



**Provider I talked to today:** \_\_\_\_\_

**Follow Up:** \_\_\_\_\_

### **Recovery Resources**

CMHPSM for Medicaid or Uninsured for counseling, IOP, Inpatient, and/or recovery housing:

CMH SUD line Monroe: 734-384-0226. Access: 800-886-7340. Lenawee County Access: 517-263-8905.

Wayne County: 1-800-241-4949. Lucas County General referrals: United Way 2-1-1 (800-650-4357)

Family Medical Center MAT line: Britt 517-525-7081

#### Men Transitional Housing

Ty Guthrie: 734-585-4104

#### Women Transitional Housing

Paula's House 1: 902 N Monroe St., Paula's House 2: 3580 S. Custer Rd. P-734-242-6650, F-242-6630

DRMM Christian Guidance Center Men: 19211 Anglin St, 313-263-0077

DRMM Genesis House 3 Women: 2015 Webb, 313-883-5614

#### Additional Resources

Dawn Farms: Intake 669-8265, Detox 485-8725

St. Joseph Center of Hope: 734-357-8880

Fairview: Sarah intake 240-3190

Life Challenges/Ryan's Hope: Martin Hall 567-312-0672

Recovery Hotline Toledo: 419-255-9585

Wayne Mental Health Authority SUD: 800-241-4949, [www.dwmha.com](http://www.dwmha.com)

MRS for employment and additional resources: 241-1340

SAMHSA: 800-662-4357

### **Addiction Websites/Resources**

All Things Recovery Facebook Page: <https://www.facebook.com/recoveryatyourfingertips>

Adult Children of Alcoholics: [www.adultchildren.org](http://www.adultchildren.org)

Al-Anon/Alateen: [www.al-anon.alateen.org](http://www.al-anon.alateen.org)

Alcoholics Anonymous: [www.aa.org](http://www.aa.org)

Cocaine Anonymous: 1-800-347-8998, [www.ca.org](http://www.ca.org)

FAN-NW County chapter (Families Against Narcotics) FB page and online:

<http://www.familiesagainstnarcotics.org/northwest-wayne>

Gamblers: [www.gamblersanonymous.org](http://www.gamblersanonymous.org)

In the rooms (online support meetings): [intherooms.com](http://intherooms.com)

National Alliance of Advocates for Buprenorphine: [naabt.org](http://naabt.org)

Narcotics: [www.na.org](http://www.na.org)

Peer Support Online: [addictionsurvivors.org](http://addictionsurvivors.org)

RAW: Recovery Advocacy Warriors Monroe County

## **Help Hotlines**

Eating Disorder Hotline: 1-800-931-2237

National Suicide Prevention Lifeline: 1-800-784-HELP (24/7)

Helping Hand-United Way: 211 (24/7)

Runaway Hotline: 1-800-786-2929 (24/7)

Child Abuse Hotline: 1-800-422-4453 (24/7)

Mental Health Hotline: 1-800-662-4357 (24/7)

Self-Abuse Hotline: 1-800-366-8288 (24/7)

National Domestic Violence Hotline: 1-800-799-7233 (24/7)

National Human Trafficking Resource Center: 1-888-373-7888 (24/7)

-Text "BeFree" (233733)

-National Safe Place: Text "SAFE" and your current location to 69866 (24/7)

Veterans Crisis Line: 1-877-838-2838 (24/7)

Homeless Veterans: 1-877-424-3838

Suicide Texting Hotline: 741741 Text "Go" (24/7)

## **SELF-HELP APPS**

1. Suicide Safety Plan
2. MY3 – Support Network
3. Virtual Hope Box

## **Deep Breathing Techniques**

1. Breathe2Relax
2. Paced Breathing
3. Breathe Well
4. Stop, Breath & Think

## **Anxiety**

1. Self-Help for Anxiety Management
2. Pacifica – Anxiety, Stress, & Depression
3. Relax Lite: Stress and Anxiety Relief
4. Calm – Meditate, Sleep, Relax

