why my boss frowned at me. Maybe he is having a bad day.
<b>Negative fortune telling</b>	
I just know something terrible is about to happen.	Yes, I'm worried right now, but that doesn't mean something bad is bound to happen.
This will never work.	This may work or not, but it is worth trying.
Everything will turn out bad.	Some things won't turn out the way I want, but others will.



# KEY MESSAGES

## LEADER TIPS

**Time: 5 minutes**

**Group Member's Workbook: Page 107**

1. **Read aloud** the key messages.
2. **Ask** group members if they have any questions or comments.

### ***Key messages from this session are:***

- You can examine your thoughts to learn more about them and decide whether they are harmful or helpful.
- You can accept that some negative things about you or your life are true, and still move forward in life with a “Yes, But” exercise.
- You can learn to “Change It”— replace a harmful thought with a helpful thought in order to feel better and remain sober.

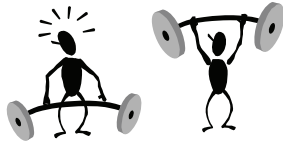


What do you want to remember about this session?  
**Write your own key messages here.**

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## PRACTICE

### LEADER TIPS

**Time: 10 minutes**

**Group Member's Workbook: Page 108**

#### **Talking Back to Harmful Thoughts and Increasing Helpful Thoughts**

**1. Say:** *We would like you to look back at the ideas in your workbook for how to talk back to your harmful thoughts and have more helpful thoughts. We discussed using "Examine the Evidence" and "Yes, But" strategies and replacement thoughts to change a harmful thought. Think about which one works best for you.*

#### **Review the Helpful Thoughts You Wrote Down**

**2. Tell** the group that you would like them to review the helpful thoughts they wrote after Sessions 1, 2, and 4. **Say:** *At the end of next session, you will have a chance to choose the helpful thoughts that have been the most important to you and write them down on a new card called a "coping card." We will laminate your coping cards to make them sturdy tools you can carry with you or keep at home. You can pull out your coping card whenever you need to keep your mood up or fight cravings.*

#### **Daily Check In**

**3. Remind** group members that the Daily Check In now includes a place at the bottom where they should indicate how many harmful and helpful thoughts they had each day.

**1. Try using one or more of the tools that we discussed. Think about which method worked best for you.**

- **Examine the evidence**
- **Yes, but**
- **Replacement thoughts**

**2. Review the helpful thoughts you wrote down on index cards.** In the next session, you will have a chance to think about which ones would be most helpful to you in the future to keep your mood up and support your recovery.

**3. Track your mood and coping using the Daily Check In.**

# DAILY CHECK IN

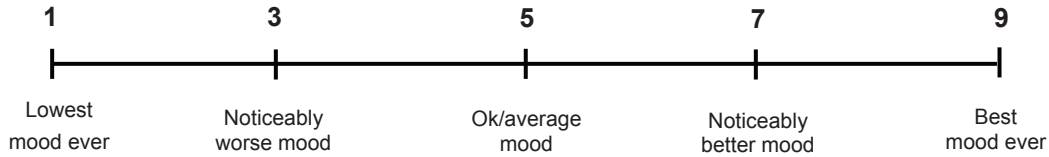


## Instructions

Today's Date: \_\_\_\_\_

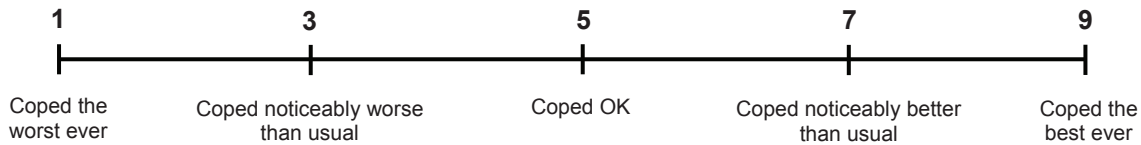
- Keep the scale beside your bed. Before you go to bed, think about your mood and how you coped with challenges to your recovery throughout the day.
- Circle a number on both scales. Try to use all the numbers, not just 1, 3, 5, 7, or 9. There are no wrong answers. Only you know how you have felt each day.
- Did you notice your thoughts? At the bottom, write in the number of harmful and helpful thoughts you had each day.
- If you want to track your mood and how you coped with challenges over a period of time longer than a week, write down your ratings on a calendar.

1.



Write in the day of the week.		_____	_____	_____	_____	_____	_____
<b>Mood</b>	Best mood ever	9	9	9	9	9	9
		8	8	8	8	8	8
	Noticeably better mood	7	7	7	7	7	7
		6	6	6	6	6	6
	Ok/average mood	5	5	5	5	5	5
		4	4	4	4	4	4
	Noticeably worse mood	3	3	3	3	3	3
	2	2	2	2	2	2	
	Lowest mood ever	1	1	1	1	1	1

2.



