Stress Management

DP 035 - Developmental

By

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STRESS MANAGEMENT

by

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INTRODUCTION

The outreach program described herein is one of a series prepared by the staff of the Counseling-Psychological Services Center. The series includes the more frequently requested outreach topics and is designed to assist CPSC staff members responding to such requests. All programs in the series include the following sections:

Goals/Objectives
Target Population(s)
Overview/Summarization
Outline
Description of Content
Special Instructions/Recommendations

These materials are intended for use in single-session (1-to-2 hour) outreach presentations or workshops. At the presenter's discretion, materials may be used in part or as a whole.
STRESS MANAGEMENT

Goals/Objectives

To assist participants in gaining increased awareness of their personal sources of stress and symptoms and to impart strategies which participants may begin to use to ameliorate these symptoms.

The goal statement above is to be implemented by the following objectives:

3. Discussion of sources of stress.
5. Review additional resources.

The objectives listed are to be implemented through open discussion, handouts, and specific exercises involving practice.

Target Population(s)

The components of this manual were piloted with groups of university students, male and female, who were self-selected volunteers from the U.T. campus, in addition to clinical referrals from the staff at the Counseling Center. University students cycle through a series of developmental phases or stages in college, beginning with the freshman year. These developmental changes can create crises and tensions which affect the quality of life and the ability to produce during the college years. By anticipating these stages and changes and developing stress management skills, students are better able to reduce the frequency and intensity of the crises and tensions that accompany these changes. Therefore, almost any group of students, from freshmen to graduates, are potential candidates for stress management. However, it should be emphasized that the generic focus of the strategies in this manual make them applicable to other groups as well. University staff in "on-line" positions such as cashiers, receptionists, and clerks, middle-management administrative personnel, and faculty may also be appropriate candidates for stress management.

Overview

The materials are divided into several sections. After reviewing the materials, you may choose to delete or modify them, depending on the needs of the participants and the time allowed. The materials provided fit well into a two-hour time frame. The following procedure is provided to the workshop leader in preparing the materials.
Overview (continued)

Step 1 Briefly review the entire package of materials.

Step 2 Read the "Stress, What is It?" section carefully and jot down notes, if necessary.

Step 3 Duplicate the necessary number of copies of the following handouts:
A. Stress Symptom Checklist.
B. Stress Inventory.
C. The Worry Cycle.
D. Planning for Effective Stress Management.
E. Reading List.

Step 4 Go over the relaxation instructions carefully so that you can read it aloud easily.

Step 5 Review the Outline and familiarize yourself with the overall time sequence and "flow" of the workshop. Any special instructions will be contained in the Outline.

Outline

Minutes
10  I. Begin by introducing leaders and go over agenda:
   A. Overview of stress research.
   B. Self-assessment.
   C. Dealing with worry.
   D. Learning to relax.

5   II. Start by asking group what they think stress is. Is it in the event or thing? Or is it in our perception of the event or thing? Stop this after about five minutes.

15  III. Review briefly stress literature showing how definition has moved from a physiological one to a psychological one. Use introduction materials from manual for information on this. Sum up by saying stress is:
   A. Constant.
   B. Idiosyncratic.
Outline (continued)

Minutes

30  IV. Self-assessment

A. Fill out Stress Inventory and Symptom Checklist separately

B. Discuss responses
   1. What are major areas of stress?
   2. Do you see a pattern to your stress?
   3. How do you cope now?
   4. How would you like to cope?

C. Who scored low and why? (Low - importance of recognizing what you can control and what you can't.)

D. Can participants relate their symptoms to areas of stress they've identified?

E. Introduce: What are the possible options in controlling stress?
   1. Accept current level of stress.
   2. Change self — behavior, thoughts, expectations, etc.
   3. Change environment — job, marriage, etc.

F. Let's assume, for the remainder of the workshop, that we have chosen the second alternative: to change ourselves. There are at least two things we can do to help ourselves:
   1. Learn new "de-stressing" skills, e.g., yoga, meditation, relaxation, etc.
   2. Alter the ideas, the way we think, which generate our own stresses.