## **Psychological and Substance Abuse Services in Monroe County**

### **Family Counseling and Shelter Services**

**734-241-0180**

- Offer sliding fee
- Accepts Medicaid, except straight Medicaid

### **Monroe County Community Mental Health**

**734-243-7340**

- Services are for qualifying patients only – patient can walk in or call for appointment with Access Department to determine if they meet criteria for services
- They see children under 18 with any type of insurance
- Offer sliding fee
- Accepts Monroe County Health Plan

### **Catholic Charities**

**734-240-3850**

- Offer sliding fee
- Accept all types of Medicaid, except straight Medicaid
- Offers substance abuse services

### **Promedica Monroe Outpatient Behavioral Health Services**

**734-240-1760**

- Accepts all types of Medicaid, except straight Medicaid
- Accepts most commercial insurances

### **Creative Counseling Choices**

**734-457-2161**

- Accepts all types of Medicaid, except straight Medicaid
- Accepts most commercial insurances
- Limited sliding fee

### **Humanistic Wellness Center**

**734-639-2262**

Accepts Medicaid, except straight Medicaid

- Accepts most commercial insurances

### **Harbor Light**

**734-384-3402**

- Offers substance abuse services
- Accepts Medicaid
- Accepts sliding fee

### **Gabby's Ladder**

**734-242-8773**

- Grief Counseling

### **Straight N Arrow**

**734-770-0845**

Accepts most insurances, call to verify

- Substance Abuse and Mental Health Services

# Utility Bill Assistance

MCOP: 734-241-2775

St. Vincent DePaul: 734-847-2805  
(Extension 20)

**Winter Protection Program**  
DTE: 1-800-477-4747

**People Care Program**  
Consumer's Energy: 1-800-477-5050

**Michigan Department of Treasury**  
Home Heating Credit: 1-800-827-4000

## Medical Expense Assistance

The Salvation Army offers \$100 a year (to individuals that qualify), which can be used towards different medical related expenses.

**Temperance:** (734) 224-7991  
**Monroe:** (734) 241-0440

## Miscellaneous Information

**Habitat for Humanity can assist in home repairs**  
1-800-827-4000

**Free Wireless Phone**  
Call To See If You Qualify!  
1-877-243-1204

**Apply for Social Security or Disability**  
Ssa.gov/disability SSI  
300 S Telegraph Rd, Monroe, MI  
1-800-772-1213

**Applying for Unemployment in MI:**  
1-866-500-0017  
or  
[www.michigan.gov/uia/0,1607,7-118-77962-,00.html](http://www.michigan.gov/uia/0,1607,7-118-77962-,00.html)

**Help with upcoming property taxes**  
MI Department of Treasury to apply for  
Homestead property tax credit: 517-335-3113

**Help with back taxes**  
Monroe Township Assessor: 734-241-8001

## Housing Resources

### Monroe, MI

Woodcraft Square: 734-242-8780  
Samaritas of Monroe: 734-243-5500  
Chestnut Hills: 734-242-6923  
Monroe Housing Commission: 734-242-5880  
Mable Kehres: 732-241-6222  
Frenchtown Place (seniors): 734-265-9024  
Elm House: 734-242-2177

### South County

Ivor Lindsay: 734-847-3950  
Luther Haus (seniors): 734-847-9500  
Luna Pier Housing Commission: 734-848-2355

### Other Resources

Department of Human Services (DHS): 734-243-7200  
Monroe County Opportunity Program (MCOP): 734-241-2775  
Michigan State Housing Development Authority (MSHDA)  
Lansing: 517-373-8370  
Detroit: 313-456-3540  
Toledo: United North (North Toledo residents only), 3106  
LaGrange St, Toledo, and 725 LaGrange St, Toledo, 419-720-6812 Ext

### Dundee, MI

Dundee Housing Commission: 734-529-2828

### Lucas County

FOCUS, 2283 Ashland Ave, Toledo, 419-244-2175 (permanent housing for mental/physical disabilities, substance abuse rehabilitation; transitional housing for homeless). Need referral from shelter. Neighborhood Properties, 2753 W. Central Ave, Toledo, 43606, 419-473-2604 (homeless, veterans, physical/mental disabilities, ex-offenders)  
Lucas County Metropolitan Housing Authority, 435 Nebraska Ave, 419-259-9400  
YWCA (battered women's shelter residents), 1018 Jefferson Ave, Toledo, 419-241- 7386 or 1-888-341-7386 (24/7 crisis

