



EMOTIONAL SUPPORT PACK

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MANAGING LOW MOOD & FEELINGS OF HOPELESSNESS

People who feel hopeless, experience a lack of optimism and motivation. They experience a lack of interest and have negative thoughts about the future, future improvements, or a negative view of the self. Feelings of hopelessness can often lead an individual to lose interest in important objects, activities, events, or people. Someone who has become hopeless may no longer value things that were once important. The emotion is often associated with the following; a lack of inspiration, feelings of powerlessness, helplessness, abandonment, captivity, oppression and isolation. These feelings may become worse depending on a person's mood, coping strategy and resilience.

It may not come to you as a surprise that hopelessness is closely linked to poor mental, emotional and physical health. Often hopelessness can have a significant influence on people's behaviour, as it may reflect an individual's negative view of their future. If one views their present and future circumstances as negative, this individual will often believe that their situation will never improve. People affected by this often view their situation in a polarised, black and white way. When an individual starts to see the future in this negative way, it usually comes in the form of thoughts like; "there is no point", "nothing I do is making a difference", "I have no hope", "I will never feel better" and "no one can help me". These negative expectations can lead us to see no point in trying to improve our circumstances and lead us to avoid activities and our friends. This means that hopelessness is expressed in one's thinking, emotions and behaviour, implicating a vicious cycle. Hopelessness can lead an individual having a low mood and even thoughts of suicide or suicidal behaviour.

Hopelessness may arise as a response to experiences of loss and grief or major life changes such as an illness. Generally, with activation of internal and external resilience and resources, this type of hopelessness may resolve or recede over time.

Being hopeless is something we may also learn. Roots of hopelessness can lie in personal experiences or attitudes. The process of learning hopelessness rests upon rigid thoughts, feelings and actions, that lead to despair.

But no matter the cause, feelings of hopelessness can be devastating. Not only does it compromise an individual's sense of wellbeing and stability, it may also rob a person of the motivation required to utilise available resources or to reach out for support.

Three steps for building hope:

1. The first is a process of "future-casting" — envisioning a specific future goal in a way that makes it come alive. For example, you might want to live a life that is healthy and can give you the best life-satisfaction while coping with your condition.

- 2. The next step is to work toward your goal. Set yourself realistic goals that are manageable and sustainable. Look at things that are hindering you from achieving this and find strategies that help you to do it, for example learning cognitive behavioural therapy, having a regular exercise routine etc.
- 3. The final step is planning for contingencies. Most hopeful people tend to see multiple solutions to a problem, while the hopeless either don't have a solution at all or only one for the best-case scenario and come up with just one or two pathways to their target. So try to come up with many ways to overcome these obstacles and don't be afraid to change them during the pathway. Sometimes things don't go as planned so try not to ruminate about things that went wrong or may not work but try to see them as a learning opportunity which will help you to find a better solution.

If the situation is truly unchangeable, is there a way to change the goal? You can't avoid a diagnosis of an illness so your goal becomes to make your life as enjoyable and meaningful for you as possible. Your goal becomes to change your perception, your routines and/or your friendships so you can meet more of your needs. If you can't change a life-altering diagnosis, your goal becomes to face it with dignity, self-compassion and strength.

When a low mood can be identified as depression

- Depression affects 1 in 5 people.
- It's normal to feel low, sad or miserable at times and usually these feelings pass in due course. If these feelings are interfering with your life and don't go away after a couple of weeks, or if they come back over and over again for a few days at a time, it could be a sign that you're experiencing depression.
- Different symptoms which can be psychological, physiological and social in nature include:
 - Continuous low mood or sadness, irritability, anger, feeling of emptiness, loss of pleasure in things you usually enjoy, low self-esteem and guilt.
 - Poor concentration, a lack of energy, sleeping more or less than usual.
 - Avoiding contact with friends, taking part in fewer social activities and neglecting activities you usually enjoy doing.

Each person's experience of depression is different and lies on a continuum – a continuous line from not at all depressed to very depressed, and it can change continuously.

Prevention and Self-Management techniques

- Regular exercise, a balanced diet, regular 8 hours of sleep, and cutting down on cigarettes and alcohol can all have a cumulative effect on reducing anxiety and depression.
- Learn CBT skills for prevention and self-management in the Thrive app.
- Thrive provides applied relaxation programmes that can help manage and prevent mild anxiety.
- Mindfulness exercises can help to improve attention control and decrease rumination or anxiety-inducing thoughts. The Thrive app has various guided and unguided meditation exercises you can try.
- Share your feelings with someone you trust (e.g. family, friend, online peer support).
- If your symptoms persist, cause you distress or impact your daily life, we recommend seeking support from your GP, employee assistance programme or other professional support.
- Seek immediate support if you have suicidal thoughts or intentions:
 - Samaritans on 116 123 for confidential 24-hour support.
 - o NHS 111

MANAGING ANXIETY

What is anxiety?

- Anxiety disorders are the most frequent mental health conditions worldwide.
- 1 in 3 people are affected at some point in their life.
- Anxiety is a natural response to perceived threat or uncertainty. It is a common experience in our lives.
- We experience anxiety if our normal stress reaction is excessive.
- Symptoms may lead to an anxiety disorder if they are severe, last for a long time, out of proportion and cause extreme behaviour (i.e., avoidance) to reduce anxiety.
- Characterised by excessive fear and worry, distress and/or major problems such as being able to function effectively at work, at home, or in life in general.