Write in the day of the week.		_____	_____	_____	_____	_____	_____
<b>Coping with challenges to my recovery</b>	Coped the best ever	9	9	9	9	9	9
		8	8	8	8	8	8
	Coped noticeably better than usual	7	7	7	7	7	7
		6	6	6	6	6	6
	Coped OK	5	5	5	5	5	5
		4	4	4	4	4	4
	Coped noticeably worse than usual	3	3	3	3	3	3
	2	2	2	2	2	2	
	Coped the worst ever	1	1	1	1	1	1

3.

Write in the day of the week.	_____	_____	_____	_____	_____	_____
<b>Number of harmful thoughts</b>						
<b>Number of helpful thoughts</b>						



# FEEDBACK

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## LEADER TIPS

**Time: 2 minutes**

**Group Member's Workbook: Page 110**

Before ending the group, ask group members to comment on the session.

- What was helpful about today's session?
- What was less helpful?



## LOOKING AHEAD

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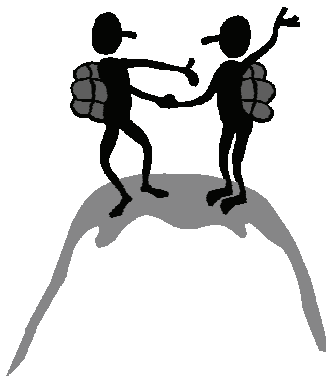
### LEADER TIPS

**Time: 1 minute**

**Group Member's Workbook: Page 110**

1. **Read aloud** the text.
2. **Congratulate** group members for attending the group.

The focus in Session 6 is on the future. You can use the CBT messages to help you manage your mood and cravings, and help to make your life what you want it to be.





# GROUP LEADER SELF-EVALUATION FORM: THOUGHTS, SESSION 5

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## **Instructions**

**Taught/Done:** Were you able to cover the material? If you didn't do this in this session but you do it later, when it is done write in the date you covered it.

**Difficult to Teach:** How hard was it to teach this part of the session? Circle "easy," "OK," or "hard."

	<b>Taught/Done? (circle yes or no)</b>		<b>How difficult was it to lead this part of the session? (circle easy, OK, or hard)</b>		
Welcome	Yes	No	Easy	OK	Hard
Purpose and Outline	Yes	No	Easy	OK	Hard
Announcements	Yes	No	Easy	OK	Hard
How Have You Been Feeling?	Yes	No	Easy	OK	Hard
Review					
Last Session	Yes	No	Easy	OK	Hard
Practice	Yes	No	Easy	OK	Hard
New Topic: How to "Check" and "Change" Your Harmful Thoughts					
Examine the Evidence	Yes	No	Easy	OK	Hard
Balancing Your Thoughts with "Yes, But" Statements	Yes	No	Easy	OK	Hard
Find a Replacement Thought for Your Harmful Thought	Yes	No	Easy	OK	Hard
Key Messages	Yes	No	Easy	OK	Hard
Practice	Yes	No	Easy	OK	Hard
Feedback	Yes	No	Easy	OK	Hard
Looking Ahead	Yes	No	Easy	OK	Hard





## LEADER TIPS

### Materials Needed

- **Group Member’s Workbooks** (“Thoughts, Alcohol/Drug Use, and Your Mood”)—a few copies to loan in case some group members forgot to bring their own workbooks
- **Pens**—enough for everyone in the group
- **Dry erase board, chalkboard,** or large sheets of paper to present material to group
- **Kleenex** or other facial tissue
- **3” x 5” index cards**—enough so that each group member can have one
- **Laminating paper**—enough for each group member to laminate one index card
- **Scissors**—3-4 pair—enough for group members to share
- **Certificates of Achievement** for graduating group members

### Group Leaders’ Goals

- Strengthen group members’ ability to “talk back” to their harmful thoughts using Catch It, Check It, Change It.
- Talk about how helpful thoughts can help group members live the life they want.
- Say goodbye to graduating group members.

### Welcome Group Members

As group members arrive, greet them by name. Ask them informally how their practice went.

### Purpose and Outline

**Introduce** the Purpose and Outline.

## PURPOSE

- Practice Catch It, Check It, Change It.
- Summarize coping strategies you have learned for managing mood and cravings, and think about using them in the future.
- Say goodbye to graduating group members.