G. Go back to Stress Inventory and help participants explore irrational beliefs behind sources of stress. Do they tend to obsess and worry - to see catastrophe in all situations?
Outline (continued)

Minutes

15  V. Introduce and discuss Worry Cycle

A. Show how it can be:

1. Reinforcing or addictive.

2. Self-fulfilling.

B. Take participants through the Cycle with an example like "I'm not smart enough." Try to get the group to come up with one first. Wrap up exercise by showing group how they can control stress at several points on the Cycle by (1) confronting irrational beliefs, (2) noticing and changing negative self-talk, and (3) learning relaxation skills to control feelings of anxiety and fear.

20 VI. Introduce relaxation as a de-stressing skill. Describe how the relaxation response competes with the anxiety response very effectively. "One cannot be anxious and relaxed at the same time."

A. Lower the lights. Have participants get comfortable. Instruct people with contacts not to close their eyes tightly.

B. Debrief about the experience afterward.

15 VII. Wrap-Up

A. Today you have attempted to increase participants' awareness of their own stress picture and to practice ways to manage that stress via:

1. Reducing worry by confronting irrational and negative beliefs and self-messages.

2. Learning to relax more effectively.

B. Other stress-reducing techniques might be:

1. Better nutrition.

2. Acquiring new skills (assertiveness training, etc.)

3. Engaging in creative acts, like art, pottery, etc.

4. Starting an exercise program.

C. Hand out Planning for Effective Stress Management and Reading List.
Outline (continued)

Minutes

D. Give the Counseling Center Stress Management Group and Telephone Tapes as additional resources.

5 VIII. Have participants complete an evaluation form, if one is used.

Description of Content

I. Stress and Stress Management: What is It?

Stress management is a popular term, and has been in common use by the lay public and mental health professionals for many years. The term "stress" has appeared in medical and medically-related literature since 1956, when Hans Selye developed the concept of stress to explain the physiological response of people to various environmental stimuli. Considerable research was conducted in the area of epidemiology in public health departments throughout the country. A later development in stress research concerns the personality type and other psychological characteristics of individuals, particularly men, who respond to stress situations with physiological breakdown, e.g., cardiac disease, peptic ulcers, and other psychosomatic disorders.

In the last decade or so, we find researchers have looked more at psychological variables in an effort to understand the stress response. Appley and Trumbel (1967) define stress as the "affective, behavioral, and physiological response to aversive stimuli." At approximately the same time, Laxarus (1966) preferred to talk almost exclusively about psychological stress and defined the term as "the threat or anticipation of future harm."

Despite the deficiencies in definition up to this point, several key concepts can be gleaned from the literature on stress. From the above discussion, it becomes clear that the stress response has both psychological and physiological corollaries. In addition, we find that all individuals respond to stimuli or a stimulus condition idiosyncratically. In other words, what is stressful for someone may, in fact, not be stressful for someone else. A third basic concept which emerges is that stress is a constant condition to which everyone must continuously adjust. Coelho, Hamburg, and Adams (1974) have suggested that stress is a "stimulus condition that is constant and is impinging on the organism at some optimum value." Physiological and psychological breakdown may occur when this "optimum value" is exceeded in one or more spheres of activity.

One of the challenges of campus mental health professionals, then, is to help students find ways to avoid exceeding this optimum value of stress. Part of this challenge will be to find some generic approach to the reduction of stress which can be applied to different situations or issues.

However, this more general approach to the reduction of chronic tension does not rule out the application of more traditional or conventional treatment strategies.

- 6 -
Description of Content (continued)

It may be necessary to combine a generic stress management program with conventional treatment for remedial problems such as lack of information about self or the environment, skill deficits, conflict with others, etc.