## **EMERGENCY HOUSING**

### **Monroe County Network on Homelessness Emergency Housing (Shelter)**

#### **The Department of Human Services**

903 South Telegraph, Monroe, MI 48161

734-243-7200

DHS is the starting point for homeless and low-income recipients seeking assistance. Services through DHS include Food Assistance program, Emergency Services funding, Medical Insurance, referrals to community agencies, and Prevention services to those who qualify. A decision notice from DHS is required to receive services from other community agencies. Application for assistance can be made in the local office or online at

**www.michigan.gov**. Customers can access

**http://www.mibridges.michigan.gov/access/** to check benefits, report changes and read DHS correspondence. DHS representatives are also located at the Family Medical Center, Temperance, MI on Wednesdays and Family Medical Center, Carleton, MI on Thursdays.

#### **The Salvation Army Family Manor**

815 East First Street, Monroe, MI 48161

734-241-0440

Emergency shelter for families and 3 or 4 single women for a total of 40 people. The stay is 90 days. Usually at or near capacity. Families must be married. No alcohol or substance abuse is tolerated.

#### **Oaks of Righteousness Christian Church**

1018 East Second Street, Monroe, MI 48161

734-241-5590

Heather Boone - Pastor

We are open 7 days a week from 8:00 p.m. To 8:00 a.m.

#### **Philadelphia House 1**

218 Washington Avenue, Monroe, MI 48161

734-242-4266

Emergency Shelter for men – 24/32 men. 90 day limit. Men should be working or looking for work. No alcohol or substance abuse is tolerated. The program reserves the right to do alcohol and drug screens. Clients using methadone must have documentation from their physician. Usually at or near capacity.

#### **Safe House**

Address Confidential

734-242-SAFE (7233)

#### **Sunrise House (Program of Family Counseling and Shelter Services)**

734-242-7233

Emergency Shelter for single women, and women with children, in danger from domestic violence. 24 hour crisis line available (734-242-7233).

Comprehensive domestic violence services offered for non-residential female and male survivors of domestic violence. Case management, legal advocate & PPO services. Domestic Violence support group for survivors every Monday at Family Counseling and Shelter Services 241-0180.

#### **United Way's First Call for Help**

216 North Monroe St.

Monroe, MI 48162

734-242-HELP (4357)

24 Hours

#### **MCOP Emergency Shelter Grant Funds**

1140 South Telegraph Rd, Monroe, MI 48161

734-241-2775

Depending on qualification, the ***Rental Assistance Program*** can help with up to 3 months of rent. Several guidelines apply for those who qualify. It is required for individuals to fill out a state of emergency relief (SER) form through the Department of Human Services (DHS), then receive a decision notice. Individuals must have proof of income to show sustainability as well as a late notice or eviction notice

## Food Pharmacy



Family Medical Center of Temperance and MCOP have teamed up to provide patients a Food Pharmacy  
**EVERY WEDNESDAY FROM 10AM – 3PM!**

Come pick up various types of food like pasta, rice, stew, tuna, peanut butter, canned foods, and fresh produce. Items will change week to week. Contact MCOP at 734.241.2775 ext. 206 to find out more about this program!

## Medicaid Transportation

Health Plan	Phone#	Time Needed – Transportation*	Time Needed-Mileage**
Meridian	800-821-9369	5 Days	Same Day
United Health Care	877-892-3995	4 Days	1 Day Before Appointment
Molina HP	888-898-7969	3 Days	1 Day Before Appointment
McLaren***	888-327-0671	Before 4pm for Next Day	Before Appointment
Blue Cross Complete	888-803-4947	3 Days	Before Appointment
Straight Medicaid	Contact your DHHS caseworker to schedule transportation		

Patient needs to provide the following information when making call:

1. Date and time of appointment
2. Name of doctor or facility
3. Complete address, including zip code and suite number
4. Doctor's phone number
5. Type of appointment
6. Patients complete address and phone number