## OUTLINE

Announcements

Review

New Topic: You Can Shape Your Future with Helpful Thoughts

Catch It, Check It, Change It

Coping Cards Can Help You Use Helpful Thoughts and Live the Life You Want

Key Messages

Practice

Review of Module

Goodbye to Graduating Group Members

Feedback

Looking Ahead to the Next Module



# ANNOUNCEMENTS

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## LEADER TIPS

**Time: 2 minutes**

**Group Member's Workbook: Page 112**

1. If any members of your group will have completed all three modules at the end of this session, they will be “graduating” from CBT. Tell the group who these graduates are and say, “*Congratulations.*”

2. **Say:** *At the end of this session, we will be talking more with these group members to find out how they are feeling and what their plans are for the future.*

The group leaders will make any announcements that might be necessary.

Is there anything you need to let the leaders know about?

# REVIEW

## Last Session

### LEADER TIPS

**Time:** 5 minutes

**Group Member's Workbook:** Page 112

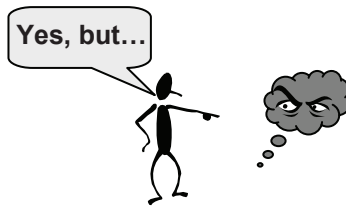
- 1. Say:** *In the last session, we talked about the fact that after you have learned how to identify your thoughts, you can learn how to respond to your harmful thoughts to feel better.*
- 2. Go over** the text under “Last Session.”
- 3. Say:** *I’m going to read the key messages from last session. Read aloud the key messages.*
- 4. Ask:** *Does anybody have any questions before we look at this session’s new topic?*

Last session we talked about some ways to manage a harmful thought.

- Examine the evidence



- Add “Yes, but”



- Replace a harmful thought  
with a helpful thought.



What do you remember most from the last session?

***Key messages from last session are:***

- You can examine your thoughts to learn more about them and decide if they are harmful or helpful.
- You can accept that some negative things about you or your life are true, and still move forward in life with a “Yes, But” exercise.
- You can learn to “Change It”— replace a harmful thought with a helpful thought in order to feel better and remain sober.



# Practice

## LEADER TIPS

**Time: 15 minutes**

**Group Member's Workbook: Page 113**

### Try Using One or More Tools to Have More Helpful Thoughts

**1. Say:** *We asked you to try adding a "Yes, But" to your harmful thoughts and we also talked about examining the evidence and using replacement thoughts. Which worked the best for you?*

### Review the Helpful Thoughts You Wrote Down in the Past Few Weeks.

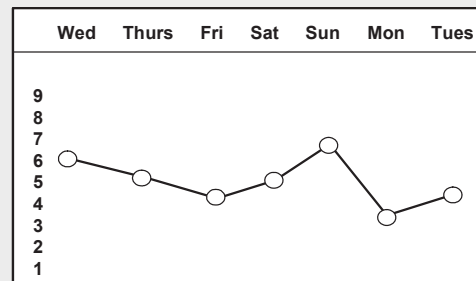
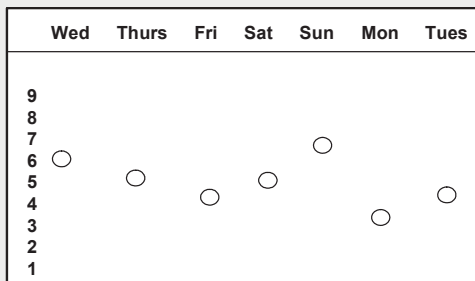
**2. Say:** *Later in this session we will talk more about the thoughts you find to be the most helpful.*

### Daily Check In

Ask group members about how they did tracking their moods and cravings on their Daily Check In. Make graphs based on one group member's Daily Check In.

**3.** Start the graph with the day of the week the group meets. If your group meets on a Wednesday, write "Wednesday" or "Wed" in the first space at the top of the graph.

**4.** Ask for a volunteer from the group to share the numbers **related to mood** on his or her scale. Make a graph on the board like the example below. If the group member's mood was a 6 on the first day, mark a dot at 6 below "Wed."

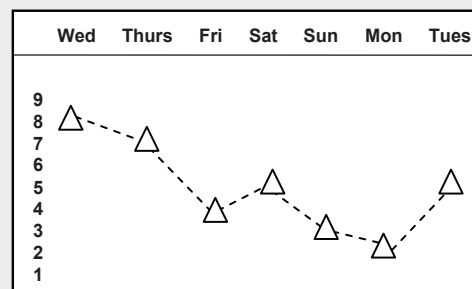
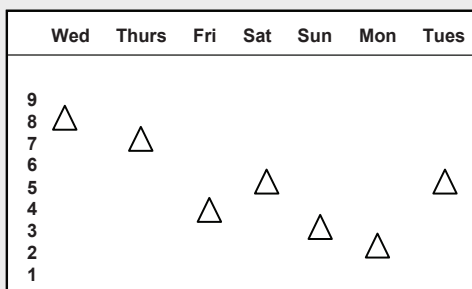


5. When you are finished adding dots that represent the volunteer's mood for each day, draw lines between the dots to show how mood can change up and down.

