Managing Depressive Thinking

“Self-blaming was a problem – I used to say to myself I should have done something different, then I wouldn’t have this illness.”*

Why Is this Important?

Having a health condition can be discouraging, so falling into low or depressed mood is a risk. And low or depressed mood often goes along with a negative way of thinking. We call this depressive thinking. Depressive thinking involves:

- Unrealistic and unfair negative thoughts about yourself
- Unrealistic negative thoughts about your future

Depressive thinking affects how you handle your health condition.

- It makes you see your health situation in an overly negative way – underestimating your own abilities and exaggerating the risk of bad outcomes.
- It feeds into negative emotions – sadness, fear and discouragement.
- It reduces your motivation to do self-care.
- It causes you to withdraw from people who care for you.

Here is a diagram that shows how depressive thinking can affect your emotions and actions, leading to a cycle of worsening mood:

* Quote from a person in a chronic illness support group.
Managing Depressive Thinking

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.

The steps toward Managing Depressive Thinking are:

1. Identify Depressive Thoughts
2. Recognize how your Depressive Thoughts trigger low mood
3. Challenge Depressive Thoughts and replace them with realistic ones
4. Practice 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:

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Recognize How Your Depressive Thoughts Trigger Low Mood

Although low mood may seem like a dark cloud hovering around you constantly, mood actually shifts throughout the day. Every time your mood sinks, ask yourself this important question: "What was going through my mind just then?" Pay attention to what you were thinking and what you were reacting to. Write this down. Perhaps you were leaving a medical clinic and suddenly felt a deepening of your gloom. What was going through your mind? Maybe your doctor reminded you to do a self-care activity and you thought, "Who am I kidding? I'll never be able to do that."

If you record your thoughts for a period of time, you will likely notice the same kinds of depressive thinking, again and again. You might find yourself placing a checkmark beside certain thoughts you wrote down previously ("Oh, that one again!"). When this happens, you have identified a depressive thinking pattern. It’s helpful to write down Depressive Thoughts and also exactly what type of thoughts they are, using the Types of Depressive Thoughts list above.

Example: Jack had been an enthusiastic athlete since his teenage years. At the age of 56, he began to experience pain in his joints and loss of flexibility. He was eventually diagnosed with arthritis. Despite medication, he was forced to limit his physical activity. But much of Jack’s social contact and enjoyment came from playing tennis and golf with his friends. It was a crushing blow for him to have to give up these sports. He began to brood on Depressive Thoughts like “I can’t do anything now, I’m just a cripple, there’s really no point.” This kind of thinking left him feeling very discouraged – his mood became depressed.

He wrote down these Depressive Thoughts:

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<tr>
<th>Depressive Thought</th>
<th>What Type of Depressive Thought is this?</th>
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<tr>
<td>I can’t do anything now.</td>
<td>All-or-Nothing</td>
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<td>I’m just a cripple.</td>
<td>Labeling</td>
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<td>There’s really no point, nothing I do seems worthwhile.</td>
<td>Overgeneralizing</td>
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**Write some of your Depressive Thoughts here:**

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Then what? Some of your Depressive Thoughts may seem obviously distorted: “Nobody promised that treatment would take away all my symptoms, so why did I expect that?” It can be helpful just to know that your mind generates depressive thinking in certain situations. Try to become aware of the depressive thinking as it happens and remind yourself where it comes from: “I think this way because I feel sad and discouraged.” You may find that you take Depressive Thoughts less seriously once you know why they arise.

When you become aware of your depressive thinking you may be tempted to attack yourself: “How could I think such stupid thoughts?” Depressed mood causes you to be self-critical, and recognizing depressive thinking can give you one more reason to beat up on yourself. **Don’t.** Instead, remind yourself that Depressive Thoughts are the product of low mood and the stress of living with a health condition.
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?
Example:

This is how Jack answered the Reality Questions:

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

I’ve been so down that I haven’t really asked about things I can do safely. I guess I could find out what is possible from my physician or the rehabilitation nurse.

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

My wife tells me that I’m over-reacting. She thinks I can find other physical activities, even if they’re not quite as rewarding.

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

I guess I wouldn’t be so hard on a friend. I would be more hopeful.

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

My mood has been dropping more and more, and I’ve been less and less active. If I keep going this way I won’t be able to do much at all.

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

It would be helpful to focus on things I can still do instead of things I can’t do. My golf and tennis buddies are also getting older and they might have to reduce their involvement in these sports. Maybe they’d like to try some new kinds of fitness activity.

Use this worksheet to come up with fair and realistic thoughts to replace at least one of your Depressive Thoughts:

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**Depressive Thought:**

- Can I get more evidence, maybe by asking someone about the situation?
Depressive Thought Worksheet

Would most people agree with this thought? If not, what would most people think?

What would I say to a friend, if my friend were in a similar situation?

What will happen if I continue to think this way?