\*Transportation – Health plan will pick patient up

\*\*Mileage – Patient has own transportation but can be reimbursed-could take up to 6 weeks to receive reimbursement

\*\*\*McLaren has other options, such as bus pass, etc. When patient calls requiring transportation, a survey will be sent out to them explaining other options

## For Job Seekers and Employers



### **Michigan Works! Monroe Service Center**

1531 N. Telegraph Road  
Monroe, MI 48162  
734-240-7950



SEMCA is one of 16 Michigan Works! Agencies created by the state to simplify public and business access by providing necessary tools including educational training, self-help and economic development opportunities.

More than three million individuals were served in 2007 alone. Through a statewide network of over 100 Michigan Works! Service Centers, employers' recruited qualified candidates and job seekers found life-fulfilling careers.

SEMCA oversees seven Michigan Works! service centers throughout Wayne and Monroe counties. These service centers connect individuals and businesses with the services they need quickly and efficiently.

Equal Opportunity Program/Employer. Auxiliary Aids and Services are Available Upon Request to Individuals with Disabilities. Monroe County TTY for the Hearing Impaired only: 734-240-7300. Michigan Relay Centercallers use 711 or 1-800-649-3777. Supported by the State of Michigan and the Southeast Michigan Community Alliance



## Smoking Cessation

**Meridian:** 1-888-437-0606

**Aetna Better Health:** 855-737-0770

**Aetna Better Health with Medicare:** 1-866-316-3784

**United Health Care:** 800-784-8669

**Blue Cross Complete:** 855-326-5102

**Smokefree.gov** has tools  
that can help you or your  
loved ones to quit smoking!

### CLOTHING for Southern Monroe County Residents

The Lion's Den  
&  
Mt. Carmel Church

are offering a method for patients to be able to obtain clothing. Patients that are in need of this assistance, call Mt. Carmel Church and if you go in to discuss assistance, they can provide a voucher to use at the Lion's Den Thrift Store in Temperance, MI!

### WINGS Project

The WINGS project helps by distributing food, clothing, household items, shoes and toys to those in need within Monroe County.

For more information, call Pastor Bonnie Frey at **734-625-4997**

### The Spirit of Giving

This project provides household and kitchen items for qualifying Monroe County residents.

For more information, call **734-241-6088**

### Free Clothing

#### Oaks of Righteousness Church

734-241-5590  
1018 E Second Street  
Monroe, MI 48161

#### Stewart Road Church

734-241-1000  
1199 Stewart Road  
Monroe, MI 48162

#### Hope's Closet

734-308-2116  
6370 Jay Drive  
Monroe, Michigan 48161

#### Trinity Lutheran Church

734-242-2308  
323 Scott Street  
Monroe, MI 48161

### Veterans

**Bedford Veteran's Center:** Tim Fitzgerald. 734-224-7032

**Little Blessings Veteran & Co.**



## **The Habit Change Cheatsheet: 29 Ways to Successfully Ingrain a Behavior**

**BY LEO BABAUTA**

**1. Do just one habit at a time.** Extremely important. Habit change is difficult, even with just one habit. If you do more than one habit at a time, you're setting yourself up for failure. Keep it simple, allow yourself to focus, and give yourself the best chance for success. Btw, this is why New Year's resolutions often fail — people try to tackle more than one change at a time.

**2. Start small.** The smaller the better, because habit change is difficult, and trying to take on too much is a recipe for disaster. Want to exercise? Start with just 5-10 minutes. Want to wake up earlier? Try just 10 minutes earlier for now. Or consider half habits.

**3. Do a 30-day Challenge.** In my experience, it takes about 30 days to change a habit, if you're focused and consistent. This is a round number and will vary from person to person and habit to habit. Often you'll read a magical "21 days" to change a habit, but this is a myth with no evidence. Seriously — try to find the evidence from a scientific study for this. A more recent study shows that 66 days is a better number (read more). But 30 days is a good number to get you started. Your challenge: stick with a habit

every day for 30 days, and post your daily progress updates to a forum.

