Stress Management

TI050 – Thematic

By David Coffman and Clifford Katz

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Stress Management  TI 050

By David Coffman and Clifford Katz

Acknowledgment
The authors wish to express their sincere thanks to Helen Spear and Patsy Stice for their valuable help in developing this manual and for their group skills in piloting the initial stress reduction program. Their ideas and editorial contributions are reflected throughout the manual.

Introduction & Overview

Purpose
Our main objective in writing this manual is to provide counselors with a systematic approach in their efforts to help clients reduce and manage stress. This manual should be particularly helpful to those counselors who may be relatively naïve about theories about stress and the techniques for stress management. The manual is designed to enable the counselor to introduce and administer the exercises and instruments in each session with fairly brief preparation time.

A second objective is to heighten the counselor’s awareness about stress, in a broader sense, such that they can begin to see stress management as a series of experiences which are generic in nature and not tied to a specific problem focus, e.g. marital conflict, lack of assertiveness, etc. The perspective we hope to convey about stress management is that we see it as a means of “inoculating” individuals against potentially stressful situations and events. It is therefore very much a preventive strategy or intervention.

Target Populations or “Deciding Who Needs It”
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 freshman to graduate, is a potential candidate 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.

**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 stressful situations with physiological breakdown, e.g., cardiac disease, peptic ulcer, 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 Trumbell (1967) define stress as the “affective, behavioral, and physiological response to aversive stimuli.” At approximately the same time, Lazarus (1966) preferred to talk almost exclusively about psychological stress and defined the term as “the threat or anticipation of future harm.”

In spite of 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 that 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. 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- or herself a psychological prescription including, perhaps, a combination of several therapeutic experiences. Such a plan for an individual might include: (1) a structured group on communication 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. This is a different population from those students having a “felt need” and requiring remedial help. This population is made up of students who are functioning well in the academic environment but who 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) 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:

1. a survey or assessment of specific stressful problem areas for each participant;
2. the specific stress management training, focusing on cognitive restructuring and de-stressing skills;
3. homework assignments; and
4. the development of an “action plan” by each participant which is individual, operational, and specific.

**The Stress Management Manual: “How to Use It”**

As you might suspect, the development of this manual reflects the ideas and concerns expressed by the authors in the previous section where we discussed the important basic elements or components for a stress management program. These components are strategically placed in the manual to make for a natural flow in learning and skill-building for the group members from one session to the next.

The manual is divided into four (4) sessions with two (2) hours allocated for each session. This is an arbitrary convention on the authors’ part, and it may be feasible for group facilitators to increase the length of the sessions and/or increase the number of sessions to meet the needs of the group. Also, the manual in constructed so that certain sessions or components can be isolated and utilized for lectures, seminars, workshops, etc.

It is important in using the manual to be flexible. There is ample space for your notes and comments. Sample introductory statements are provided for each component which facilitators may wish to alter to fit their own style.

In addition, time estimates are given for each component which were based on the authors’ experience but again are arbitrary and can be increased or decreased to fit the facilitator’s own situation.

Some sessions have an “Options” section which contains alternative components which the leader may wish to use. This may affect the overall allocation of time for that session.

Try to think of this manual as a workbook which can be modified and developed into a personal tool.

Some tips or suggestions for using the manual are:
1. Find someone compatible to co-lead the group with.
2. Review and study the manual.
3. Discuss each upcoming session with the co-leader and decide on time allocations, optional components, etc. Set the agenda.
4. Decide on who is going to introduce each component. This divides the work for each session and allows one leader to observe the group’s response to a given exercise being introduced by the other leader.

5. If the group is not responding well to a given exercise, cut it short and move on to something else. It is important to keep the group active and interested.

6. If you use a handout, be sure to discuss it. A rule-of-thumb is “if a handout is important enough to use, it’s important to discuss.” Similarly, if homework is assigned be sure to debrief about the homework at the beginning of the following session.

7. Finally, facilitators should take themselves “off the hook” for doing the group perfectly the first time. They will do much better the second time around as the manual/workbook begins to reflect their own timing and style.
Suggested Reading

Session 1: Learning About Your Own Stress

Agenda: (Handouts or forms appear in italics.)

<table>
<thead>
<tr>
<th>Timing</th>
<th>Overview of Agenda</th>
</tr>
</thead>
<tbody>
<tr>
<td>10-15 minutes</td>
<td>1. Introduction of leaders and participants — “Name Game.”</td>
</tr>
<tr>
<td>10-15 minutes</td>
<td>2. Overview of group.</td>
</tr>
<tr>
<td>15-20 minutes</td>
<td>3. Introduce information on stress - definitions (theories, nature, source), manifestations, strategies.</td>
</tr>
<tr>
<td>15-20 minutes</td>
<td>4. Introduce and discuss Stress Inventory.</td>
</tr>
<tr>
<td>15 minutes</td>
<td>5. Discuss physical symptoms of stress. Introduce and discuss Stress Syndrome Checklist.</td>
</tr>
<tr>
<td>15-20 minutes</td>
<td>6. Introduce concept of systematic relaxation training. Introduce relaxation exercise using Relaxation Techniques and discuss it.</td>
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<tr>
<td></td>
<td>Homework: (1) Practice relaxation. (2) Introduce Stress Journal.</td>
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</tbody>
</table>

Note: The above time allocation allows for a five-minute buffer within the two-hour session.

Optional Components:
1) Bodily reactions to stress.
2) De-stressing skills.
Part 1: Introduction (10-15 min.)

After group members are seated, the group leaders should introduce themselves and give a brief statement about who they are and how they became interested in stress.

This is followed by one leader introducing the “Name Game.”

Have group members pair up. Take about five (5) minutes for these pairs to find out something about each other such as name, job, what they are doing in school, why they are in the group, etc.

The group then reconvenes and members of the pairs take turns introducing the other person they have been talking with to the group and telling the group a little but about the person. This continues until all members are introduced.

Note: In case of a group with an odd number, one group member can pair up with a group leader.

Part 2: Overview (10-15 min.)

Go over group format: 4 sessions, 2 hours each session.

Make clear to group members that this group is not a therapy or encounter group, but a group designed to impart specific skills. However, individual personal examples and experiences will be welcomed and encouraged in the context of the various exercises that will be introduced.

Give a brief overview of the four sessions, focusing on the “themes” or key issues to be covered in each session. Emphasize how each session builds on the skills and information acquired in the previous session, so attendance and the homework is important.

Review the agenda for Session 1.
Part 3: What is Stress? (10-20 min.)

Notify the group that this part will be sketchy and incomplete because of the need to select only certain basic concepts from a great deal of information.

Leaders should review information in introduction to manual under “Stress and Stress Management.” Jot down notes that will help you remember basic facts and definitions.

Be sure to emphasize the following basic concepts of stress:

1) Historical problems exist in the definition of stress. What is a stressor for one person may not be for someone else.

2) Stress response is a result of constant interaction between the person and his environment.

3) It is a constant condition to which we all must try to adjust.

4) It is both a psychological and physiological response.

5) Positive as well as negative events (stimuli) can cause stress.

6) Some optimum level of stress is important for the human organism to function and survive.

One of the leaders can tie some of these concepts together with the following example: “Right now I am under stress.”

**Physiologically:**

1) Blood clotting time has increased.

2) Blood fats (cholesterol and triglycerides) and blood sugars have increased.

3) My heart is pumping faster, blood pressure is slightly elevated and muscle tension has increased.