- Anxiety affects our minds, bodies and our actions:
 - Body reactions include; shallow breathing, racing pulse, sweating, pins and needles in our arms and legs, chills down the spine, and a churning sensation in our stomachs.
 - The mind component includes excessive worry and thinking of the worst possible scenarios as absolutes, not just possibilities.
 - Anxiety can produce feelings of fear, dread, unease, panic, and lead to loss of sleep.

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EMOTIONAL REGULATION

Understanding your mood and emotions



MOOD

Underlying feeling state

Long term e.g. positive or negative



EMOTION

Visible reaction brought about by a specific situation

Short term
e.g. agitated, euphoric, happy,
sad etc.

What is emotion-regulation?

The conscious and subconscious processes people use to influence the intensity, variety and duration of their emotions.

The importance of learning healthy emotional regulation strategies

Individuals who more frequently engaged with emotional regulation strategies related to rumination and catastrophizing had increased levels of stress and worry.

Whereas using emotional regulation strategies which focus on acceptance and attaching meaning to a negative event has shown to decrease anxiety and increase optimism.





Interpreting a situation that elicits particular emotions in a way that heightens or lessens the emotional impact.

Proactive emotion-regulation

Results in higher life satisfaction, increased self-esteem, greater optimism and overall well being.

Inhibiting or suppressing an emotional experience once you have started experiencing it.

Reactive emotion-regulation

Results in experiencing and expressing fewer positive emotions. Less satisfied with life, lower self esteem and optimism.

Using Cognitive Behavioural Therapy for healthy emotion-regulation

CBT teaches us how our mind works, it helps us to identify triggers within our environment that may result in unhelpful thoughts, emotions or behaviours. When these situational triggers are identified early we can re-evaluate our response to them to change our perception of the situation to a more helpful one, allowing us to make more constructive decisions for ourselves. Thus CBT can help by teaching us how to reappraise our thoughts and behaviours so that we can positively influence our emotions without letting them take over.

Using relaxation techniques to cope with strong emotion

It's completely understandable that sometimes our emotions might be so intense that we are not able to think clearly on the spot also due to the fight, flight or freeze reactions that accompany them, such as an elevated heart rate, shortness of breath or upset stomach. In these moments it can help to use relaxation exercises such as calm breathing or deep muscle relaxations to activate our parasympathetic nervous system and bring our body back to baseline so we can feel more calm when we choose to react. They can be really useful techniques to utilise before an interview, an exam or a presentation.

To start learning more about CBT and trying out relaxation exercises download the Thrive app today!

UNDERSTANDING & MANAGING FEARS

Fear is a strong emotion that has an impact on your mind and body. It can create strong signals of response when we are faced with a perceived threat. For example, it can protect us from real dangers like fire, but it can also be present when faced with non-dangerous events like exams, public speaking or parties. Some people may become extremely overwhelmed by fear and may want to avoid situations that might intensify their fear or anxiety, preventing them from doing things they want or need to do.

The worksheets provided in this guide are intended to help you work through your fears, overcome them and over time reduce their fearfulness. Remember that you are in control of your exercises and you can stop at any time if it gets too much for you.

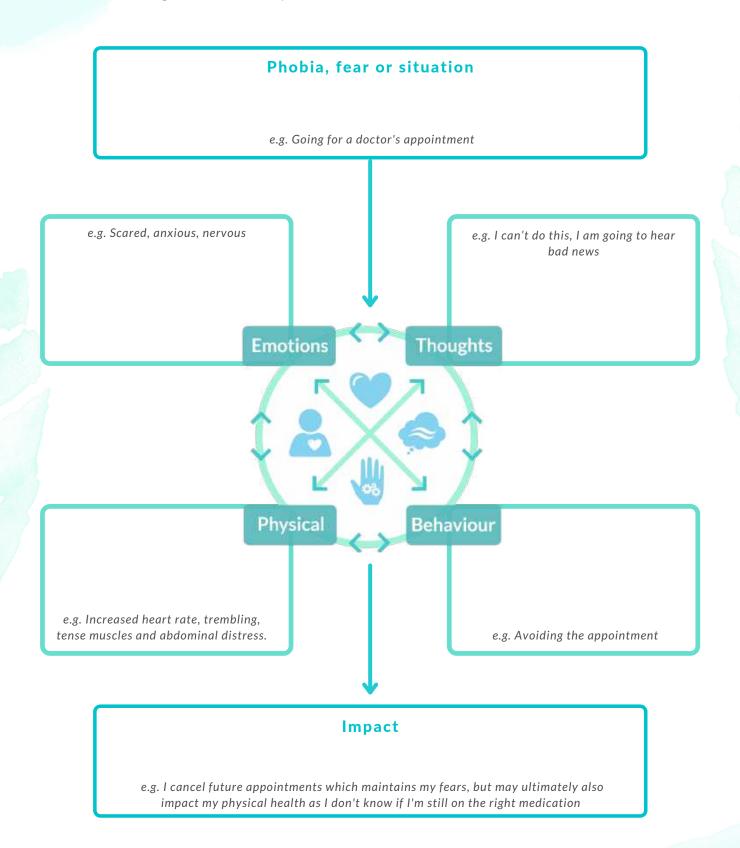
We recommend that you work your way through the following order:

- Understanding my fears To learn more about your fear and anxiety.
- Challenging unhelpful thinking To note down facts and create new thoughts.
- Step Ladder To break down fears into manageable steps.
- Facing Fears Ratings before, during and after exposure exercise.
- Reflection Experience and learning process reflection.