**4. Write it down.** Just saying you're going to change the habit is not enough of a commitment. You need to actually write it down, on paper. Write what habit you're going to change.

**5. Make a plan.** While you're writing, also write down a plan. This will ensure you're really prepared. The plan should include your reasons (motivations) for changing, obstacles, triggers, support buddies, and other ways you're going to make this a success. More on each of these below.

**6. Know your motivations, and be sure they're strong.** Write them down in your plan. You have to be very clear why you're doing this, and the benefits of doing it need to be clear in your head. If you're just doing it for vanity, while that can be a good motivator, it's not usually enough. We need something stronger. For me, I quit smoking for my wife and kids. I made a promise to them. I knew if I didn't smoke, not only would they be without a husband and father, but they'd be more likely to smoke themselves (my wife was a smoker and quit with me).

**7. Don't start right away.** In your plan, write down a start date. Maybe a week or two from the date you start writing out the plan. When you start right away (like today), you are not giving the plan the seriousness it deserves. When you have a "Quit Date" or "Start Date", it gives that date an air of significance. Tell everyone about your quit

date (or start date). Put it up on your wall or computer desktop. Make this a Big Day. It builds up anticipation and excitement, and helps you to prepare.

**8. Write down all your obstacles.** If you've tried this habit change before (odds are you have), you've likely failed. Reflect on those failures, and figure out what stopped you from succeeding. Write down every obstacle that's happened to you, and others that are likely to happen. Then write down how you plan to overcome them. That's the key: write down your solution *before* the obstacles arrive, so you're prepared.

**9. Identify your triggers.** What situations trigger your current habit? For the smoking habit, for example, triggers might include waking in the morning, having coffee, drinking alcohol, stressful meetings, going out with friends, driving, etc. Most habits have multiple triggers. Identify all of them and write them in your plan.

**10. For every single trigger, identify a positive habit you're going to do instead.** When you first wake in the morning, instead of smoking, what will you do? What about when you get stressed? When you go out with friends? Some positive habits could include: exercise, meditation, deep breathing, organizing, decluttering, and more.

**11. Plan a support system.** Who will you turn to when you have a strong urge? Write these people into your plan. Support forums online are a great tool as well — I used a smoking cessation forum on about.com

when I quit smoking, and it really helped.

Don't underestimate the power of support — it's really important.

**12. Ask for help.** Get your family and friends and co-workers to support you. Ask them for their help, and let them know how important this is. Find an AA group in your area. Join online forums where people are trying to quit. When you have really strong urges or a really difficult time, call on your support network for help. Don't smoke a cigarette, for example, without posting to your online quit forum. Don't have a drop of alcohol before calling your AA buddy.

**13. Become aware of self-talk.** You talk to yourself, in your head, all the time — but often we're not aware of these thoughts. Start listening. These thoughts can derail any habit change, any goal. Often they're negative: "I can't do this. This is too difficult. Why am I putting myself through this? How bad is this for me anyway? I'm not strong enough. I don't have enough discipline. I suck." It's important to know you're doing this.

**14. Stay positive.** You will have negative thoughts — the important thing is to realize when you're having them, and push them out of your head. Squash them like a bug! Then replace them with a positive thought. "I can do this! If Leo can do it, so can I!" :)

**15. Have strategies to defeat the urge.** Urges are going to come — they're inevitable, and they're strong. But they're also temporary, and beatable. Urges usually last about a minute or two, and they come in waves of

varying strength. You just need to ride out the wave, and the urge will go away. Some strategies for making it through the urge: deep breathing, self-massage, eat some frozen grapes, take a walk, exercise, drink a glass of water, call a support buddy, post on a support forum.

**16. Prepare for the saboteurs.** There will always be people who are negative, who try to get you to do your old habit. Be ready for them. Confront them, and be direct: you don't need them to try to sabotage you, you need their support, and if they can't support you then you don't want to be around them.

**17. Talk to yourself.** Be your own cheerleader, give yourself pep talks, repeat your mantra (below), and don't be afraid to seem crazy to others. We'll see who's crazy when you've changed your habit and they're still lazy, unhealthy slob!