4) There is an increase in adrenaline in the bloodstream.

**Psychologically:**

“I am experiencing some anticipatory anxiety over concern that the group will turn out well which is related to the idea or hope that it will have some impact.”
Then leaders ask the question: What are some alternative responses to stress?

1. **Accept** the present level of stress, simply cope with it, as is, and go on.

2. **Change my perception** of this event and subsequently my belief that it is threatening to me.

3. **Alter my environment** by leaving, perhaps, so that I don’t need to alter my perceptions or beliefs.

Leaders review some sources of stress:

1. Environmental — noise, overcrowding, time pressures, competition, financial problems.

2. Major life changes — marriage, divorce, pregnancy, vacation, etc.

3. Developmental changes — challenges of new ideas, lifestyles, etc.


Can the group come up with examples or other sources of stress?

**Note:** If group members want more information on the physiology of stress, see optional component #1 at the end of this section.
Part 4: Stress Inventory (15-20 min.)

Note: Be sure to have enough copies of the Stress Inventory for all group members.

Purpose: To help each group member begin to develop an awareness of his or her own unique stress picture in regard to stress events and subjective intensity of the stress for that event.

Introduce the Stress Inventory by stating its purpose and giving the group 5–6 minutes to complete it. Indicate that the blank spaces under each item are for them to use to be as specific as possible. For example, under “C. Health of self,” one might put “recent knee surgery.”

After completion, have the group share their responses on the Inventory. Are there few items or many items checked? Was there any pattern to the responses?

Note: Be sure to tell the group to bring the forms to each session.
Part 5: Stress Symptom Checklist (15 min.)

Note: Have copies of the Stress Symptom Checklist available.

Review Optional Component #1 and the information on the sympathetic and parasympathetic nervous system for physiological symptoms of stress.

Discuss this briefly and list a few of the symptoms:

1. cold feet
2. sweaty palms
3. knot in the stomach
4. etc.
5. etc.
6. etc.

Explain to the group that no two people experience the symptoms of stress in the same way.

It is important in learning to manage stress to find out and become very aware of how we as individuals manifest these symptoms. They are signs or cues for us to know that we are tense or under stress.

Introduce the checklist and have the group complete it. Take 4-5 minutes for this. Afterwards ask group members to share their unique symptom picture. Are there symptoms they experience that are not on the list?
Part 6: Relaxation Training (15-20 min.)

Progressive deep-muscle relaxation training is only one of several “de-stressing” skills available today. Others are physical exercise, autogenic training, biofeedback and meditation.

*Note: If the leaders wish to review these other de-stressing skills with the group, refer to Optional Component #2 at the end of this section.*

De-stressing implies that these skills are used to manage tension after a state of stress is apparent to the individual. In this sense, relaxation training is a remedial skill. However, with practice, one can experience an ongoing “systemic” or overall reduction in muscular tension. Skill in relaxation then is preventative as well as remedial.

Relaxation training is designed to increase awareness of tension in voluntary skeletal muscles and increase control over these muscles so that an individual can induce and control very low levels of tension.

Progressive relaxation makes most people feel soothed and calm. These are noticeable effects. However the reduction in muscular tension causes decreases in other physiological processes related to the maintenance of tension or stress. These are system changes in the body that the individual may not be aware of. Some of these physiological changes are:

1. Changes in brain wave pattern - increase in slow alpha waves.
2. Reduced metabolic rate - lowered oxygen consumption.
3. Reduction of blood lactate levels - a product of muscle metabolism associated with tension and stress. (High lactate level leads to muscle cramping.)
4. Lowered activity of the sympathetic nervous system (less cold feet and tight muscles).

Psychologically, one cannot be anxious and relaxed at the same time. The relaxation response competes with and can take dominance over the anxiety response.

Introduce the relaxation exercise. Emphasize the importance of progressive relaxation in stress management. Encourage everyone to participate, but if some individuals are reluctant don’t push them. There will be more opportunities in subsequent sessions.

Lower the lights if possible. Have members stretch out on the floor and avoid crossing arms and legs. One leader reads the attached relaxation instructions. (The exercise should take 10-12 minutes.)
After the exercise, debrief with the group about the experience. Was it hard or easy? Where do they hold tension in their body? Did one part of the relaxation sequence seem particularly helpful?

**Part 7: Homework (10 min.)**

**Homework:** Suggest that your group members practice relaxation training before the next session. Mention resources such as the relaxation tapes, if available.

**Stress Journal:** Introduce the *Stress Journal*. Make sure you have enough copies for the group.

The purpose of the *Stress Journal* is to provide a structured means for group members to record and thereby track the situations in which they experience stress and symptoms associated with those events. This will provide a kind of “baseline” from which the group member can gauge his or her progress.

However, it should be emphasized by the leaders that the members are simply to record the events and symptoms this week without feeling any pressure to manage or control the stress at this point. Negative gains may occur from premature attempts without sufficient training in relaxation.

*Note: Ask group members to bring the Stress Journal with them to the next session.*
**Stress Inventory**

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

<table>
<thead>
<tr>
<th>Source</th>
<th>Scale</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>None</td>
</tr>
<tr>
<td>A. Demands of school, class work</td>
<td>1</td>
</tr>
<tr>
<td>B. Conflict with society</td>
<td>1</td>
</tr>
<tr>
<td>C. Conflict with family (parents)</td>
<td>1</td>
</tr>
<tr>
<td>D. Health of self</td>
<td>1</td>
</tr>
<tr>
<td>E. Health of parent, friend, or other</td>
<td>1</td>
</tr>
<tr>
<td>F. Inadequacy of living arrangements</td>
<td>1</td>
</tr>
<tr>
<td>G. Conflict with authorities (teachers, deans,</td>
<td>1</td>
</tr>
<tr>
<td>police, etc.)</td>
<td></td>
</tr>
<tr>
<td>H. Weakness (e.g., dependency of/on spouse, mate,</td>
<td>1</td>
</tr>
<tr>
<td>or friend)</td>
<td></td>
</tr>
<tr>
<td>I. Not enough money</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>1</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>J. Not enough friends</td>
<td></td>
</tr>
<tr>
<td>K. Separation, conflict with spouse, mate, or friends</td>
<td>1</td>
</tr>
<tr>
<td>L. Religious conflicts</td>
<td></td>
</tr>
<tr>
<td>M. Drug problems (include alcohol)</td>
<td>1</td>
</tr>
<tr>
<td>N. Demands of job, work</td>
<td>1</td>
</tr>
<tr>
<td>O. Environmental issues</td>
<td>1</td>
</tr>
<tr>
<td>P. Future planning, decision making</td>
<td>1</td>
</tr>
<tr>
<td>Q. Life transitions (moving, etc.)</td>
<td>1</td>
</tr>
<tr>
<td>R. Loss (death or separation from someone close)</td>
<td>1</td>
</tr>
<tr>
<td>S. Other</td>
<td>1</td>
</tr>
</tbody>
</table>
### Stress Symptom Checklist

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Buzzing or ringing in the ears</td>
<td>18. Tearfulness.</td>
</tr>
<tr>
<td>2. Fatigue I can’t account for.</td>
<td>19. Irritability.</td>
</tr>
<tr>
<td>5. Sweating (other than from exercise or caused by physiological environment).</td>
<td>22. Insomnia (sleeplessness).</td>
</tr>
<tr>
<td>6. Peculiar numbness of any part of body.</td>
<td>23. Diarrhea.</td>
</tr>
<tr>
<td>8. Stiffness or pain of muscle or joints (not due to exercise).</td>
<td>25. Fever blisters.</td>
</tr>
<tr>
<td>10. Stomach complaints.</td>
<td>27. Clumsiness, fainting, trembling.</td>
</tr>
<tr>
<td>17. Restlessness.</td>
<td>34. Dry mouth.</td>
</tr>
<tr>
<td>35. Others (please describe)</td>
<td></td>
</tr>
</tbody>
</table>
### Stress Journal

<table>
<thead>
<tr>
<th>Weekday</th>
<th>Stress Event</th>
<th>Stress Symptoms</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monday</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tuesday</td>
<td></td>
<td></td>
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<tr>
<td>Wednesday</td>
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<td>Saturday</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sunday</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Comments and Notes:**
General Relaxation Instructions

Note: One of the leaders reads this out to the group. Persons wearing contact lenses should not tighten their eyes.