**6. Possible follow-up questions:** *What did you notice about your mood? Do you remember what your thoughts were on the day your mood was lowest? Your mood was higher on [day]. What thoughts were you having on that day? What do you notice about the connection between your thoughts and your mood? Is there a weekly pattern? Are some days more likely to bring about low moods? If so, what tools can you use to prevent low moods?*

7. Repeat the process for coping, using a new graph. Ask the same volunteer to share the numbers **related to coping** on his or her scale. Add dots to the new graph. If the group member's coping was 8 on the first day, mark a dot at 8 below "Wed."

8. When you are finished adding dots that represent the volunteer's coping for each day, draw lines between the dots to show how coping can change up and down.



**9. Possible follow-up questions:** *What did you notice about how well you coped with challenges? You coped very well on [day]. What kinds of helpful thoughts were you having on that day? What was your mood? What do you notice about the connections among thoughts, mood, and how you coped?*

**10. Note:** Depending on the size of the group, you may choose to chart the Daily Check In of all group members or just one or two. Some group members will be eager to share each week, but don't focus only on them. The point is to teach how to apply the CBT skills to specific, real-life situations, but not necessarily to solve **every** difficult situation. (This would be an example of all-or-nothing thinking: "If CBT doesn't solve all my problems, then it doesn't work.")

At the end of last session, we asked you to:

**1. Try using one or more of the tools that we discussed. Think about which method worked best for you.**

- ***Examine the evidence***
- ***Yes, but***
- ***Replacement thoughts***

**2. Review the helpful thoughts you wrote down in the past few weeks.**

**3. Track your mood and coping using the Daily Check In.**

# NEW TOPIC: YOU CAN SHAPE YOUR FUTURE WITH HELPFUL THOUGHTS

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## Catch It, Check It, Change It

### LEADER TIPS

**Time: 20 minutes**

**Group Member's Workbook: Page 114**

- 1. Say:** *The Catch It, Check It, Change It method combines some of the other strategies that we have been talking about. This exercise ties together the process of noticing a harmful thought, examining the thought, and then coming up with a replacement thought.*
- 2. Go over** the text “Catch It, Check It, Change It.” **Ask** for questions as you discuss the material.
- 3. Say:** *Look at the table in your workbook.* **Read** the instructions for the table.
- 4. Catch It. Say:** *For “Catch It,” you are trying to catch the thought that made your mood go down. Sometimes it is easier to notice your feelings first—you might notice that you are feeling bad but not really know why, or what your thoughts are. You can think of a negative emotion or low mood as a stop sign to “catch” your thought. Think about a time in the last week when you noticed your mood get worse. What was the situation? What were your feelings? What were your thoughts?*
- 5. Check It. Say:** *Now, let’s “check” whether this thought is harmful or helpful. Are the consequences of the thought good for you or bad for you?*  
**Ask** group members if they would like to share their thoughts. Write them on the board.
- 6. Change It. Say:** *Now, let’s “change” this harmful thought to a more helpful thought. Can you think of a replacement thought for the harmful thought?*
- 7. Practice the exercise one or two times on the board, then say:** *Take a minute and try filling out the table with your own example.*
- 8.** After allowing time to complete the exercise, try to review as many examples from the group as possible.

In Session 3, you learned about “Catch It, Check It, Change It”—a tool to improve your mood and support your recovery. Now let’s practice using it.

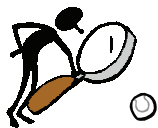
First, a quick reminder of the three steps:



## 1. Catch It

The first step is to notice—or “catch”—your harmful thought.

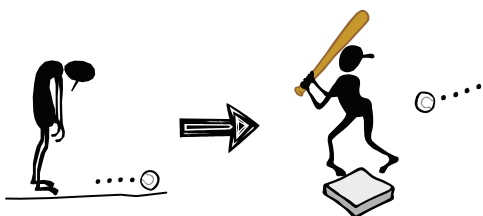
If you find that your feelings are easier to catch than your thoughts, you can use your feelings as a signal to stop and focus on what you are thinking.



## 2. Check It

Examine your thought more closely. What evidence do you have against your thought? How could your thought be more accurate, complete, and balanced?

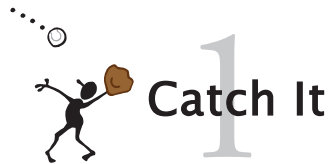
## 3. Change It



How could you change a harmful thought? What helpful thought could replace your harmful thought?