If you experience continuous distress and things don't get better, seek professional help from your GP.

Understanding My Fear Cycle

Think about a recent time when your fear or phobia was triggered and fill out the worksheet below. You can also do this exercise through the CBT sessions in the Thrive app to understand more about the links between our thoughts, emotions, body and behaviour.



Challenging Unhelpful Thoughts

Try challenging unhelpful thoughts by looking at the evidence for and against them. Make sure to use facts and not personal opinions.

SITUATION	EVIDENCE SUPPORTING THE THOUGHTS	EVIDENCE AGAINST THE THOUGHTS	NEW THOUGHTS
e.g feeling anxious about doctor appointment to review prescription	e.g last time they put me on a new medication and I reacted badly to it	e.g the doctors are trying to find out how to best treat my condition	e.g even if sometimes the medication gives me side effects in the long run, the doctors are trying to find out what works best for me to reduce my pain and prolong my life. Not every medication has such bad side effects

Step Ladder

Break down your fears into small and manageable goals!

A great way to overcome a phobia is to set goals to expose yourself to small parts of a fear at a time. If you find that you are unable to complete a particular step or goal along the way, take a closer look at it. It might be possible that the goal was too big, so don't be afraid to break it down further and go from there.

- IDENTIFY YOUR FEAR
 - Write down a specific situation that is making you feel anxious and that you'd like to overcome as your 'Goal'.
- GRADE YOUR FEAR
 Think about the possible activities that are associated with your chosen situation.
 Rate each activity between 0-100 in terms of how much fear you anticipate it will cause.

- ARRANGE YOUR ACTIVITIES IN A MANAGEABLE ORDER
 List the activities from those that would cause you least amount of fear to the most.
 Over time, try doing each activity to expose yourself to your fear. Try to remain in the situation until your fear drops by 50%. Remember that you are in control of this exercise and you can stop whenever you want to.
- REPEAT EXPOSURE ACTIVITY

 Keep practicing daily! Everyone is different so the time for which it will take to reduce fear will vary from person to person.
- Servisit Your Ladder Every Once in a While
 You may be positively surprised about your ongoing progress! Use the 'Facing Fears' worksheet as well, to review the progress you have made.

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Goal (at the top - e.g. Fear of diagnosis and medication)
Fear Rating Scale - 0 relaxed - 25 mild - 50 medium - 75 high - 100 severe

	ACTIVITY HIERARCHY	ANTICIPATED FEAR RATING (0-100)		
STEP 10	E.g. adhere to treatment plan and take the medication	100		
STEP 9			Most Fear	
STEP 8			. rear	
STEP 7				
STEP 6			Medium Fear	
STEP 5	E.g. go to doctor appointment to understand what the treatment entails	75		
STEP 4				
STEP 3			Least Fear (Should rate at least 50)	
STEP 2				
STEP 1	E.g. talk to others who were diagnosed with prostate cancer and are currently getting treatment	60		

Facing Fears Worksheet

Exposure activity	Expos	sure fear r (0-100)	ating	Exposure time	Comments
Example:	Before	Start	End		
Talk to others who had to take the same medication/ treatment	50	70	30	30 minutes	I didn't really want to engage at first, but I realised that it's not threatening.

Reflection Worksheet

UNDERSTANDING & MANAGING ANGER

We tend to feel anger when we believe that our values or our goals are being threatened as this urges us to stand up and fight for what is important to us. In itself, anger is not always a problem and can sometimes be healthy for us. However, we need to be aware of how we act upon this emotion and whether this is helpful to us or not.

Everyone responds to anger differently; some might try to suppress it as they feel that it is unacceptable while for others anger might turn into fury or rage as they express it through arguing about minor misunderstandings. This can be destructive for social relationships or lead to feelings of guilt or shame once you regain your critical skills.

Practising relaxation exercises such as calm breathing or mindfulness techniques like meditation, helps us become aware of when this emotion arises within us. This means that we can better control our reaction and have a clear mind allowing us to make constructive decisions for ourselves.

Healthy vs Unhealthy anger

Healthy anger allows you to think clearly and to decide when and how you want to react to it. While you realise that someone has caused you harm or offended you, you are still in control of yourself and able to think through the situation. You still can see the other person's perspective and decide on the best course of action. Having control over your anger also means that your behaviour can be firm and assertive but not threatening. Facing up to your conflicts in this manner can be a very effective way of defending your interest while preserving your relationship.

Unhealthy anger is characterised by a very typical way of thinking and behaviour. Unhealthy anger leads you to assume the worst intentions behind others' actions. You fail to recognise the other person's perspective and behave as if no compromise is possible. Instead of assertively articulating your perspective your aim is to win by offending and intimidating the other person.

In the following, we compiled a list for you where you can compare healthy and unhealthy anger management skills. As we may share both aspects to some extent, categorising our reactions as "good" or "bad" wouldn't be the best idea. Instead, for each point, try to think through how healthy or unhealthy your reactions are. You can mark this by using the scale in the middle.