Begin by getting as comfortable as you can. Close your eyes and 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. (5-second pause.)

And now exhale. Just let the air out automatically and feel a calmer feeling beginning to develop. Just carry on breathing normally and concentrate on feeling heavy all over in a pleasant way. Study your own heaviness. This should give you a calm and reassuring feeling all over. (10-second pause.)

Now let us work on tension and relaxation contrasts. Try to sense every muscle in your body. Every muscle: clench your fists; tighten your eyes, your jaw, your shoulder muscles, arms, chest, back, stomach, legs; every part just clenching 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. (10-second pause.)

Once again tense all of your muscles. (5-second pause.) And now, let go of that tension and relax. Feel the wave of relaxation start with your face and move its way down through your shoulders, arms, hands, chest, back, legs — right down to your toes — a definite wave of relaxation spreading through your body. Just relax and enjoy the calm, peaceful feeling. (10 second pause.)

Now, let’s get back to the breathing. Take in a 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 your breath out and feel the deepening relaxation— just go with it, fully relaxing now. Breathe normally and feel the relaxation flowing into your forehead and scalp. Think of each part as I call it out— just relaxing, letting go, easing up— your jaws, eyes, forehead. 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 fully.

Let the relaxation flow through your face. Relax your jaw and tongue so that your lips are slightly parted as the jaw muscles relax further and further. Let your throat and neck relax. (5-second pause.) Let the shoulders and upper back relax; feel the relaxation flowing into your arms to the very tips of your fingers. (5-second pause.) Feel the relaxation right down into your stomach area, into the abdominal muscles and across to your lower back. The relaxation becomes more and more obvious as you do nothing but
give way to the pleasant, serene feelings that fill you as you let go more and more. (5-second pause.)

Feel the wave of calm down your hips and buttocks, thigh and calf muscles—right down the tips of your toes. 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 I want you to 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. (1-minute pause.) Okay, just feel the 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. (5-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 feeling yourself calm and secure and very, very tranquil and serene.

**Now, I’d like you to imagine yourself in a pleasant scene**. Pick a pleasant, tranquil scene for yourself. At the seashore; lazily boating on a quiet lake; in the woods—pick any scene that is pleasant and tranquil for you. Get in touch with that scene as fully as possible. Let go of any tensions that may have set in anywhere in your body, and just imagine yourself calm and peaceful and serene in your imaginary pleasant scene. Just take your time feeling fully relaxed and peaceful in your pleasant scene. (Pause about 30-60 seconds.) Good.

**Now I am going to count backward 10 to 1**. At the count of 5, I would like you to open your eyes, and then by the time I reach 1, just kind of stretch and yawn and sit up. Okay, now counting backward: 10, 9, 8, 7, 6, 5, open your eyes, 4, 3, 2, 1. Now, just stretch and yawn and then, slowly sit up.
Optional Components: Session 1

1. Bodily Reactions to Stress.
2. De-Stressing Skills.

Option 1: Bodily Reactions to Stress

Brain and neuroendocrine systems translate psychological/physical stress into a physiological response primarily through the involuntary or autonomic nervous system. The hypothalamus, in the midbrain, controls both.

Voluntary nervous system controls striated muscles concerned with posture and environment.

The autonomic nervous system (involuntary) controls smooth muscles concerned with gastrointestinal, vascular, and reproductive activities. When activated, it initiates a complex series of neurophysiological and biochemical changes in the body.

There are two parts of the autonomic nervous system: the sympathetic and the parasympathetic nervous system.

**Sympathetic Nervous System**

The sympathetic nervous system tenses and constricts involuntary muscles and activates the endocrine system:

1. “Fight or flight response” — innate reaction to stressful situations. Blood is shifted away from the periphery of the body and the gastrointestinal tract and is sent to the head and trunk.

2. Physical signs are: dilated pupils, tight throat, tense neck, back and shoulders, shallow respiration, locked diaphragm, rigid pelvis and tight anus, and contraction of the flexor muscles.

3. Language expressions are: “cold feet,” “chills up and down my spine,” “a knot in my stomach,” “clammy hand,” and “a racing heart.”

**Parasympathetic Nervous System**

The parasympathetic nervous system is responsible for the dilation of the body’s smooth muscles and the body’s general state of relaxation.
Language expressions usually reflect more pleasurable states: “warm-hearted,” “swollen with pride,” and “flushed with excitement.”

The two systems of the autonomic nervous system are not completely mutually inhibitory, but often work together to produce a particular state.

**Endocrine System**

The hypothalamus controls the pituitary gland, which in turn controls the endocrine system, including the thyroid, parathyroids, islet of Langerhan (pancreas), adrenals, and gonads.

The pituitary, the master gland, activates other glands, secretes vasopressin which contracts the walls of arteries, raising blood pressure, prepares the body to cope by temporarily increasing circulation, heart action, basal-metabolism rates, and other processes. The pituitary is most important to stress in the activation of the adrenals.

The thyroid, during stress, produces thyroxin, which greatly increases metabolism in tissues and makes the system more responsive to adrenaline. This causes a person to sweat, feel nervous and shaky; his heart beats faster, breathing becomes rapid and unusually deep, and he tires quickly. This is generally more important in prolonged stress and may cause chronic fatigue and even insomnia.

The adrenal glands produce adrenaline (epinephrine, norepinephrine) which is secreted into the bloodstream and affects many bodily systems, including blood sugar level, anti-inflammatory reactions, immune responses, body temperature, oxygen consumption, heart rate, blood supply to the heart and skeletal muscles, respiratory rate, etc.

The innate “fight or flight response” is designed to help the organism to deal with impending danger or threat and return the body to a normal state of homeostasis (balance). For humans, psychological stress generates the same neurophysiological response as actual physical danger. Stress becomes destructive when it is prolonged; the individual cannot fight or flee, and the body’s ability to adapt and return to homeostasis is exceeded.

Prolonged, unabated stress seems to be primarily responsible for stress-related disorders or modern man which have far surpassed infectious disease as the major medical problem of post-industrial nations.
Option 2: De-Stressing Skills

1. Physical Exercise.

Regular, vigorous exercise can be a major component in controlling stress. Emphasize the importance of *non-competitive* attitudes with oneself or with others.

2. Progressive Relaxation.

Developed by Dr. E. Jacobson, M.D., a physiologist.

Designed to increase awareness of tension in voluntary skeletal muscles and increase control over these muscles so that an individual can induce very low levels of tension.