## Catch It, Check It, Change It

Think about a time in the last week when you noticed a change in your mood or increase in cravings. Then try to answer the questions in the table below.



What happened?	What were your feelings?	What was your thought?	Examine your thought. What evidence do you have against your thought?	Replace the harmful thought with a helpful thought.
<i>I had a fight with my partner.</i>	<i>Sad, angry.</i>	<i>My partner always gets his/her way.</i>	<i>My partner and I sometimes agree to do things my way.</i>	<i>We won't always agree. My partner gets his/her way sometimes, but I often get what I want too.</i>
<i>I had a dream that I was drinking.</i>	<i>Scared, upset</i>	<i>I'm never going to be sober.</i>	<i>I've been clean for the past month and am sober now.</i>	<i>I am sober today and am learning ways to stay sober in the future. The dream reminds me how much it means to me to remain sober.</i>

# Coping Cards Can Help You Use Helpful Thoughts and Live the Life You Want

## LEADER TIPS

**Time: 30 minutes**

**Group Member's Workbook: Page 116**

**1.** This activity provides a take-home tool to support group members' recovery from depression and alcohol/drug use.

**Say:** *In this module we have discussed the importance of noticing your thoughts. You have been practicing how to change harmful thoughts to helpful thoughts. Helpful thoughts can improve your mood and make it less likely you will drink or use.*

*Now you will make a coping card that you can carry with you wherever you go. Think of this card as an emotional first aid kit that you can pull out and use whenever you need it.*

**2. Ask:** *What have been the most helpful coping thoughts for you? Write list on board.*

**3. Say:** *In addition to reminding yourself about these thoughts, it's also important to remind yourself things you could do to prevent relapses in the future.*

**4. Pass out** one index card to each person.

**5. Go over** the instructions. Help group members complete their coping card by writing down helpful thoughts on one side and on the second side writing relapse prevention techniques.

**6. Ask** group members for examples of where they plan to keep their cards and how they plan to use them. **Say:** *Think about a time in the past week when you could have used the card. When was that?*

**7. Show** them how to laminate the cards.

Make a “coping card” to help you remember and use helpful thoughts.

- Use one 3” x 5” index card.
- On one side of the card, write “Coping Thoughts” at the top. Write as many helpful thoughts as you can think of.

**Coping Thoughts**

For example:

- People know they can trust me.
- I really like the fact that I care about other people.
- I have the strength to get through this.
- These cravings will pass.

- On the other side of the card, write “Relapse Prevention Plan.” Make some notes for yourself regarding how to prevent a return to alcohol and/or drug use and to prevent a relapse to depression.

**Relapse Prevention Plan**

Relapse prevention examples:

- Could you catch a harmful thought, check it, and change it?
- Could you call a friend or sponsor?
- What else could you do?





When you are feeling down or feel like drinking or using drugs, pull out your coping card and read it. It can help you get past the moment of stress.

Keep your coping card some place handy so you can pull it out and look at it whenever you feel down or have cravings. Where will it help you the most? If you have risky thoughts and cravings during the day, carry your coping card in your purse or wallet.



If you are likely to feel down or have strong cravings at night, keep your card at home.

You could tape it to the wall beside your bed,



...or put in on the refrigerator.





# KEY MESSAGES

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## LEADER TIPS

**Time: 5 minutes**

**Group Member's Workbook: Page 118**

1. **Read aloud** the key messages.
2. **Ask** group members if they have any questions or comments.

### ***Key messages from this session are:***

- Your thoughts can help you feel more in control over your life.
- Having more helpful thoughts can improve your mood, support your recovery, and help you live the life you want.
- A coping card can help you remember to use helpful thoughts in your daily life.



What do you want to remember about this module?  
**Write your own key messages here.**

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## PRACTICE

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### LEADER TIPS

**Time: 10 minutes**

**Group Member's Workbook: Page 119**

#### **Catch It, Check It, Change It**

1. **Suggest** to group members that they continue to use Catch It, Check It, Change It to manage their thoughts.

#### **Use Your Coping Card**

2. Group members should find a place to keep their coping card and remember to use it.

#### **Daily Check In**

3. **Remind** group members that the Daily Check In includes a place at the bottom to indicate how many harmful and helpful thoughts they had each day.

**1. Keep using Catch It, Check It, Change It** to notice, examine, and change your harmful thoughts.

**2. Use your coping card.** Where will you keep it? How will you remember to use it when you are feeling down or having cravings?

**3. Track your mood and coping using the Daily Check In.** Try to count how many harmful and helpful thoughts you have each day and write in the numbers at the bottom of the scale.