HEALTHY ANGER	RATE WHERE YOU ARE BETWEEN THE TWO	UNHEALTHY ANGER
Holding strong preferences about how others/the world would behave.	4 3 2 1 0 1 2 3 4	Rigid demands or rules about how other people/must or must not behave.
Allowing others to live according to their own personal rules.	4 3 2 1 0 1 2 3 4	Insisting that everyone should follow the same rules.
Strongly preferring that others treat you well and neither disrespect nor ridicule you.	4 3 2 1 0 1 2 3 4	Insisting that others must not disrespect or ridicule you.
Desiring that people and life conditions don't get in the way of you pursuing your goals.	4 3 2 1 0 1 2 3 4	Demanding that others and life conditions do not get in the way of getting what you want, when you want it.
Thinking realistically about whether or not other people have deliberately acted badly towards you.	4 3 2 1 0 1 2 3 4	Assuming that other people have deliberately acted in an undesirable and unpleasant way towards you.
Considering that both you and the other person may be right and wrong to some degree.	4 3 2 1 0 1 2 3 4	Taking the stance that you are totally right and the other is totally wrong.
Making an effort to understand the other person's point of view.	4 3 2 1 0 1 2 3 4	Refusing to consider the other person's point of view.
Asserting yourself respectfully.	4 3 2 1 0 1 2 3 4	Either actually attacking or wanting to attack the other person verbally and/or physically.
Staying in the situation and trying to resolve any disagreement.	4 3 2 1 0 1 2 3 4	Cutting contact with the other person and venting your anger on innocent parties such as other people in your life.
Asking the other person to modify their behaviour whilst respecting their rights to disagree with you.	4 3 2 1 0 1 2 3 4	Getting back at the other person in subtle ways such as sabotaging their job or relationships.
Looking for evidence that the other person may not behave with malicious intent.	4 3 2 1 0 1 2 3 4	Looking for evidence that the offence was both malicious and is likely to be repeated.

Tolerance Journal

Dealing effectively with your anger requires two distinct skills to work simultaneously, both of which can be learned: as a first step you need to stay open minded in a conflict situation and think before acting. Secondly, you need to defend your interest effectively by being "diplomatic" rather than offensive. While both skills are important, keeping an open mind is the foundation of any further steps you might take to resolve a conflict.

Use this journal to note down any conflict or situations where you felt angry. Spend some time looking at each of these occasions from different angles by answering the questions about them in as much detail as possible.

Recent conflict or situation in which I became angry?		
Was I demanding any behaviour from the other person that he/she didn't follow?		
Was I insisting that I was right and others were wrong?		
Was I refusing to allow the other person to disagree with me or to hold a different opinion or set of values to my own?		
What would be a more flexible and tolerant attitude towards the other person?		
What was my assumption about the intent behind his/her behaviour?		
Can I imagine that he/she wasn't acting out of bad intent but had other reasons?		

Could I imagine a peaceful ending of the situation if we both assume that the other

also wants to resolve the conflict?

Standing up for yourself without being aggressive or threatening

Assertiveness is the skill of standing up for yourself effectively and confidently while not being aggressive or threatening. Assertiveness requires clear thinking and articulation of your own interests. While there is a lot of talk around this skill lately, essentially it is a simple cognitive skill that can be learnt. It doesn't require any talent or special ability but only clear thinking and this is where most people fail. You already have some practice in the key questions that you can use to clear your mind and solve the conflict from a more open perspective. However, don't expect this to work from day one all the time. Staying calm can be difficult for anyone in a conflict, but this will also improve with practice. As you become better at articulating your points your confidence in this method will also grow, which will further reduce the urge to get angry.

When we are being assertive we tend to follow six key rules:

- We speak respectfully to the other person without name calling or using offensive or abusive language.
- We avoid intimidating, unduly upsetting or diminishing the other person.
- Give the other person time to tell you their views.
- Refrain from any violence or threat of violence.
- Engage in discussion with the other person rather than trying to score points or win the argument.
- 6 Strive to resolve differences if possible or agree to disagree on a point.

Use this journal before and after you try to resolve a conflict. Take some time before and after to think through some of the key aspects of what is in your head and how you managed the situation. You can also jump back to the previous journal to help you gain the right perspective.

Before the meeting

What is it that I want to achieve in this situation?

What specific points do I want to raise?	
What aspects of the situation can I take responsibility for?	
What aspects of the situation should I not take responsibility for under an circumstances?	У
Wherever the conversation goes, can I keep in mind that my feelings are m am responsible for dealing with them?	ine and
After the meeting	
Have I managed to communicate my points clearly?	
Did the others accept my points?	
Did the others accept my points.	
Did I receive any criticism?	
Can I learn from the criticism in any way that would be of my benefit?	
Should I also change something in my behaviour to avoid conflicts like this future?	in the

MANAGING LIFE CHANGING EVENTS

Changing circumstances, life events and opportunities affect the way in which we experience, evaluate and cope with life's demands.

What are significant life events and changes?