Reduction in muscular tension causes decreases in other physiological processes related to tension or stress.

3. Autogenic Training.

Developed by Dr. H. H. Schultz, a German neurologist.

A series of mental exercises which teach one how to develop a state of intense relaxation by focusing attention on bodily sensation, temperature of the extremities, breathing, etc.


Many bodily processes under control of the autonomic (involuntary) nervous system have been found to be subject to voluntary influence or control when information about these processes is electronically monitored and sent back to the individual via some channel of communication, usually visual or auditory. (Blood pressure, heart rate, blood flow to certain parts of the body, brain wave patterns, etc., have been altered through biofeedback.)

Biofeedback is very effective, but has limitations:

1) It usually monitors only one system at a time, and

2) it requires equipment which is expensive and not always available.

Other less costly and more readily available techniques will accomplish the same results, and more in many cases.
5. Meditation.

Meditation has gained tremendous popularity in recent years primarily through the works of Maharishi Mahesh Yogi, who founded the Transcendental Meditation movement (TM). Meditation is one of the earliest known practices of mankind and has been associated with most of the world’s cultures and religions (including early Christianity).

In recent centuries, it has been primarily associated with Eastern religions and philosophies (Yoga, Zen, Sufism, etc.) and thus has not been readily available to Westerners. Initially through TM and more recently through the work of Herbert Benson at Harvard (The Relaxation Response), we have come to realize that the benefits of the meditative state can be realized without acceptance of religious beliefs or practices.

(Note to leaders: this explanation of meditation has been enlarged upon in recent years, as the benefits of yoga have become more widely understood and accepted. Leaders might want to consult new information prior to presenting an explanation of yoga. — Editor)
Session 2: Negative Self-Talk & Worry Lead to Stress

*Note: Handouts or forms are in italics.*

Review today’s agenda with the group before beginning. Emphasize the idea that in today’s session we will try to show how the stress events and symptoms recorded in the *Stress Journal* by the group are related, in some cases, to irrational beliefs and negative self-talk.

<table>
<thead>
<tr>
<th>Timing</th>
<th>Overview of Agenda</th>
</tr>
</thead>
<tbody>
<tr>
<td>5 minutes</td>
<td>1. Discuss homework. Review <em>Stress Journal</em> and share personal examples.</td>
</tr>
<tr>
<td>10-15 minutes</td>
<td>2. Introduce and discuss <em>Beliefs that Lead to Anxiety and Worry.</em></td>
</tr>
<tr>
<td>20 minutes</td>
<td>3. Discuss how worry and negative self-talk are related to stress. Introduce and discuss <em>How to Deal with Worry.</em> Introduce “worry exercise” and discuss it.</td>
</tr>
<tr>
<td>20 minutes</td>
<td>4. Discuss the relationship between a person’s perception and beliefs and the feelings of anger, anxiety, and depression.</td>
</tr>
<tr>
<td>15 minutes</td>
<td>5. Have the group review their stress symptoms from the Stress Journals and go through a relaxation sequence.</td>
</tr>
<tr>
<td></td>
<td>6. Homework:</td>
</tr>
<tr>
<td></td>
<td>(1) Practice relaxation.</td>
</tr>
<tr>
<td></td>
<td>(2) Introduce <em>Revised Stress Journal.</em></td>
</tr>
</tbody>
</table>

*Note:* The above time allocation allows for a 10-minute buffer within the 2-hour session.

**Optional Component:** Personality Factors in Stress.
Part 1: Homework Review (5 min.)

Review Homework from Stress Journal

Ask the group to take a moment to look over the stress events and stress symptoms recorded in their Stress Journals over the previous week.

Was the task easy? Hard? Have the group members share their methods for recording the data. Did they carry the Journal around with them? Did some wait until one point in the day to make entries?

Next, have the group share some of the events and symptoms recorded in the Journals. What were the similarities? Differences? Did patterns emerge for some group members on certain days or across certain days of the week?

Emphasize the point that learning the “how, when, and where” aspects of our stress can allow us to anticipate and prevent the stress response from reaching overwhelming proportions.

Note: Anticipate some mild increase in anxiety in some group members as a result of this exercise. You are asking the group to focus on their stress before they have learned to adequately manage it. This may account for some resistance to the homework assignment by some group members. Leaders should provide encouragement and support to the group as a whole and not “process” individual resistance. There will be other opportunities in subsequent sessions for members to become more aware of their own stress picture and hopefully more comfortable with the task of doing so.
Part 2: Beliefs that Lead to Anxiety (10-15 min.)

**Note:** Be sure to have enough copies of *Beliefs that Lead to Anxiety and Worry*.

Leaders should take a few minutes to discuss how certain irrational beliefs or “myths of living” generate and maintain anxiety and worry. These irrational ideas and beliefs are “myths” because they are never borne out of reality. For example:

| “I’m a lousy student and will never get through school.” | People who think this may often do well and graduate in spite of this belief. |
| “I’m incompetent and will never get a job.” | People who say this usually have held successful jobs and will do so again in spite of this belief. |

The point in the examples is that people do achieve and succeed even though they believe they don’t or will not. These negative or irrational beliefs cost them a great deal in wasted creative energy. These beliefs act as a lid or cap on potential untapped resources and energy.

Can the group come up with examples?

Go over the handout and show how a person can provide rational counter-arguments to challenge these negative irrational beliefs.

Take a few minutes to do the exercise on the last page of the handout. Have the group share their irrational beliefs and how they might change them into a more calming or rational idea or statement.
Part 3: Worry and Negative Self-Talk (20 min.)

Note: Be sure to have copies of *How to Deal with Worry*.

Explain to the group how beliefs and ideas are supported and maintained by a quiet little voice in our heads (sub-vocal speech) with which we give ourselves constant and ongoing evaluative messages…. If the beliefs and ideas are irrational or negative, then the internal messages or self-talk will be negative. This negative obsessive thinking and self-talk is commonly known as “worry.”

For example:

a. **Belief:** “I’m incompetent in all things,” *leads to*

b. **Self-talk:** “I’ll never get this paper done,” “She/he will never go out with me,” “I look terrible,” etc. *leads to*

c. **Worry:** The self-talk supports the belief and the belief *encourages* more elaborate obsessive negative self-talk — the result — the worry cycle.

Worry can be insidious and addicting in two ways:

1. People worry and obsess over a task with much hand wringing and anxiety until it is completed. They then attribute the completion of the task to the necessary amount of worry rather than to their own skill, intelligence, creativity, etc. Therefore, one must worry to succeed.

2. People operate from a belief that they will fail. They spend an excessive amount of time obsessing in negative self-talk. This takes their attention away from the task and they do indeed fail.

This data is used to support the original idea or belief that they are failures. Therefore, they can turn around and say “I’m a failure and I’ve got (and will continue to get) data to prove it.”

Go over the *How to Deal with Worry* handout and show how people can get stuck in the failure cycle on the right side of the flow chart.

Have the group break up into dyads and discuss how they use negative self-talk and worry. The group should reconvene after about 3-4 minutes and have the group members share examples.
Part 4: Emotions and Beliefs (20 min.)

Evaluations derive from acts of understanding and acts of perception and appraisal. Our decision to “take flight” or to “fight” is determined by our perception and interpretation of a situation.

Discuss the following information on anger, anxiety, and depression:

**Anger is usually a response to one or more of the following perceptions:**
1. Infringement, or the invasion of personal or psychological space;
2. Frustration, with barriers, to getting what we want; or
3. Wrongfulness and intentionality, injustice or inequity.