# DAILY CHECK IN

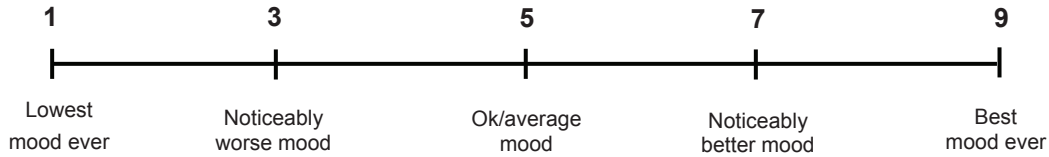


## Instructions

Today's Date: \_\_\_\_\_

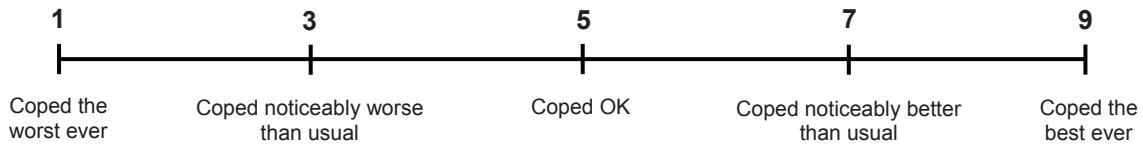
- Keep the scale beside your bed. Before you go to bed, think about your mood and how you coped with challenges to your recovery throughout the day.
- Circle a number on both scales. Try to use all the numbers, not just 1, 3, 5, 7, or 9. There are no wrong answers. Only you know how you have felt each day.
- Did you notice your thoughts? At the bottom, write in the number of harmful and helpful thoughts you had each day.
- If you want to track your mood and how you coped with challenges over a period of time longer than a week, write down your ratings on a calendar.

1.



Write in the day of the week.		_____	_____	_____	_____	_____	_____
<b>Mood</b>	Best mood ever	9	9	9	9	9	9
		8	8	8	8	8	8
	Noticeably better mood	7	7	7	7	7	7
		6	6	6	6	6	6
	Ok/average mood	5	5	5	5	5	5
		4	4	4	4	4	4
	Noticeably worse mood	3	3	3	3	3	3
	2	2	2	2	2	2	
	Lowest mood ever	1	1	1	1	1	1

2.



Write in the day of the week.		_____	_____	_____	_____	_____	_____
<b>Coping with challenges to my recovery</b>	Coped the best ever	9	9	9	9	9	9
		8	8	8	8	8	8
	Coped noticeably better than usual	7	7	7	7	7	7
		6	6	6	6	6	6
	Coped OK	5	5	5	5	5	5
		4	4	4	4	4	4
	Coped noticeably worse than usual	3	3	3	3	3	3
	2	2	2	2	2	2	
	Coped the worst ever	1	1	1	1	1	1

3.

Write in the day of the week.	_____	_____	_____	_____	_____	_____
<b>Number of harmful thoughts</b>						
<b>Number of helpful thoughts</b>						

# REVIEW OF MODULE: THOUGHTS, ALCOHOL/DRUG USE, AND YOUR MOOD

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## LEADER TIPS

**Time: 10 minutes**

**Group Member's Workbook: Page 121**

- 1. Say:** *We have covered a lot of information in the Thoughts module. You have new skills and tools that can help you fight back against depression and the urge to drink or use.*
- 2. Say:** *The key messages from each session are printed in your workbook. They can be summarized into three ideas.*
- 3. Go over** the module's key messages. You do not need to read every key message from each session. **Ask and discuss:** *Which of these will be the most helpful to you? Do you have questions about anything?*
- 4. Say:** *There is room in your workbooks for you to write a few important things you want to remember from Thoughts.*

Give group members a few minutes to write. Remind them that they can look back at the key messages they wrote at the end of each session.

Over the past six sessions, we have been focusing on thoughts. You have learned that your thoughts affect how you feel and that your feelings affect your drinking and using.

You have also learned that the way you think can help you feel more in control over your life, so you feel you can shape your life into the kind of life you want to live.

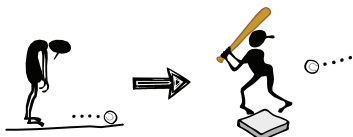
***How have you made changes in the way you think?***



1. You can **catch**, or notice, your thoughts.



2. You can **check**, or examine, your thoughts to see if they help you or harm you. A helpful thought is healthy for you—it makes you feel good and helps you maintain your recovery.



3. You can **change** the harmful thoughts that get in the way of your good mood and recovery, and choose helpful thoughts instead.

What idea will help you the most? What will you remember from the Thoughts module? Write your ideas below.