What is a more encouraging or useful way of thinking?
Now think of a situation where you were feeling down and discouraged. First, make a brief note about the situation. Next, write down any thoughts that made you feel sad or discouraged. You might try to describe the type of Depressive Thoughts you were having, by using the Types of Depressive Thoughts list above. Finally, think about the situation and try to come up with more fair and realistic thoughts, using the Reality Questions above.

### Situation:

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4 Practice Realistic Thinking

It’s not enough to come up with a fair and realistic thought just once. Depressive thinking gets repeated over and over, sometimes for years, until it becomes automatic. More balanced thinking will help you to feel better, but it won’t be automatic – at least not for a while. The good news is that changing depressive thinking doesn’t take years. In fact, people with low mood often notice a difference after a few weeks of practicing realistic thinking.

Stressful situations can trigger depressive thinking:

- Increase in physical symptoms or pain
- Forgetting to take your medication a few times
- Visiting a new specialist for an opinion about your care

In order to get the most benefit from practicing realistic thinking, you must pay attention to your thinking in stressful situations.

Write down a few situations where you often have Depressive Thoughts.

** Situations:**

When you find yourself in a stressful situation, deliberately practice fair and realistic thinking. Don’t assume it will happen on its own. You have to tell yourself how to look at the situation, just as you might give advice to a friend. Talk back to the depressive thinking. Don’t allow depressive thinking to happen without replying to it. Every time you talk back, you make the depressive thinking weaker and the realistic thinking stronger. It takes time before realistic thoughts have more influence over you than depressive ones, but it’s well worth the effort.

At first, realistic thinking might seem false to you. If your thinking has been distorted for some time, it can be difficult to see the truth. Imagine that you’ve been thinking in an unrealistic way about your health condition, telling yourself “I have to go back to how I was before this all started, or my life isn’t worthwhile.” Having this thought regularly may cause you to feel hopeless. You realize that this is unrealistic thinking and come up with the realistic thought “It is worthwhile to make my life now as good as possible.” At first, this realistic thought will seem false, as though you’re just fooling yourself. Only with time and repetition does realistic thinking – the truth – begin to feel true to you. Eventually, you’ll come to accept realistic thoughts more naturally.
Alex was a married man in his mid-30s with two children, 10 and 14. He was employed as an assistant bank manager. He had ulcerative colitis, diagnosed when he was 18 years old. This health condition caused him to experience frequent nausea and gut pain. He managed the condition well until his late 20s, but one day, he suddenly became ill and was rushed to the emergency room. He needed surgery, followed by a two-week hospital stay. When Alex left hospital, he blanked the whole experience from his mind and went back to his life. But the illness was going to be more difficult to handle.

Over the next ten years, Alex had three more of these crisis situations, and each time was rushed to hospital for emergency surgery. He found these hospitalizations frightening and depressing. After each one, he put the experience out of his mind so he could focus on his job and family. Between episodes, he would ignore symptoms, telling himself that it would be “weak” to let symptoms limit his activities.

After his fourth hospitalization, Alex’s physician referred him to a self-management group and gave him a copy of this workbook. As he read through the book, he realized two things. First, when he was very stressed at work, the health condition worsened. Second, he was ignoring the early warning signs that the illness was becoming worse. When symptoms intensified, he would plunge into his job, telling himself that it would be weak and cowardly to let the health condition run his life. But as a result, he wasn’t taking early action to manage the illness before it worsened. Other
people in the self-management group showed him that if he recognized early warning signs, he could temporarily increase the medication or reduce stress and maybe prevent hospitalization.

He identified one particular Depressive Thought that often repeated and made it difficult to deal with the symptoms: “You just can’t handle the pressure, you want people to take care of you.” This thought made him feel guilty whenever he had to take a rest from his job because of symptoms – he would force himself to get right back to work.

Alex used Managing Depressive Thinking to change the way he was thinking about his health condition.

**Situation:** I have a flare-up of my colitis symptoms, pain and nausea. I have to take a break.

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<th>Fair &amp; Realistic Thoughts</th>
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<td>You just can’t handle the pressure. You want people to take care of you. (Perfectionism; Labeling)</td>
<td>• I’ve never expected others to take care of me, but sometimes I need support and that’s fair. • Speaking to myself in this harsh way leaves me feeling more tense and discouraged; it doesn’t help me deal with the illness. • If I keep ignoring my symptoms, the illness will get worse until I have to go back into hospital – that will really affect my work and family. • I have the right to take care of my health – if I notice early warning signs and take action, it’s more likely that I can stay out of hospital, which is good for my job and family.</td>
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Then, Alex set up a prevention plan. This involved writing down:

1. **Early warning signs**
2. **Steps to take when I notice these signs**
   - His doctor helped him to work out a medication plan
   - He practiced the Relaxation skill to better handle job stress
3. **Who to call for help**
   - His wife, parents, physician and in certain situations his boss.

As he applied this prevention plan, Alex was happy to find that it gave him a greater sense of control. He still had to manage the pain and symptoms, but it was years before he saw the inside of a hospital again.