**Ways of “being-in-the-world” that lead to anger:**
1. Extensive personal boundaries, or ego on the line;
2. Competitiveness, whereby only victory will bring happiness;
3. Moralistic thinking, with a long list of “shoulds” and “should nots.”

We need to question intentionality, purpose, or motivation of the people or groups.

Are we the personal object of scorn and provocation? Rarely! If so, we need to discover ways to stop it.

**Anxiety. There are four main dimensions of anxious functioning:**
1. Self-talk, i.e. sub-vocal speech about how one interprets stressful situations in living;
2. Direction of attention, the focus on self and not on the task or event;
3. Response to bodily signs of tension, used to reduce or escalate stress and are treated as “cues.” We scare ourselves with these signs.
4. Basic beliefs and assumptions; do they reflect over-evaluative/critical thinking or calm, rational thinking? — cruel inner critic, perfectionists, etc.
**Depression.** The four main dimensions of anxious functioning apply here as well except that the emotional response may be more chronic and more vague and global in the way it is perceived by the individual.

Depression is often tied to feelings of helplessness and lack of adequate impact or control of the environment. Beliefs and self-talk often reflect these feeling states, e.g., “I am no good,” “I am a lousy person,” “It is not possible to change things in my life because of who I am,” “Everything is crashing down around me and I can’t do anything about it,” etc.

As you can surmise, there is a great deal of frustration and anger imbedded in feeling depressed.

Conclude this discussion by stressing the point that these negative feelings are a product of our perceptions and beliefs about ourselves and the world. We can change how we feel by altering these beliefs and perceptions and establishing a more rational frame of reference.
Part 5: Relaxation Training (15 min.)

Have the group review their symptoms on the Stress Journal and lead a discussion for a couple of minutes. What did the participants learn about their personal bodily signs of stress?

Once again, lower the lights, have people stretch out on the floor, and go through the relaxation training using the instructions from Session 1.

Debrief with the group after the experience to find out if people are finding it easier to go through the relaxation steps. Again, point out resources for continued practice at home, if available.

Part 6: Homework (10 min.)

Note: Have copies of the Stress Journal available.

Ask the group to practice relaxation training at home.

Hand out and discuss briefly the Stress Journal form.

Explain that the task this week is for people to record the stress event and the self-talk they find themselves using at the time.

Tell the participants “We will go over the journal at the beginning of the next session. Be sure to bring your journals with you.”
Beliefs that Lead to Anxiety and Stress

How it works: Often, prolonged anxiety is the result of an unrealistic or irrational way of thinking about a particular situation. Dr. Albert Ellis has identified some of what he has found to be the most common irrational attitudes or beliefs which our culture supports and which cause much unnecessary emotional turmoil for many of us. Listed below are several examples of irrational beliefs and rational counter-arguments.

1) I must be loved or approved of by everyone for virtually everything I do. Or, if not by everyone, by persons I deem significant to me.

   vs.

While it is desirable to be approved of and accepted by others, it is not an absolute necessity. My life doesn’t really depend upon such acceptance, nor can I really control the minds and behavior of another person. Furthermore, a lack of total acceptance is certainly not catastrophic or horrible and doesn’t at all mean that I am worthless or a louse.

2) In order to have a feeling of worth, I should and must be thoroughly competent, adequate, intelligent, and achieving in all possible aspects.

   vs.

Since I am a human being with biological, sociological, and psychological limitations, I cannot reasonably expect to be perfect in any endeavor. But I certainly can strive to perform well in those tasks I deem as significantly contributing to my self-development. In those areas in which I am deficient, I certainly can strive to improve. If I fail, though — too bad.

3) I don’t have much control over my emotions or thoughts.

   vs.

While most people are taught that external events are the direct cause of one’s unhappiness, in virtually most cases, human unhappiness is caused by one’s thoughts, appraisals, evaluations, or perceptions of those events. That is, I create my own disturbances. Since I am human, I can expect to disturb myself often, but that doesn’t mean that I have to continually disturb myself forever.

4) The idea that human unhappiness is externally caused and that people have little or no ability to control their sorrows or disturbances.

   vs.
Outside people and events can do nothing but harm you physically, at worst. All the emotion or mental “pain” they “cause” you is actually created by your taking criticism or rejection too seriously, by your falsely telling yourself that you cannot stand disapproval or cannot live without acceptance. Even physical injury that comes to you from without will often cause you relatively little anxiety if you philosophically accept the inconveniences of your injury and stop telling yourself, over and over again, “Oh how awful! Oh how terrible this is!” When faced with non-physical assaults from outside, then, you can first question the motives of your attackers and the truth of their statements. If you feel that attacks are justified, then you can try to change yourself to meet the criticisms. You can also learn to accept your own limitations and the inevitable displeasure of people you cannot please.

5) The idea that if something is, or may be, dangerous or fearsome one should be terribly concerned about it and should keep dwelling on the possibility of its occurrence.

vs.

Worrying about the possibility of something happening will not only not prevent it from happening in most cases, but will often contribute to bringing it about. Over-concern about getting into a car accident may actually make a person so nervous that he drives into another car or lamppost when, if he were calmer, he might have avoided getting into this sort of accident. If there is a possibility that something really is dangerous, there are only two intelligent approaches to take: (a) determine if this thing actually is dangerous to your well-being; and (b) if it is so, then either do something practical to eliminate the danger, or if absolutely nothing can be done, resign yourself to it. Worrying or constantly dwelling on the awful things that can happen will do absolutely no good.

Exercise

1. Irrational and anxiety-producing ideas or beliefs (in your own words):

2. Calming and rational alternative idea or belief:

3. Notes on how you would specifically think, behave, and feel differently if you replaced #1 with #2:
How to Deal with Worry

Desires, Wishes, Wants, Goals

Problems or Challenges

Stop & evaluate situation

Think of worst possible outcome

Notice how nervousness is rising

Relax

Worry, negative self-talk

Failure

Stop planning; prepare for the worst

Increased chance of failure

Decide on appropriate action

Carry out action

Evaluate results

Negative

Relax

Calmly re-evaluate

Decide on new action

Positive: Reinforce & Continue

Goal Reached

Addictive worry is
• Self-escalating
• Self-perpetuating

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Win the Basketball Game

Need to make a foul shot

I need to make a foul shot. What are my best techniques?

I’ll take a deep breath, a relaxed shot, and follow it.

Take shot.

Well, what happened?

Shot good. Great job! I’ll do the same next time.

Goal Reached: Success

I will miss it; team will hate me

Uh, oh. I’m beginning to tense up. Time to relax. After all I can only give it my best shot.

Relax

Failure: Miss shot

Heck! Too bad. It’s not the end of the world!

Is there anything else I can do? What should I do differently?

I’ve forgotten how to shoot! This shot will be terrible!

Hands shake; body tense; eyes blur

I’ll practice more. Or I’ll do something else to make up for it.
How to Deal with Worry Example: Do Well on Job

Do well on job.

Boss gets angry.

I wonder why he's upset. How can I avoid this next time?

I’ll do the job a new way.

Here’s a good place to start.

How does it work?

I could get fired!

I must do better. I’m a bad worker; I can never do anything right.

Dwell on the worst—what will happen? It’s just a matter of time now.


Here’s a good place to start.

I’ll slow down and take a deep breath. Okay. Now I’m getting relaxed. What is my next step?