***The most important thing I learned from the Thoughts module is:***

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**Key messages from “Thoughts, Alcohol/Drug Use, and Your Mood” are:**

**Session 1: CBT Can Help With Mood and Alcohol/Drug Use Problems**

- A thought is a sentence you say to yourself or a picture in your mind. A feeling is an emotion or mood.
- Thoughts are helpful or harmful to you depending on how they make you feel.
- You can learn to notice or “catch” your harmful thoughts.

**Session 2: Your Thoughts, Mood, and Alcohol/Drug Use Are Connected**

- You can use your helpful thoughts to improve your mood and decrease your cravings.
- Your mood can affect your drinking/using.
- Drinking/using can affect your mood.

**Session 3: How to Identify Harmful Thoughts**

- You can learn to notice or “catch” your harmful thoughts by being aware of common habits of harmful thinking.
- You can use “Check It” to examine your thoughts and see if other alternatives are possible.
- You can use “Change It” to change your harmful thoughts to helpful ones.

### ***Session 4: Catching and Checking Your High-Risk Harmful Thoughts***

- A harmful thought can lead to another harmful thought, bringing your mood down.
- A helpful thought can lead to another helpful thought, bringing your mood up.
- Helpful thoughts can help you cope with cravings.

### ***Session 5: Talking Back to Your Harmful Thoughts***

- You can examine your thoughts to learn more about them and decide if they are harmful or helpful.
- You can accept that some negative things about you or your life are true, and still move forward in life with a “Yes, But” exercise.
- You can learn to “Change It”— replace a harmful thought with a helpful thought in order to feel better and remain sober.

### ***Session 6: Using Your Thoughts to Shape Your Future***

- Your thoughts can help you feel more in control over your life.
- Having more helpful thoughts can improve your mood, support your recovery, and help you live the life you want.
- A coping card can help you remember to use helpful thoughts in your daily life.





# GOODBYE TO GRADUATING GROUP MEMBERS

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## LEADER TIPS

**Time: 20 minutes**

**Group Member's Workbook: Page 125**

**Leader goals:**

- Reinforce the work the group members have done and the changes they have made.
- Help the group members develop a specific plan for what they will do if they become depressed again or if they have strong cravings. Focus on what they can try on their own, but remind them that it is ok to seek treatment again.

**1.** It is important to talk with group members who have completed all the CBT modules and who will be leaving the group. If nobody in your group is graduating, skip this section.

**2. Say:** *As you know, some members of the group have finished CBT and will be leaving the group. Our graduates are \_\_\_\_\_ (say their names).*

**3. Look at the graduates and say:** *How do you feel about leaving?* Give them a few minutes to respond.

**4. Discuss** the questions listed.

**5. Say:** *Would other group member like to share what they have noticed about changes these group members have made or what you appreciated about having them in the group?*

**6.** Say something specific to each group member who is leaving. (Think about what you want to say ahead of time.) Be direct about the group member's contribution to the group and the changes you have seen the group member make.

**7.** Present certificates of achievement to the graduating group members. (You can photocopy the sample certificate from the Group Leader's Introduction workbook. See the section called "Supplies You Will Need.")

If you have completed all three modules in CBT, you are now a CBT graduate.

CONGRATULATIONS !

***Since you are leaving the group, you might want to talk about the following.***

1. What have you learned that you think will help you feel better and manage your cravings?
2. What have you learned that will help you reach some of your goals?
3. How will you get support in your everyday life when you are no longer coming to group meetings?
4. What will you do the next time you feel depressed?
5. What will you do the next time you feel like drinking or using?
6. How can your thoughts help you get a sense of greater control over your life?

***If you still feel depressed or if you are having strong cravings that you feel you cannot resist tell your group leader, and he or she will help you get further treatment.***





# FEEDBACK

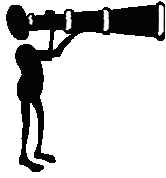
## LEADER TIPS

**Time: 2 minutes**

**Group Member's Workbook: Page 126**

**Encourage** group members to comment on today's session and on the Thoughts module.

- What was helpful in today's session and in the Thoughts module?
- What was less helpful?



## LOOKING AHEAD TO THE NEXT MODULE

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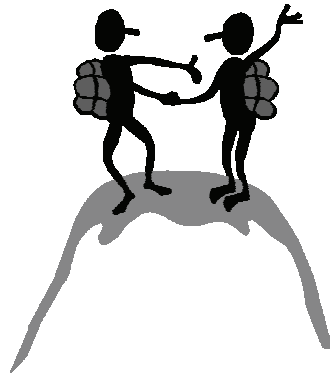
### LEADER TIPS

**Time: 1 minute**

**Group Member's Workbook: Page 126**

*Say: Those of you who are continuing with CBT will begin another module next time. The new module is about how your activities can affect your mood and your cravings. You can improve your mood and support your recovery by doing more activities and activities that are helpful rather than harmful. Next time we also will be welcoming new group members who are just starting CBT.*

The next module is called “Activities, Alcohol/Drug Use, and Your Mood.” Because of your depression and drug/alcohol use, you may not feel like doing things that you used to enjoy or that are not related to getting and using drugs or alcohol. In the Activities module, we will discuss the importance of doing activities even when you don’t feel like it. Activities will help you feel better and help decrease your cravings.