- There is always the chance that we will be exposed to one (or more) significant life changes or experiences that can influence our mental wellbeing.
- Examples: change can be positive (such as business growth), painful (losing a friend or a family member), out of your control (diagnosis with a chronic condition), or a choice you've made (relocating). And your reaction to that change might vary from excitement to fear, resentment or a confusing mixture of emotions.
- In all cases, your attitude to change will likely determine how you experience it.
- Significant life events can be from various natures and are subjectively perceived as such. Hence, we all have different personalities and cope differently with significant changes in our life.
- Traumatic experiences may include exposure to interpersonal violence, war, terrorism, death of a loved one, natural disasters, and industrial or other accidents (American Psychological Association, 2010).
- Experiences which change our life can be quite common when we think about childbirth, bereavement, relationship break-down, illnesses and injury which impact our daily life forever.
- These incidents might not only have to be directly experienced but can also have an impact on our wellbeing by indirectly learning about them as for example through a friend or family member.

Responses

Being sad after loss is normal! It is common for people to have a flurry of unpredictable emotions and physical symptoms including sadness, irritability, heightened alertness, problems with sleep or relationships, flashbacks or trouble feeling positive emotions

Physical

Neglect, sleep problems, change of eating

Psychological

- Negative: PTSD, Depression, Anxiety
- Positive: Post-traumatic growth
- Coping mechanism:
 - Escape coping/avoidance: you take specific actions to help you to avoid the difficulties of change. For instance, you might deliberately miss training for a new working process, or show up too late to attend a meeting about an upcoming restructure.
 - Control coping/proactive: manage our feelings, get support and do whatever you can to be part of the change.
 - Normally do both.

Social:

Withdrawal

Stages of Changes:



Shock and disorientation/
Denial



Anger and other emotional responses

(Why me? It's not fair!";
"How can this happen
to me?"; "Who is to
blame?"; "Why would
this happen?)



Depression



Coming in terms of the new situation



Acceptance and moving forward

What to do with it:

- Acknowledge that things are changing
- Keep up a regular schedule as much as possible (anchor as eating, sleeping time?)
- CBT (change how we think about it)
- Mindfulness

- Seek support if it severely impacts your daily life. Don't be afraid of asking for help! Allow yourself time to process your thoughts and feelings, and talk about them to people who you trust. If you are unable to sleep, cannot get up, don't function anymore or neglect yourself or others, you should ask for support which could be your EAP or GP.
- You may want to find places where there are strengths for you. It's normal to want to avoid thinking about a traumatic event. However, you may want to try to attach a positive meaning to the event in terms of personal growth. This positive reappraisal as a coping strategy has been shown to increase optimism, self-esteem and reduce anxiety. Moreover, you may allow yourself time to talk honestly about how you feel, particularly with close ones and people who have suffered something similar to you. Different people are going to need different things and you may ask yourself what your preferred support system might be. Maybe there is natural resilience. Maybe it is helpful to reach out for your community including family, friends or colleagues.
- Moreover, do your best to eat nutritious meals, get regular physical activity and a
 good night's sleep. And seek out other healthy coping strategies such as art,
 music, meditation, relaxation and spending time in nature.

How to prepare for these events:

RESILIENCE

Resilience is "the process of adapting well in the face of adversity, trauma, tragedy, threats or even significant sources of stress. It is the personal attribute or ability to bounce back. Determinants of resilience include a host of biological, psychological, social and cultural factors that interact with one another to determine how one responds to stressful experiences. In our daily life, resilience exists on a continuum that may be present to differing degrees across multiple domains of life (Pietrzak & Southwick, 2011). Hence, it may also change over time as a function of development and one's interaction with the environment (e.g., Kim-Cohen & Turkewitz, 2012). Moreover, we all respond differently which means that for example, individuals who adapt well to a relationship breakdown may fail to adapt well in case of an accident which changes their ability to move and work as usual or vice versa. Ideally, we want to enhance resilience before we experience significant life events by practising how we would respond to these these events. We don't do that in our culture. We like to live our lives with the idea that nothing bad will happen and everything is going to be alright. According to statistics, we know that the probability is actually not low at all, so we don't have to wonder if something will occur, but when it is going to happen.

To be more prepared and resilient, we can learn life skills which help us to control our attention or teach us to relax in extreme situations. To practice our regulation of stress response caused by these events we may use techniques like **mindfulness or CBT**. CBT may be helpful for both as a preventive technique as well as a tool for overcoming significant life events. Mindfulness techniques involve the focus of attention on something like your breath and bringing it back each time your mind wanders. This technique helps you to <u>decrease</u> your emotional reactivity of the amygdala which is activated when facing situations

perceived to be dangerous, overwhelming, or threatening. Also, when being exposed to stressful experiences we can learn to transfer ourselves into a more relaxed state. For this, we can use applied relaxation which is an advanced form of deep muscle relaxation. It enables you to learn how to rapidly relax and reduce feelings of stress, panic or anxiety in as quick as 30 seconds in normal every-day settings.

If we think about traumatic experiences: as we cannot prevent all events from happening, we should keep factors in mind which may make the experience of these events even worse or help us to overcome them in the most sustainable way. For example, imagine being a police officer who is completely stressed about the lack of support from the boss and then gets threatened by a thief with a knife during a patrol, you would be exposed to an increased chance of experiencing symptoms of PTSD. Organisational stressors can be from various natures as for instance related to the role at work, dysfunctional relationships, work-overload, organisational climate and many more. Moreover, factors include the volume of stress, the level of trust in one's own judgement, and regular communication. Therefore, we recommend a work environment which allows autonomy where we can make our own decisions and have access to regular briefings on current topics and events. Also, constant feedback from colleagues and effective leadership increases motivation and meaning, which helps us to be more resilient in the face of adversity and change. Besides that, training and exercises reduce uncertainty and provide a sense of control. Both do not even need to be directly applicable but provide a feeling of self-efficacy in us.