Make stupid mistakes. Boss gets more angry.

It works well. The boss seems pleased. Good Job. I’m pleased with myself.

Boy, that really bugs me! I’m getting uptight again. Better relax.

Now I’m better, what should I do differently?

Maybe this will work

Goal Reached: Job Success
### Stress Journal

<table>
<thead>
<tr>
<th>Weekday</th>
<th>Stress Event</th>
<th>Stress Symptoms</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monday</td>
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<td>Tuesday</td>
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<td>Saturday</td>
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<tr>
<td>Sunday</td>
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</tbody>
</table>

**Comments and Notes:**
Optional Component: Personality Factors in Stress
(from Kenneth Pelletier: Mind as Healer, Mind as Slayer)

“Models of behavior admired in our society contribute to a high level of stress with their emphasis upon ambition, drive, extreme goal orientation, financial success, and the appearance of being constantly busy.”

“Evidence is accumulating that specific personality configurations may be associated with heart disease, cancer, arthritis, ulcerative colitis, asthma, migraine and other disorders generally designated as psychosomatic or stress-induced.”

Dealing with such problems whether in ourselves or others requires rethinking the classical mind/body dichotomy which has existed in Western thought and medical practice since the Middle Ages.

“Two polarities have existed: (1) one views disease and health maintenance to be based strictly on physical considerations; (2) one maintains that all physical illness is the result of some sort of psychological shortcoming. Both maintain the mind/body dichotomy.

The emerging holistic approach to health and disease is based on the assumption that the prevention of pathology must be based on recognition of the inextricable interaction between the person and the psychological environment. Mind and body function as an integrated unit — health exists when they are in harmony and illness results when stress and conflict disrupt this process.

“Psychosomatic” in a holistic sense does not mean “imaginary” as in traditional medicine, but rather is used to convey the concept that there is a fundamental interaction between mind and body involved in all diseases.

Likewise, the term “placebo” has come to connote any aspect of the healing process which cannot be attributed to a physical or pharmacological effect and the negative or pejorative connotations of the term interfere with full realization of the subtle and complex factors which enhance healing. (This applies to ourselves as well as our patients.)

Early important work in this area was done by Friedman and Rosenman, Type A Behavior and Your Heart, 1974. They found high correlation between certain behavior patterns and coronary heart disease.

Type A Profile: Excessive competitive drive and a chronic sense of time urgency (“hurry sickness”) are the primary behavior patterns. Others include: fiercely impatient; easily aroused hostility; judge accomplishments (self-worth?) in terms of numbers (for
numbers’ sake); usually aggressive and extroverted; often try to do several things simultaneously.

**Type B Profile:** Usually free of frantic sense of time energy; can relax without guilt. Even if ambitious, strives towards well-thought-out goals. Doesn’t measure self against peers on the basis of numbers of achievements. Self-worth based on goals other than material or social success. Understands strengths and weaknesses and accepts deficiencies philosophically. Not compulsively competitive: More thoughtful. Less compulsive problem-solving. Lack of free-floating anxiety or hostility.

Friedman and Rosenthal have demonstrated different neurophysiological profiles for the two groups, e.g. serum cholesterol levels. *Type A behavior patterns* operate in addition to and in conjunction with the classical risk factors, i.e. smoking, exercise, blood pressure, family history, etc.

The results found are not correlated with success or level of achievement in career.
Session 3: The Importance of Values & Beliefs in Managing Stress

Agenda (Handouts or forms are underlined.)

Review today’s agenda with the group before beginning. Focus on today’s session will be showing how self-talk, beliefs, and values are related in the management of stress.

<table>
<thead>
<tr>
<th>Overview Agenda</th>
<th>Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>20 minutes</td>
<td>1. Discuss homework. Review Stress Journals and share personal examples.</td>
</tr>
<tr>
<td>25 minutes</td>
<td>2. Introduce and discuss handout on <em>Self Talk</em>. Introduce exercises and discuss.</td>
</tr>
<tr>
<td>40 minutes</td>
<td>3. Discuss the importance of values and beliefs in managing stress. Talk about the differences between values and beliefs. Introduce and discuss <em>Personal Values Clarification</em> exercises.</td>
</tr>
<tr>
<td>15 minutes</td>
<td>4. Have the group go through relaxation sequence.</td>
</tr>
<tr>
<td>10 minutes</td>
<td>5. Homework.</td>
</tr>
</tbody>
</table>

**Note:** The above time allocation allows for a five (5) minute buffer within the two-hour session.
Part 1: Review Homework from Stress Journal (20 min.)

Ask the group to take a moment to look over their responses on the Stress Journal during the previous week.

What kind of self-talk did participants engage in as they began to anticipate or experience a stressful event? Who was able to change the self-talk from negative to positive?

What were the physical symptoms like this week? Were group members able to use the relaxation training to control some of their stress response?

Ask the participants to share any problems or difficulties they experienced in working with the Journal.

Part 2: Coping and Positive Self-Talk (25 min.)

**Note:** Have copies of the Self-Talk handout available.

**Purpose:** After the group has had a week to practice recording and becoming aware of their own personal self-talk, it should be useful at this point to help them differentiate between negative, positive, and coping self-talk. This will increase their personal awareness even further and increase their ability to identify and alter negative self-talk.

Go over and discuss with the group the first three (3) pages of the Self-Talk handout. Ask if any of the group members identify their own style in the examples of negative self-talk?

Take time to cover the coping self-talk information very carefully. This is the “how to” section on changing self-talk.

Next, on a large pulp-paper pad or blackboard, write the following “Worry Cycle” model:
Point out and emphasize with the above model how negative self-talk supports and assists the “worry” cycle.

By going over the above model, you help the group members tie together previous information presented on emotions and beliefs.

After going over this model, review with the group the last page of the handout entitled “A Contract with Yourself.”

Have the group divide into dyads and fill out the contract. Each person in the dyad is to use the other person as a consultant in completing his or her personal contract to change a specific situation where he or she engages in negative self-talk. Take about 5–7 minutes to complete the contract. Have the group reconvene and ask for volunteers to share their contracts with the group.
Part 3: Values Clarification (40 min.)

Note: Have available copies of handout Personal Values Clarification

Go over and discuss the following material on values clarification. Emphasize the point that learning about our values can help us become clear about how and why we make certain choices and decisions. Really, why we do things--engage in certain activities--are attracted to some people and not to others. By developing this understanding of our values and therefore our own motivations we can make choices and decisions with less stress.

Make the point that our values are reflections of personal experience and commitments whereas deeply-rooted beliefs are often reflections of societal norms.

“The unexamined life is not worth living.”
Socrates

Meeting Yourself Halfway, by Sidney Simon, a good resource.

Values clarification is a process of getting to know oneself better by trying to find and make explicit the values which give one’s life meaning and direction.

What are values? The worth I place on something relative to the worth I place on other things. Basic values are those beliefs which are so intrinsic to the “essential you” that if they change, you change. And, in fact, they do change.

In order for something to truly be considered a value it must go through the following process or meet the following criteria:

1. Prizing and cherishing — what do we really hold dear?
2. Choosing from alternatives — choice must be possible.
3. Choosing after consideration of consequences — must be a thoughtful consideration of the range of alternatives and their consequences.
4. Choosing freely — freedom from coercion.
5. Publicly affirming — a true value is something we are willing to publicly disclose and perhaps even champion. Affirmation in itself is clarifying and maturing.
6. Acting — the way we budget our time, energy, actions, money is a major part of the valuing process.
7. Consistency of action — a value is demonstrated across different aspects of our lives and across time and tends to give one a sense of personal congruence.