**18. Have a mantra.** For quitting smoking, mine was "Not One Puff Ever" (I didn't make this up, but it worked — more on this below). When I wanted to quit my day job, it was "Liberate Yourself". This is just a way to remind yourself of what you're trying to do.

**19. Use visualization.** This is powerful. Vividly picture, in your head, successfully changing your habit. Visualize doing your new habit after each trigger, overcoming urges, and what it will look like when you're done. This seems new-agey, but it really works.

**20. Have rewards.** Regular ones. You might see these as bribes, but actually they're just positive feedback. Put these into your plan,

along with the milestones at which you'll receive them.

**21. Take it one urge at a time.** Often we're told to take it one day at a time — which is good advice — but really it's one urge at a time. Just make it through this urge.

**22. Not One Puff Ever** (in other words, no exceptions). This seems harsh, but it's a necessity: when you're trying to break the bonds between an old habit and a trigger, and form a new bond between the trigger and a new habit, you need to be really consistent. You can't do it sometimes, or there will be no new bond, or at least it will take a really really long time to form. So, at least for the first 30 days (and preferably 60), you need to have no exceptions. Each time a trigger happens, you need to do the new habit and not the old one. No exceptions, or you'll have a backslide. If you do mess up, regroup, learn from your mistake, plan for your success, and try again (see the last item on this list).

**23. Get rest.** Being tired leaves us vulnerable to relapse. Get a lot of rest so you can have the energy to overcome urges.

**24. Drink lots of water.** Similar to the item above, being dehydrated leaves us open to failure. Stay hydrated!

**25. Renew your commitment often.** Remind yourself of your commitment hourly, and at the beginning and end of each day. Read your plan. Celebrate your success. Prepare yourself for obstacles and urges.

**26. Set up public accountability.** Blog about it, post on a forum, email your commitment and daily progress to friend and family, post a chart up at your office, write a column for your local newspaper (I did this when I ran my first marathon). When we make it public — not just the commitment but the progress updates — we don't want to fail.

**27. Engineer it so it's hard to fail.** Create a groove that's harder to get out of than to stay in: increase positive feedback for sticking with the habit, and increase negative feedback for not doing the habit. Read more on this method.

**28. Avoid some situations where you normally do your old habit,** at least for awhile, to make it a bit easier on yourself. If you normally drink when you go out with friends, consider not going out for a little while. If you normally go outside your office with co-workers to smoke, avoid going out with them. This applies to any bad habit — whether it be eating junk food or doing drugs, there are some situations you can avoid that are especially difficult for someone trying to change a bad habit. Realize, though, that when you go back to those situations, you will still get the old urges, and when that happens you should be prepared.

**29. If you fail, figure out what went wrong, plan for it, and try again.** Don't let failure and guilt stop you. They're just obstacles, but they can be overcome. In fact, if you learn from each failure, they become stepping stones to your success. Regroup.

Let go of guilt. Learn. Plan. And get back on that horse

# How Can I Change Depressive Thinking?

The aim is to challenge depressive thinking and replace it with realistic thinking.

Realistic thinking is:

- Accurate about your current situation (seeing things as they are)
- Fair about yourself (balancing your view of the positives and negatives in your life)
- Accurate about your future (not exaggerating the chance of bad outcomes)

You can learn to evaluate your life situation and yourself in a realistic manner. You can learn to think in a fair and realistic way.

That means being fair and realistic about *yourself* (paying attention to strengths as well as weaknesses), about *your current situation* (weighing the positive and negative accurately) and about *your future* (not exaggerating the chance of negative outcomes). On the next few pages, we'll explain how to change depressive thinking into realistic thinking.

## Identify Depressive Thoughts

When you have long-standing health problems, it affects how you think about yourself and your future. Many of your thoughts will be understandable and realistic, but others may reflect depressive thinking. Knowing the difference between these kinds of thoughts is important.

Depressive Thoughts are unfair and unrealistic. They are distorted – inaccurate reflections of yourself and the world around you. The following types of distorted thoughts are common in people with depressed mood.