Post-traumatic growth after traumatic events

I will tell you about a case example and its positive outcome. John was working as a tour guide in Jerusalem 10 years ago, when he was attacked by a terrorist while witnessing his friend being stabbed to death next to him. He survived and after recovering, he now regularly talks about his experience in front of global audiences to reduce hatred towards Arabs and Jews. It helped him to tackle his survivor guilt and to find a new appreciation for life. Significant life events can help us to thrive, as well as provide us with a sense of personal growth, increased resilience and selfempowerment. Post-traumatic growth (PTG) is a theory developed by psychologists Richard Tedeschi and Lawrence Calhoun. They explain it as a form of psychological transformation following a stressful encounter and suggest that people who experienced severe life events can often see positive growth afterwards. "People develop new understandings of themselves, the world they live in, how to relate to other people, the kind of future they might have and a better understanding of how to live life". Hence, it involves life-altering and favourable psychological changes that can potentially change the way we perceive the world, our understanding of life, relationships, money, success, and health. In simple words, it allows us to grasp the knowledge of using the pain to change our lives for the better as well as experience the desire to share the experiences with others to help them overcome similar events.

Some of us may embrace new opportunities both in the personal and professional fronts, improve our personal relationships with our loved ones or develop a heightened sense of gratitude towards life altogether. The extent to which someone experiences PTG is currently measured under positive responses including appreciation of life, relationships with others, new possibilities in life, personal strength, and spiritual change. Research has shown some predispositions which may increase the likeliness of PTG including openness to experience and extraversion. That's because people who are more open are more likely to reconsider their belief systems, and extroverts are more likely to be more active in response to trauma and seek out connections with others.

PTG is not the same as resilience - which is "the process of adapting well in the face of adversity" (APA) - but happens when someone who has difficulty bouncing back experiences a traumatic event that challenges his or her core beliefs, endures psychological struggle (even a mental illness such as post-traumatic stress disorder), and then ultimately finds a sense of personal growth. It's a process that "takes a lot of time, energy and struggle" (Taku). Someone who is already resilient when trauma occurs won't experience PTG because a resilient person isn't rocked to the core by an event and doesn't have to seek a new belief system. Less resilient people, on the other hand, may go through distress and confusion as they try to understand why this terrible thing happened to them and what it means for their world view.

MANAGING INTRUSIVE THOUGHTS

What are intrusive thoughts?

Thoughts that seem to be playing on repeat which cause distress to the individual experiencing them. They are often perceived to come out of nowhere and seem to determine the person's affect, mood and behaviour. Often these thoughts cause a great deal of anxiety as their content is usually related to negative perceptions such as feeling that you're a burden to your loved ones, regardless of whether or not they might actually feel that way. Or feeling like it's your fault that something caused this to happen or just questioning 'why me?'

Common intrusive thoughts that people with chronic illness experience:

- 1. Feelings of guilt
- 2. Fearing you could die at any moment
- 3. Thinking no one takes you seriously
- 4. Doubting that your illness is real
- 5. Feeling hopeless

- 6. Thinking you're a burden
- 7. Feeling unworthy
- 8. Convinced that your illness is your fault
- 9. Feeling worried about the future

All of these thoughts are ones that others with chronic illness are prone to experience at some point. What is important here is to remember that you are not alone with these thoughts, the best way to manage them is by speaking about them either in support groups, with our family and friends or with a professional.

Over time you will learn ways to cope with these thoughts better so that they do not overwhelm you anymore or take over everything.

Steps to understanding how your mind work and tackling intrusive thoughts

MANAGE YOUR WORRIES

Worrying is a perfectly normal thing to do, however sometimes it can feel hard to control and can distract us from things that we're trying to achieve right now or keep us preoccupied. Worrying is a thought process that is often hypothetical, assumes negative outcomes and can spiral. If you find yourself feeling preoccupied by things that are worrying you, it might be impacting your sleep or your everyday activities. It can help to be proactive and allocate some time into your day that you spend on trying to solve these things. Every time a worry comes to mind, write it down, then leave it until your worry time. A worry budget should be no more than 30 minutes, but it is an opportunity to work through your list of worries and sort them into things you can solve now, and things you might have to come back to later. The things that you can do something about now, make a plan to deal with them. It's important to focus on what you can control, not what you can't. Being more proactive in your approach to worrying can help to alleviate some of the stress and can actually show you that you'd be more equipped to deal with them than you initially thought.

Plan and prioritise your time - scheduling your days and weeks can help you to feel more in control and will show you where you have extra time that you can spend on doing things that are good for you, or whether there are some things you may need to scale back on to make your time more manageable.

Again, challenge your internal monologue - "is this thing I'm worried about within my control or not? If not, do I need to worry about it?", "if this thing happened, what would i do about it?".

THINKING TRAPS

Thinking traps are probably the most influential in the way we approach and deal with adversity. Thinking traps are patterns of thought that tend to be unhelpful and inaccurate, as they can prevent us from seeing things as they really are. Thinking traps can make us easily jump to conclusions, make bad decisions and prevent us from seeing the bigger picture.