For some, a stress management program alone will not enable the person to function well. For this person, the final step in the stress management program will be the development of an "action plan" where the person writes for him/her self a psychological prescription including, perhaps, a combination of several therapeutic experiences. Such a plan for an individual might include: (1) a structured group on communications skills; (2) consultation with a nutritionist concerning dietary issues; (3) the development of an individualized exercise program; (4) short-term psychotherapy; and, (5) a short course in reading improvement.

In addition to remedial treatment, a stress management program might be combined with certain developmental or enhancement experiences which are not "treatment" in the remedial sense, but allow individuals to excel and grow in the areas where they have previously been functioning adequately. Unlike those students having a "felt need" and requiring remedial help, this population is made of students who are functioning well in the academic environment but now see some value in being "inoculated" against potential harmful tension by participating in a stress management program. An action plan for students in the group might include: (1) a short course or seminar in the adjustment to college life; (2) a structured group on couple enrichment; and/or, (3) a sandwich seminar on diet and exercise.

The emphasis in stress management, including "action planning," is on the client taking individual responsibility for his or her care and treatment within the context of psychological consultation and guidance.

Although stress management programs vary somewhat in format and content, most contain several important components:

A. A survey or assessment of specific stressful problem areas for each participant.

B. The specific stress management training, focusing on cognitive restructuring and de-stressing skills.

C. Homework assignments.

D. The development of an "action plan" by each participant which is individual, operational, and specific.

II. General Relaxation Instructions

The following instructions should be reviewed carefully so that the leader can deliver them with a smooth, even pace:

Begin by getting as comfortable as you can. Settle back comfortably. Just try to
let go of all the tension in your body. Now, take a deep breath. Breathe right in and hold it (five second pause). And now exhale. Just let the air out quite automatically and feel a calmer feeling beginning to develop. Now, just carry on breathing normally and just concentrate on feeling heavy all over in a pleasant way. Study your own body heaviness. This should give you a calm and reassuring feeling all over (ten second pause). Now, let us work on tension and relaxation contrasts. Try to tense every muscle in your body. Every muscle: your jaws, tighten your eyes, your shoulder muscles, your arms, chest, back, stomach, legs, every part, just tensing and tensing. Feel the tension all over your body tighter and tighter — tensing everywhere, and now let it go, just stop tensing and relax. Try to feel this wave of calm that comes over you as you stop tensing like that. A definite wave of calm (ten second pause). Now, I want you to notice the contrast between the slight tensions that are there when your eyes are open and the disappearance of these surface tensions as you close your eyes. So, while relaxing the rest of your body, just open your eyes and feel the surface tension which will disappear when you close your eyes. Now, close your eyes and feel the greater degree of relaxation with your eyes closed (ten second pause). All right, let us get back to the breathing. Keep your eyes closed and take in a deep, deep breath and hold it. Now, relax the rest of your body as well as you can and notice the tension from holding your breath. Study the tension. Now, let out your breath and feel the deepening relaxation — just go with it, beautifully relaxing now. Breathe normally and just feel the relaxation flowing into your forehead and scalp. Think of each part as I call it out — just relaxing — just letting go, easing up, eyes and nose, facial muscles. You might feel a tingling sensation as the relaxation flows in. You might have a warm sensation. Whatever you feel, I want you to notice it and enjoy it to the full as the relaxation now spreads very beautifully into the face, into the lips, jaws, tongue, and mouth so that your lips are slightly parted as the jaw muscles relax further and further. The throat and neck relaxing (five second pause), shoulders and upper back relaxing, further and further, feel the relaxation flowing into your arms and to the very tips of your fingers (five second pause). Feel the relaxation in your chest as you breathe regularly and easily. The relaxation spreads even under your armpits and down your sides, right into the stomach area. The relaxation becomes more and more obvious as you do nothing but just give way to the pleasant serene emotions which fill you as you let go more and more. Feel the relaxation — stomach and lower back all the way through in a warm, penetrating, wavy, calm, and down your hips, buttocks, and thighs to the very, very tips of your toes. The waves of relaxation just travel down your calves to your ankles and toes. Feel relaxed from head to toe. Each time you practice this, you should find a deeper level of relaxation being achieved — a deeper serenity and calm, a good, calm feeling.