### Types of Depressive Thoughts

#### Filtering

This means focusing on the negative and ignoring the positive. Focusing on the negative side of experiences can make your whole life seem negative. For example, you receive the results of a health checkup: even though most of it is positive, you only remember the part where

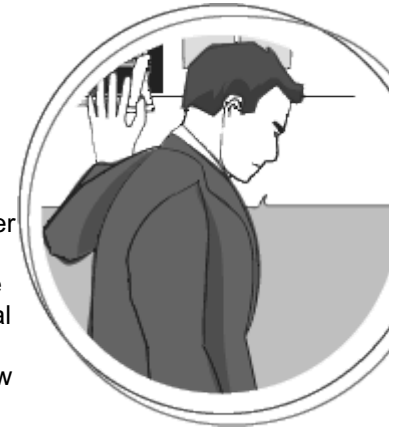
“slightly overweight” was mentioned, so you experience the checkup as mainly negative. **Realistic thinking balances both positive and negative aspects of a situation.**

#### Overgeneralizing

One negative event is seen to be the start of a never-ending pattern. You may think that if you fail the first time, you'll fail every time. For example, your appointment for a specialist treatment is canceled and you start to think that it will never happen and that you'll never get the treatment you require. **Realistic thinking recognizes that one disappointing outcome does not mean everything will be disappointing.**

#### All-or-Nothing Thinking

You see the world in extremes. You are either smart or stupid, tidy or a slob, entirely healthy or totally ill. Situations are either wonderful or terrible, successes or failures. There is no in-between and gradual improvement is not enough. For example, you start a new medication and you feel better, but not like you felt before getting sick, so you tell yourself that the treatment has failed. Or you see your life now as totally limited – you tell yourself that you really can't do *anything* enjoyable anymore. (And maybe you imagine that your life before illness was *perfect*). **Realistic thinking involves seeing situations and people as falling somewhere between the extremes – toward the middle, where most things are found. Even if your life is more limited with a health condition, there are usually interesting activities you can still do or new activities you can start. And, your life before the health condition probably wasn't perfect.**



#### Catastrophizing

You view a difficult situation as a future disaster. For example, you have back pain you rate as *medium*, and you think, “*In ten years it will become unbearable.*” You react to the imagined catastrophe (unbearable suffering) rather than to the smaller event (medium-level pain). Or, you

might think, *"If I feel any pain with activity, that means I've injured myself and I'd better stay inactive."* **Realistic thinking involves expecting events according to their true likelihood, not imagining the worst outcome.**

### Labeling

Labeling involves talking to yourself harshly and calling yourself insulting names. You talk to yourself in a way you would never talk to anyone else. For example, you forget to take one of your medications and blame yourself harshly, calling yourself *"idiot"* and *"useless."* **Realistic thinking avoids the use of insulting labels because they are not fair. You wouldn't talk to anyone else that way, and it's discouraging to do it to yourself.**

### Mind-Reading

You feel as though you know what others are thinking about you, and it's always negative. As a result, you react to what you *imagine* they think, without checking. For example, you have to use a cane to get around and you imagine that everyone looks down on you. **Realistic thinking recognizes that guessing what others think about you is likely to be inaccurate, especially when your mood is down.**

### Fortune-Telling

You feel as though you know what the future will bring, and it's negative. Nothing will work out, so why bother trying? For example, you don't take your medication regularly because you tell yourself that it probably won't help anyway. **Realistic thinking recognizes that you don't know how things will turn out. By staying open to the possibility of positive results, you'll be more hopeful and more likely to achieve a positive outcome.**

### Perfectionism

It's only good enough if it's perfect – and since you can't make most things perfect, you're rarely satisfied or proud. For example, because you can't reach the same fitness goal as before your health condition, you think it's not worth practicing rehabilitation exercises. **Realistic thinking gives credit for accomplishments,**

**even if the result is less than perfect. Few of us reach perfection, but our achievements are important.**

### Shoulds

You think that you know how the world *should* be, and it isn't like that. You know what you *should* be like, and you aren't. You know how other people *should* behave, and they don't. As a result, you're constantly disappointed and angry. For example, you tell yourself that your specialist *should* set aside half an hour for each visit, but you actually get only 10 minutes – so you feel bitter and discouraged. **Realistic thinking understands the limitations of the world and of yourself – trying for improvement but also accepting how things are. The world isn't always going to be fair and just.**

There are other types of depressive thinking, but these are the most common ones. When you catch yourself thinking depressively, it can be useful to look at this list to see if you are using one of these styles of thinking. Most thinking is so quick and automatic that we don't even realize we're doing it. We must learn to become aware of depressive thinking as it occurs. An excellent strategy is to notice thoughts you are having when you experience a drop in your mood – it can be very helpful to write these thoughts down.