8. Permanence and growth — values can be seen as an immutable part of our basic nature but perhaps more beneficially, as part of a continuing process of personal growth and subject to revision over time.

Note: Values differ from basic beliefs in that often even our most deeply or rigidly held beliefs are representatives or reflections of societal values which we were taught but do not meet the above criteria (free choice, consideration of alternatives, etc.)

Values Indicators indicate the presence of values but differ from values. Areas to be examined in discovering our own and others’ values:

1. Goals or purposes — stated purposes may or may not reflect true values.
2. Aspirations — what do we strive to accomplish.
3. Attitudes — may only reflect group opinion, social expectation, etc.
4. Interests — may be superficial or deep.
5. Feelings.
6. Beliefs and convictions — prized? cherished? freely chosen?
7. Activities — actions speak louder than words, but we engage in many actions which are not prized, cherished, or freely chosen.
8. Worries, problems, obstacles.

Professional Values Clarification Exercises:

1. List the most important procedures you do in your office (at least 5).
2. List the most frequently done procedures in your office.
3. List the most enjoyable procedures to do.
4. List the most profitable procedures to do.
5. List the most satisfying procedures to do.
   What similarities and differences exist? Are these sources of stress?
6. What would you most like to start doing in your office?
7. What would you most like to stop doing?
   What’s preventing these changes? Is this a source of stress?
**Reflections.** (Suggest, but do not do in workshop.) To be done weekly, personal or professional. Divide sheet of paper into four sections:

1. High points — moments that give you the greatest pleasure.
2. Positive people - those who are in agreement, supportive, stimulating. (Helps distinguish between “nourishing” and “toxic” people).
3. Future focus — what plans for the future were made this week.
4. If only… — how could you have changed your week to make it better.

**Personal Values Clarification Exercise**

After going over and discussing material on values, hand out the exercise sheet, **Personal Values Clarification.** Briefly explain the three exercises. At this point the leaders can proceed with one of two options:

1. Have each member of the group pick one of the exercises, take 10–15 minutes to complete, reconvene, and have a group discussion.

2. Split the group into two, if possible three, subgroups of four or five members each. Assign each group one of the exercises and have the subgroups divide up the questions in their exercise. Take 10–15 minutes to complete, reconvene, and have each subgroup report their responses to the exercise.

Conclude the exercise by suggesting that group members work on the “Reflections” exercise at home.
Part 4: Relaxation Training (15. Min)

Have the group review their responses on the Stress Journal. What kind of symptoms do they continue to experience? Where do they tend to hold tension in their bodies?

Once again, lower the lights, have people stretch out on the floor, and go through the relaxation sequence using instructions from Session 1.

Debrief the group after the experience and find out if people are finding it easier to do. Are they able to use relaxation outside the group to control bodily tension?

Conclude by pointing out the importance of continued practice.

Part 5: Homework (10 min.)

Note: Have copies of the Stress Journal available.

Ask the group to practice relaxation training at home.

Hand out and discuss briefly the above form.

The task this week is expanded to include the recording of the specific belief related to the self-talk and stress event. This task, clearly, is more involved and will take more thought and time.

Find out if any group members are having difficulty completing the Stress Journal. Have group members share briefly their different systems or strategies for recording information in the journal.
Self-Talk
Positive Self Talk

Sports (Bowling)

“Well, the pressure is really on now, since I need this spare for us to win the game. But there’s no sense thinking about that now, so I’ll just relax for a few seconds…. Now, what kind of shot do I need to make? Oh yes, I’ve made that one many times before. That means I should start my approach form over here…. in the past on this shot I’ve had trouble keeping my head down and keeping my backswing straight…. I’ll be sure to do that right this time. OK, I’m ready to give it my best shot. After all, that’s all I can do anyhow.”

Taking a Test (School, Licensing Examination, Job Qualification Test)

“So I’m gonna be taking this important test, huh. I need to do well, but I’ll worry about that later. Besides, real catastrophes rarely happen anyhow. Now, what do I need to do here? If I just relax I’m sure the answers will begin to flow smoothly.”

Being Observed or Supervised on the Job

“Well, so today I’m going to be watched pretty closely. That makes me a little nervous, but I won’t dwell on it. Instead I’ll just concentrate on what I need to do. After all it isn’t like I’ve never done this stuff before…. I can easily do this stuff when I keep focused on the task…. OK, so what’s my first step?”

Uncomfortable Social Situations

“Boy, do I hate these situations. I’m beginning to get tense already…. that’s my clue to relax and focus on what I need to do…. There certainly isn’t any point in panicking since these things always seem to work out OK anyhow.”

General

“Don’t get anxious….just take off a moment and take a couple of slow, deep breaths…. calm…. and relax…. good.”

“Well, there’s lots to do…. but don’t worry about that. Just take one step at a time, no rush…. it will feel good when it’s over.”

“Slow down a little, don’t rush and get in a panic, there’s enough time, hurrying only seems to make things worse.”
Negative Self-Talk

Sports (Bowling)

“I really need to get this spare for our team to win. But, hell, I’ve been bowling such a lousy game, my timing is off, and I’ve been getting terrible breaks. The guys will never forgive me if I choke here. If I’d only made that last spare I wouldn’t need this one. I really got robbed this time, it could easily have been a strike. I’ll probably never make this one.”

Taking a Test (School, Licensing Examination, Job Qualification Test)

“It sure is important that I do well on this test to pass the course. Oh God, what if I don’t. I’ll flunk out! What will I ever do then? I don’t have any skills. It’ll really be curtains then.”

“I have to pass this exam. If I don’t I’ll be stuck in the same job for years. And who knows, I may not even be able to support my family. But this thing seems so damn hard. Maybe I really don’t know my stuff. God, am I stupid. This is really useless.”

Being Observed or Supervised on the Job

“Oh, no, today’s the day for them to be watching me. Hell, I’d better do well. Oh, oh, they seem to be displeased. I’ll bet they’re giving me terrible marks. Damn! I just made a mistake. That really does it. My hands are shaking real bad now. I wish they’d leave before I completely fall apart.”

Uncomfortable Situations

“Boy, do I hate these deals. I never know what to say. Surely I’m gonna say something stupid. Why do I have to mess with this kind of foolishness. I can’t wait for it to be over. Oh, no, now I’m starting to get real tense…. my palms are sweating, my heart is beating so fast I can’t stand it. I’m sure everyone in the room notices this. I’ve gotta get outta here quick before something horrible happens!”
Coping Self-Talk

Preparing For or Anticipating Stress

- What is it I have to do? Focus on dealing with it.
- Just take one step at a time.
- Just think about what you can do about it. That’s better than getting anxious.
- No negative or panicky self-statements; just think rationally.
- Don’t worry; worry doesn’t help anything.

Confronting and Handling Stress

- Don’t think about fear; just think about what you have to do.
- Stay relevant.
- Relax; you’re in control. Take a slow, deep breath. Ah, good.
- You should expect some anxiety; it’s a reminder not to panic and to relax and cope steadily with the situation.
- Tenseness can be an ally, a friend; it’s a cue to cope.