Now, to increase the feelings of relaxation at this point, what I want you to do is just keep on relaxing and each time you exhale, each time you breathe out, for the next minute, I want you to think the word relax to yourself. Just think the word relax as you breathe out. Now, just do that for the next minute (one minute pause). Okay, just feel that deeper relaxation and carry on relaxing. You should feel a deeper, deeper feeling of relaxation. To even further increase the benefits, I want you to feel the emotional calm, those tranquil and serene feelings which tend to cover you all over, inside and out, a feeling of safe security, a calm indifference — these are the
feelings which relaxation will enable you to capture more and more effectively each
time you practice a relaxation sequence. Relaxation will let you arrive at feeling a
quiet inner confidence — a good feeling about yourself (five second pause). Now, once
more, feel the heavy sensations that accompany relaxation as your muscles switch off
so that you feel in good contact with your environment, nicely together, the heavy
good feeling of yourself calm and secure and very, very tranquil and serene.

Now, we can deepen the relaxation still further by just using some very special
stimulus words. Let’s use the words calm and serene. What I would like you to do is to
think these words to yourself twenty times or so. Don’t bother to count. Approxi-
mately twenty or thirty times, just say to yourself: calm and serene; and then feel the
depening — ever, ever deepening — waves of relaxation as you feel so much more
calm and serene. Now, you just do that; take your time; think of the words and feel
the sensations over and over (pause of about one minute). Good.

Now, I am going to count backward from ten to one. At the count of five, I would
like you to open your eyes, and then by the time I reach one, just kind of stretch and
yawn and relax on your own. Okay, now counting backward: ten, nine, eight, seven,
six, five, open your eyes, four, three, two, and one. Now, just stretch and kind of yawn
and then slowly get up and carry on relaxing as long as you wish.
The following forms will be handed out and discussed:

STRESS INVENTORY
STRESS SYMPTOMS CHECKLIST
THE WORRY CYCLE

NOTE: You will need to duplicate copies for your group.
STRESS INVENTORY

To what extent does the stress you experience result from the following sources? (Please bring back to each session).