# GROUP LEADER SELF-EVALUATION FORM: THOUGHTS, SESSION 6

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## **Instructions**

**Taught/Done:** Were you able to cover the material? If you didn't cover something in this session but you do it later, when it is done write in the date you covered it.

**Difficult to Teach:** How hard was it to teach this part of the session? Circle "easy," "OK," or "hard."

	<b>Taught/Done? (circle yes or no)</b>		<b>How difficult was it to lead this part of the session? (circle easy, OK, or hard)</b>		
Welcome	Yes	No	Easy	OK	Hard
Purpose and Outline	Yes	No	Easy	OK	Hard
Announcements	Yes	No	Easy	OK	Hard
Review					
Last Session	Yes	No	Easy	OK	Hard
Practice	Yes	No	Easy	OK	Hard
New Topic: You Can Shape Your Future with Helpful Thoughts					
Catch It, Check It, Change It	Yes	No	Easy	OK	Hard
Coping Cards Can Help You Use Helpful Thoughts and Live the Life You Want	Yes	No	Easy	OK	Hard
Key Messages	Yes	No	Easy	OK	Hard
Practice	Yes	No	Easy	OK	Hard
Review of Module	Yes	No	Easy	OK	Hard
Goodbye to Graduating Group Members	Yes	No	Easy	OK	Hard
Feedback	Yes	No	Easy	OK	Hard
Looking Ahead to the Next Module	Yes	No	Easy	OK	Hard

# RESOURCES FOR GROUP MEMBERS

## ORGANIZATIONS THAT PROVIDE HELP FOR DEPRESSION AND DRINKING OR USING

### **Alcoholics Anonymous (AA)**

1-800-923-9722

### **Depression and Bipolar Support Alliance (DBSA)**

1-800-826-3632

[www.dbsalliance.org](http://www.dbsalliance.org)

### **Narcotics Anonymous (NA)**

[www.na.org](http://www.na.org)

### **National Alliance for the Mentally Ill (NAMI)**

1-800-950-6264

[www.nami.org](http://www.nami.org)

### **Project Return** (wellness and support for people with mental illness)

### **Recovery Inc.** (self-help program for mental health)

1-312-337-5661

[www.recovery-inc.org](http://www.recovery-inc.org)

## BOOKS AND VIDEOTAPES ABOUT DEPRESSION AND ALCOHOL/DRUG USE

### ***Control Your Depression***

Authors: Peter M. Lewinsohn, Ricardo F. Muñoz, Mary A. Youngren, and Antonette M. Zeiss.  
Published by Fireside Books, New York, New York, 1992.

### ***Coping with Depression (videotape)***

Author: Mary Ellen Copeland  
Published by New Harbinger Publications, Inc., Oakland, California, 1994.

### ***Feeling Good: The New Mood Therapy***

Author: David D. Burns  
Published by William Morrow, New York, New York, 1980.

### ***The Loneliness Workbook: A Guide to Developing and Maintaining Lasting Connections***

Author: Mary Ellen Copeland.  
Published by New Harbinger Publications, Inc., Oakland, California, 2000.

### ***Mind Over Mood: Change How You Feel by Changing the Way You Think***

Authors: Dennis Greenberger and Christine A. Padesky.  
Published by Guilford Press, New York, New York, 1995.



## READ WHAT PREVIOUS GROUP MEMBERS HAVE SAID ABOUT THIS GROUP!

*“When I feel like a situation is going to anger me, using tools that I’ve learned (such as “Catch It, Check It, Change It”) throughout the different modules, enabled me to handle the situation at hand in a more responsible and caring type of way.”*

**“I’ve learned how to open up. I learn that there is more than one way to look at things.”**

*“There is no such thing as a stupid question.”*

**“CBT has given me the tools I can use to change my life and be happy and healthy. I can become a responsible person who has freedom from fear. Before, I did not realize I had an option.”**

**“I have realized life isn’t what I perceived it to be as black and white; it can be truly beautiful and colorful...if you allow yourself to open up to a new way of life.”**

*“My thought process has changed by allowing me to decide what kind of mood or day I will be having.”*

**“The fear of change was removed through CBT, because I was provided with insight and tools that enabled me to change myself and how I interacted with others. It gave me the power of self- awareness.”**

*“I have learned through these classes the tools for a happier and productive life.”*