Thinking traps are often deeply ingrained in our psyche and can form part of our habitual character, but it is possible to change them.

As these are automatic thoughts, it can be hard to stop them before they start to influence your feelings and mood, so it has to become a conscious habit to challenge and reframe them. Examples of thinking traps (as shown on the slides) include catastrophising (assuming the worst), if only and all or nothing thinking, discounting the positive, and jumping to conclusions. A period of reflection can serve as a helpful strategy for establishing goals for self-development, but it's also possible that you may fall into the trap of fixating on what "could've been" rather than focusing on what you've learned and how you can use the experience to your advantage. This way of thinking can keep you stuck in the past and have a negative effect on your self-esteem and your future behaviour, for example you may start avoiding your friends and family because of your negative thought cycles about feeling guilty.

Try and identify your thinking traps - next time you encounter a challenging or emotionally demanding situation, play devil's advocate with yourself and ask as many questions as possible before jumping to conclusions, such as "is this a fact or an opinion" (usually our thoughts are opinions, so there is a chance they may not be true), "is there another way I can think about this", "what's the evidence that this thought is or isn't true?"

MAINTAINING GOOD MENTAL HEALTH

This guide empowers you with six tools to help you thrive in the face of uncertainty, change and challenges.

Tool 1: Learning healthy coping strategies

Finding a job can be challenging and you may experience disappointments, setbacks, and failures during your journey. Everyone will face difficult situations at some point, so we have to come up with effective ways to deal with them and bounce back. Therefore, it is important that you develop your own toolbox of coping strategies that you find useful. We are all unique and one technique may work better for you than another, so you may need to experiment with a variety of coping strategies to find out which ones work best for you.

There are two main types of coping skills, problem-focused and emotion-focused. When you are feeling distressed, ask yourself, "Do I need to change my situation or do I need to find a way to better cope with it?" Then, you can decide which type of coping strategy will help you the best.

Problem-focused coping

A helpful strategy when you need to change your situation or address the source of the stress, perhaps by removing a stressful thing from your life. There are lots of ways you might decide to tackle a problem head-on and eliminate the source of your stress. In some cases, that may mean changing your behaviour or creating a plan that helps you know what action you are going to take. For example, you ask the interviewer for feedback, allowing you to develop a clear plan that will help you do better next time. This will help you to start feeling more confident about your ability to succeed in the future.

Examples of healthy problem focused coping skills might include:

- Ask for support from a friend or a professional (e.g. job coach)
- Create a to-do list (e.g. schedule time to practice interviews with a friend)
- Engage in problem-solving ("then what?")
- Establish healthy boundaries (e.g. tell your friend you are not going to spend time with her if she makes fun of you)
- Walk away (leave a situation that is causing you stress)
- Work on managing your time better (e.g. turn off the alerts on your phone)

Emotion-focused coping

A helpful strategy when you need to take care of your feelings when you either do not want to change your situation or when circumstances are out of your control. For example, if you are frustrated or angry about another rejection, it would be important to take care of your feelings in a healthy way. Healthy coping strategies may soothe you, temporarily distract you, or help you tolerate your distress. Sometimes it is helpful to face your emotions head-on.

Examples of healthy emotion-focused coping skills might include:

- Cleaning
- Cooking
- Colouring
- Watching a film
- Doing yoga or meditation
- Exercise

- Going for a walk
- Making a list of things you're grateful for
- Practicing relaxation techniques in the Thrive app
- Talking to someone
- Writing in a journal

When it comes to coping skills, there is always room for improvement. Assess what other tools and resources you can use and consider how you might continue to sharpen your skills in the future.

Tool 2: Calm Breathing

This is a great tool to have in your tool box when navigating uncertain times or you feel stressed. If you feel anxious, it can help to ask yourself, "is my life in danger at this moment?". If not, then you need to find a way to manage your response better and this is where relaxation exercises like calm breathing or deep muscle relaxation can be helpful. Relaxation techniques also help to ease the experience of panic attacks. The Thrive app has built in sessions to facilitate you with this and is a powerful tool to increase your resilience and manage stress during the job search process.

Tool 3: Bodily focused activities

These are fundamental and essential components that support you in this time while you are on the programme, but also beyond that in your daily life. Bodily based activities, a balanced diet, hydration and a healthy sleep hygiene will help you balance your stress response system. Also, try to avoid caffeine and alcohol as this can aggravate anxious thoughts you may have. Exercise serves to deliver oxygen and nutrients to your bodily tissues whilst strengthening your cardiovascular system. You will also feel more energised to tackle various challenges that come up throughout the day. Except during illness, you should try to exercise nearly every day. The most important thing is to pick an activity that you enjoy. Aim for at least 30 to 40 minutes of moderate exercise such as walking for two miles a day, or 15 to 20 minutes of intense exercise. You can do it all of it at once, or in 10- to 15-minute chunks if that suits you better.

Tool 4: Meditation strategies

Meditation strategies can help in regulating the nervous system and calming the brain. Mindfulness may help you get better control over your attention and, instead of letting it be completely captured by the worrying thoughts of e.g. financial worries, health anxiety, self doubt, you can disengage and pay non-judgemental attention to the whole picture giving you the ability to detach your thoughts from the sense of threat. There are many different forms of meditation that you can use regularly. A helpful tip is to link meditation to something that you do every single day for example while having a shower or taking a walk and start making it a habit this way.