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<tbody>
<tr>
<td>A.</td>
<td>Demands of school, classwork</td>
<td>1</td>
<td>2</td>
<td>3</td>
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<td>B.</td>
<td>Conflict with society</td>
<td>1</td>
<td>2</td>
<td>3</td>
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<td>C.</td>
<td>Conflict with family (parents)</td>
<td>1</td>
<td>2</td>
<td>3</td>
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<td>D.</td>
<td>Health of self</td>
<td>1</td>
<td>2</td>
<td>3</td>
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<td>E.</td>
<td>Health of parent, friend, other</td>
<td>1</td>
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<td>3</td>
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<td>F.</td>
<td>Inadequacy of living arrangements</td>
<td>1</td>
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<td>G.</td>
<td>Conflict with authorities (teachers, deans, police, etc.)</td>
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<td>3</td>
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<td>H.</td>
<td>Weakness (e.g., dependency of/on spouse, mate, or friend)</td>
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<td>I.</td>
<td>Not enough money</td>
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<td>2</td>
<td>3</td>
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<td>J.</td>
<td>Not enough friends</td>
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<td>2</td>
<td>3</td>
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<td>K.</td>
<td>Separation, conflict with spouse, mate or friends</td>
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<td>L.</td>
<td>Religious conflicts</td>
<td>1</td>
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<td>M.</td>
<td>Drug problems (includes alcohol)</td>
<td>1</td>
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<td>3</td>
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<td>N.</td>
<td>Demands of job, work.</td>
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<td>O.</td>
<td>Environmental issues</td>
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<td>P.</td>
<td>Future planning, decision making</td>
<td>1</td>
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<td>Q.</td>
<td>(Other)__________________________</td>
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<td>STRESS SYMPTOM CHECKLIST</td>
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<td>1.</td>
<td>Buzzing or ringing in the ears.</td>
<td>16.</td>
<td>Nervous mannerisms (e.g., flinching, &quot;tics,&quot; nail biting, drumming fingers).</td>
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<td>2.</td>
<td>Fatigue I can't account for.</td>
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<td>3.</td>
<td>Dizziness.</td>
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<td>5.</td>
<td>Sweating (other than from exercise or caused by physical environment).</td>
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<td>6.</td>
<td>Peculiar numbness of any part of the body.</td>
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<td>7.</td>
<td>Unexplained heightened sensitivity of any part of the body.</td>
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<td>8.</td>
<td>Stiffness or pain of muscle or joints (not due to exercise).</td>
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<td>9.</td>
<td>Intestinal disturbance.</td>
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<td>10.</td>
<td>Stomach complaints.</td>
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<td>11.</td>
<td>Breathing difficulties (not caused by disease).</td>
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<td>12.</td>
<td>Itching (I can't explain).</td>
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<td>13.</td>
<td>Urinary problems or complaints.</td>
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<td>15.</td>
<td>Pain (I can't explain).</td>
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<tr>
<td>16.</td>
<td>Nervous mannerisms (e.g., flinching, &quot;tics,&quot; nail biting, drumming fingers).</td>
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<td>17.</td>
<td>Restlessness.</td>
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<td>18.</td>
<td>Tearfulness.</td>
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<td>19.</td>
<td>Irritability.</td>
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<td>21.</td>
<td>Trouble concentrating.</td>
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<td>22.</td>
<td>Insomnia (sleeplessness).</td>
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<td>23.</td>
<td>Diarrhea.</td>
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<td>24.</td>
<td>Headaches.</td>
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<td>25.</td>
<td>Fever blisters.</td>
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<td>26.</td>
<td>Hunger or lack of appetite.</td>
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<td>27.</td>
<td>Clumsiness, fainting, trembling.</td>
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<td>29.</td>
<td>Forgetfulness.</td>
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<td>30.</td>
<td>Immobilization.</td>
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<td>31.</td>
<td>Constipation.</td>
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<td>32.</td>
<td>Excessive sleep.</td>
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<td>33.</td>
<td>Coldness of extremities.</td>
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<td>34.</td>
<td>Dry mouth.</td>
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<td>35.</td>
<td>Others (please describe).</td>
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</table>
THE WORRY CYCLE

IRRATIONAL BELIEFS

REINFORCES

NEGATIVE OUTCOMES RELATED TO TASK, PEOPLE, ETC.

LEADS TO

NEGATIVE OR IRRATIONAL SELF-TALK

LEADS TO

INAPPROPRIATE FEELINGS (SUCH AS RAGE OR FEAR)
The following forms will be handed out at the end of the group
but will not be discussed:

PLANNING FOR EFFECTIVE STRESS MANAGEMENT

READING LIST
PLANNING FOR EFFECTIVE STRESS MANAGEMENT

I. Self-Management
   A. Vigorous Regular Exercise
   B. Nutrition
      1. Good eating habits.
      2. Vitamin and mineral supplements.
   C. Letting-Go Techniques
      1. Centering and focusing.
      2. Relaxation/meditation/prayer.
      3. Finishing unfinished business.
   D. Self-Awareness
      1. Needs, desires, idiosyncracies.
      2. Congruence/assertiveness.
   E. Personal Planning
      1. Time management.
      2. Positive life choices.

II. Creation and Use of Support Systems

III. Altering Stressful Organizational Norms, Policies, and Procedures

IV. Characteristics of Effective Stress Managers
   A. Self-Knowledge - Strengths, Skills, Liabilities
   B. Varied Interests - Many Sources of Satisfaction
   C. Variety of Reactions to Stress - Repertoire of Responses
   D. Acknowledgements and Acceptance of Individual Differences
   E. Being Active and Productive
READING LIST

COPING WITH STRESS SUCCESSFULLY