**Write down your Depressive Thoughts:**

## Challenge Depressive Thoughts and Replace Them with Realistic Ones

Now, it's time to take a good look at each of these Depressive Thoughts and challenge them. Challenging depressive thinking means that you figure out how these thoughts are unfair or unrealistic and then find more fair and realistic ways of thinking. In order to come up with fair and realistic thoughts, it's helpful to work through the Reality Questions.

### **Depressive Thought:**

I can't do anything now.

## **Reality Questions**

### **CAN I GET MORE EVIDENCE, MAYBE BY ASKING SOMEONE ABOUT THE SITUATION?**

It's often helpful to get another person's opinion about the situation where you've been experiencing low mood. For example, you tell a clinic nurse that you've been feeling like you'll get worse and worse until you're helpless. The nurse reassures you that most people with your health condition are able to stabilize their symptoms and become increasingly active.

### **WOULD MOST PEOPLE AGREE WITH THIS THOUGHT? IF NOT, WHAT WOULD MOST PEOPLE THINK?**

Just by imagining how most people would react to a Depressive Thought, you might find a more fair and realistic way of thinking. When you step outside yourself and examine your thinking from another viewpoint, it's easier to see how your thoughts might be too negative.

### **WHAT WOULD I SAY TO A FRIEND, IF MY FRIEND WERE IN A SIMILAR SITUATION?**

If a friend talked about feeling depressed in the same situation, what would you say? You might be able to help your friend think more fairly, to look at the situation in a balanced way. You might remind your friend of tough situations he has handled successfully in the past. You might find it easier to think fairly and realistically for a friend than for yourself!

### **WHAT WILL HAPPEN IF I CONTINUE TO THINK THIS WAY?**

It's important to consider what will happen if you continue thinking in a depressive way. For example, what is the effect of depressive thinking on your willingness to try new activities? What will be the results for you and others if you continue to think depressively?

### **WHAT IS A MORE ENCOURAGING OR USEFUL WAY OF THINKING?**

Can you come up with another thought that would have better results for you and others? Is there a way of thinking that would be more encouraging and helpful in improving the situation?



### **Situation:**

# Sleep Hygiene

## › Set a schedule.

Establish a regular sleep schedule every day of the week. Don't sleep in more than an hour, even on your days off.

## › Don't force yourself to sleep.

If you haven't fallen asleep after 20 minutes, get up and do something calming. Read a book, draw, or write in a journal. Avoid computer, TV, and phone screens, or anything else that's stimulating and could lead to becoming *more* awake.

## › Avoid caffeine, alcohol, and nicotine.

Consuming caffeine, alcohol, and nicotine can affect your ability to fall asleep and the quality of your sleep, even if they're used earlier in the day. Remember, caffeine can stay in your body for up to 12 hours, and even decaf coffee has *some* caffeine!

## › Avoid napping.

Napping during the day will make sleep more difficult at night. Naps that are over an hour long, or those that are later in the day, are especially harmful to sleep hygiene.

## › Use your bed only for sleep.

If your body learns to associate your bed with sleep, you'll start to feel tired as soon as you lie down. Using your phone, watching TV, or doing other waking activities in bed can have the opposite effect, causing you to become more alert.

## › Exercise and eat well.

A healthy diet and exercise can lead to better sleep. However, avoid strenuous exercise and big meals for 2 hours before going to bed.

## › Sleep in a comfortable environment.

It's important to sleep in an area that's adequately quiet, comfortable, and dark. Try using an eye mask, ear plugs, fans, or white noise if necessary.