Tool 5: Monitor your mood and stress levels throughout the day.

It is helpful to do regular check-in's with yourself. Allow yourself to pause and to check in with your stress levels or with your mood. You can use the Thrive app to track your mood and to identify your triggers. Pausing can help you to reflect on your thoughts and feelings and allows you to use healthy coping strategies like calm breathing or meditation.

Tool 6: Lean on your social support network

You may want to reach out to your family, friends and other participants in the programme. Sharing feelings about your job search progress and your wellbeing can help you find common ground and will increase your resilience. It is normal to feel anxious when making major life changes or going to job interviews. Telling ourselves that it is okay to feel the way we do and sharing how we feel with others can help us realise that we are not alone. If you are struggling with your mental wellbeing and it is causing you distress, do not hesitate to seek professional help from your GP.

WORKING WITH A CHRONIC CONDITION

Being diagnosed with a chronic condition such as Prostate Cancer can have a life changing impact on us physically, mentally and socially. Life changes can leave us feeling a sense of uncertainty resulting in anxiety and worry. However even when faced with life altering diagnosis the way we choose to cope can have detrimental effects on how we maintain good mental health. We need to take the approach of dignity, self compassion and strength.

The first step to do this is by identifying strong emotions, unhelpful thoughts and ways you can cope with those. The first couple of chapters in this booklet has helped you to do that. The next step is to create a long term sustainable plan for yourself which can help you to live a healthy life.

- Use psychological techniques to deal with problems such as frustration, fatigue, pain, and isolation.
- Incorporate appropriate exercise into your routine for maintaining and improving strength, flexibility, and endurance.
- Understand the purpose and appropriate use of medications so you know what is happening in your body and feel empowered through a deeper understanding.
- Communicating effectively with family, friends, and health professionals; social support is the most effective way to combat feelings of isolation or depression.
- Using breathing techniques to cope with stress, overwhelming emotions and feelings of anxiety.
- Healthy eating habits to maintain healthy body and brain function as well as to regulate mood.
- Relaxation techniques to release tension held within the body and manage pain.

Managing pain

Pain is a complex issue. Most people think of it as a 'physical' thing. The logic goes, something is damaged and therefore you feel pain. In reality, it is not as simple as that. Pain is ultimately something that happens in the brain. If you are injured by something and the bit of the brain that registers pain is damaged, you will feel nothing. Also, people who lose limbs experience something called phantom pain. These people are not 'imagining' it, they do experience pain, but also it is clear that there is nothing there to be hurt. A lot of people may find themselves experiencing pain only to be told that there is nothing physically wrong with them. They think that what the doctor is saying is that they are making it up. The truth is that pain, all pain, is ultimately in our heads. It's important to realise this, as it gives us strong clues as to how to best deal with pain.

Acute versus chronic pain

Pain can be divided into new pain and old pain. New pain that starts all of a sudden is usually called acute and it tends to be linked to an injury. The best way to deal with that sort of pain is to tend to the injury. Resting the injury might be helpful.

Old pain, pain that has been with us for a long time, is also called chronic pain. In the case of chronic pain, there might have been an old injury, and there might even be some damage still present, but resting is probably going to make things worse.

Painkillers can be helpful in acute pain but tend not to be great in chronic pain. Some painkillers are very addictive leading to a bigger problem overall.

If rest is not the best way to deal with chronic pain and painkillers don't work so well, what works?

In people with widespread chronic pain, while painkillers with the supervision of a specialist can be of some small use, the two things that have the best evidence are exercise and cognitive behavioural therapy.

These two techniques have shown they can be effective in helping people function better and have a better quality of life with less pain.

Exercise

This is best done under the supervision of a specialist, such as a physiotherapist. The evidence suggests that the most effective types of exercise are:

- Mild strength training
- Mild to moderate exercise that gets your heart rate and breathing up (aerobic)
 - These can be things like swimming, walking fast, or cycling.

The main problem is that people with chronic pain may believe that exercising may make their pain worse, which might stop them from being able to engage in it. The best way is to test it for yourself starting small and building up. Not moving is what makes the pain worse over time.

Cognitive behavioural therapy for chronic pain

A CBT programme for chronic pain will have these components:

Education: provide all the information necessary to understand the pain, what we know makes it better or worse and answer questions the person experiencing pain may have.

Relaxation: By learning to relax we can take control of that reaction and diminish the pain. This, in itself, is helpful as people with chronic pain tend to feel like they have no control over it.

Graded activation: This is first about realising that there are good days and bad days. Whatever is causing the pain has not changed, but they seem to be less affected by it. This means that it is possible to feel better and do more. Once this has been established the therapist guides the person through a programme to reduce flare-ups by gradually increasing the frequency and duration of the active periods.

Pleasant activities: This change is about scheduling pleasurable, fun activities and giving them as much of a priority as things like deadlines or doctor's appointments.

Improving sleep: CBT sessions that target sleep alone and improve it (CBT for insomnia) also improve pain.

Cognitive restructuring and reframing: This process is about realising what the person with pain can do and helping them maximise it.

Coping skills: usually linked to the method above this is about giving the person tools to minimise the experience of pain, such as distraction techniques, reinterpreting the pain and not responding to the pain. That last one is about not living in fear of pain and minimising the person's avoidance of the pain.

Best results are obtained with a person-centred combination of both approaches.