Coping with the Feeling of Being Overwhelmed

- When the fear comes, just pause.
- Keep the focus on the present; what is it you have to do?
- You should expect your fear to rise some.
- Don’t try to eliminate fear totally; just keep it manageable.
- You can convince yourself to do it. You can reason your fear away.
- It’s not the worst thing that can happen.
- Do something that will prevent you from thinking about fear.
- Describe what is around you. That way you won’t think about worrying.

Reinforcing Self-Statements

- It worked! You did it!
- It wasn’t as bad as you expected.
- You made more out of the fear than it was worth.
- You’re getting better. You’re learning to cope smoothly.
- You can be pleased with your progress.
- You like how you handled it. You can be proud of it.
**A Contract with Yourself**

In order to develop greater skill in living with anxiety, I will pause when

W _______________________________________
H _______________________________________
O _______________________________________
A _______________________________________

guide my thinking with self-sentences such as ____________________________

T _______________________________________
H _______________________________________
I _______________________________________
N _______________________________________
K _______________________________________

____________________________________________________________;

carry out the following steps:

<table>
<thead>
<tr>
<th>S</th>
<th>W</th>
<th>I</th>
<th>T</th>
<th>C</th>
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And reward myself for having switched by ________________________________

S _______________________________________
T _______________________________________
O _______________________________________
K _______________________________________
E _______________________________________

Signed __________________________________________

Date ____________________ ____________________


**Personal Values Clarification**

**Ten Things You Like to Do — Make a list.**

a. Try to write the date you last did each. How many in the last day? Week? Month? Year?

b. What’s stopping you from doing it more often?

c. What’s really important, what you say or what you do?

d. How do you really spend your life? How do you want to spend it?

**Six Months to Live.**

a. What would you do with six months to live and good health?

b. What would you start doing? With whom?

c. What would you quit doing? Why?

d. What’s stopping you now? Really?

e. Are you preparing for life rather than living life?

**How Would Life be Different If:**

a. You received a tax-free gift of a million dollars?

b. Your appearance could be magically transformed in any way?

c. You had the powers of Superman?

d. You became President of the U.S.? A famous star?

**Epitaph.**

a. Write in one sentence how you would want your life summarized. To be remembered. Your contribution.

b. What is your life all about? Is that what you want?

c. What is the impact of your life? And on whom?
### Stress Journal

<table>
<thead>
<tr>
<th>Day</th>
<th>Stress Event</th>
<th>Self-Talk</th>
<th>Belief</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monday</td>
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<td>Sunday</td>
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**Notes and Comments:**
Session 4: Developing an Action Plan for Managing Stress

Agenda (Handouts or forms are in italics.)

Review today’s agenda with the group before beginning. Focus of today’s session will be on utilization of resources, both clinical and non-clinical, in developing an Action Plan to manage personal stress events. (5 minutes)

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
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<tbody>
<tr>
<td>15 minutes</td>
<td>1. Discuss homework. Review the Stress Journal and share personal examples.</td>
</tr>
<tr>
<td>15 minutes</td>
<td>2. Review clinical strategies or “tools” for use in managing stress.</td>
</tr>
<tr>
<td>20 minutes</td>
<td>3. Non-clinical ways of managing stress, e.g. improving the “quality of life.” Planning for Effective Stress Management.</td>
</tr>
<tr>
<td>15 minutes</td>
<td>5. Have group go through a relaxation sequence.</td>
</tr>
</tbody>
</table>

Note: The above time allocation allows for a five (5) minute buffer within the two-hour session.
Part 1: Review Homework (15 min.)

Ask the group members to take a moment to look over their responses on the Stress Journal.

Were participants able to identify beliefs related to the negative self-talk? Were they able to “arrest” the development of the negative self-talk and change it to positive self-talk?

Were group members able to notice how the emotions of rage and anxiety were tied to negative self-talk?

Emphasize the point that we can use feelings as an “early warning signal” that we are about to or already experiencing stress and need to pause and examine the reasons behind our feelings.
Part 2: Using Clinical Tools (15 min.)

Remind the group that the stress management skills they have been learning are “generic” or general skills that are situation or problem independent, in that they can be utilized whenever or wherever stress is experienced.

However, many people have specific skill deficits or lack certain information that may require the acquisition of additional “clinical” experience to go with the more general stress management skills they have acquired. This may mean going back and getting more in-depth training in some of the skills developed in the stress management program, such as relaxation, monitoring self-talk, etc.

For students, it may also mean accessing some agency or institution such as a Counseling Center, a Study Skills Laboratory, Career Center, or Student Mental Health Clinic, and negotiating with a counselor for the clinical experience they think they need.

Take a moment to review the different clinical tasks that some group members might wish to acquire to complement the stress management skills they now have.

The leaders should begin to generate a list of clinical experiences on a blackboard or large pulp-paper pad. Ask the group to volunteer suggestions. The list need not be exhaustive. You are simply trying to convey or instill an attitude of inquiry about these clinical experiences. A beginning list might include the following:

1. Individual therapy.
2. Group therapy.
3. Other structured groups, e.g., assertiveness, self-esteem, etc.
4. Learning career development skills.
5. Learning how to budget time.
6. Others.

Have the group active involved in generating the list. Try to get them to volunteer the kinds of experiences they personally think they need.
Part 3: Improving the Quality of Life (20 min.)

Note: Have copies of Planning for Effective Stress Management available.

Point out to the group that in addition to clinical tools, there are some very important “non-clinical” things people can do to improve the quality of their lives and thereby cope with stress more effectively. These experiences are in the nature of self-validation, self-confirming experiences, which reflect the uniqueness of the individual person’s personality and potential. To put it another way, these may be “statements of personal value” for the individual that reflect taste, sensitivity, philosophy, etc.

Leaders should begin to generate a list of these possible experiences with active help from the group. Some of the items go begin the list might be:

1. Aesthetics: painting, sculpting, pottery, taking a course in art appreciation, going to museums;
2. Spiritual: reading in philosophy, TM, joining a study group;
3. Outdoor experience: backpacking, camping, bird watching;
4. Diet/exercise: lose/gain weight, begin jogging, join the Y;
5. Travel;
6. Change your appearance: new clothes, hair, etc;
7. Physical examination: get medical care you have been postponing;
8. Others.

Point out that these experiences while they may not be strategies to manage a specific stressful event will help to “inoculate” a person against the frequency and intensity of stress in general.


Go over the handout and show how effective stress management is or can be enhanced by a combination of clinical and non-clinical experiences.
Part 4: Developing an Action Plan (25 min.)

Note: Have copies of Action Planning Form available.

Hand out the Action Planning Form and explain different parts. It should be fairly self-explanatory.

The purpose of this form is to allow the group members to:

1. Identify the most chronic and/or potentially harmful stress events;
2. Identify the possible source of the stress;
3. Write for themselves a “prescription” of skills for managing this stress more effectively in the future.

Before asking the group to complete the form ask them how to review three Stress Journals to help them identify critical stress events.

Give the group 10-15 minutes to complete the form. Ask for volunteers who wish to share their action plans with the group.
Part 5: Relaxation Training (15 min.)
Take the group through a final relaxation sequence. Any members who continue to have difficulty with relaxation might wish to include more training in this area in their Action Plans.

Once again, lower the lights, have people stretch out on the floor, and one leader read the relaxation instructions from Session 1.

Part 6: Group Evaluation (20 min.)

Note: Have copies of Program Evaluation Form available.

Hand out evaluation forms and have group members complete and turn in to leaders as they leave.

Group leaders and program developers should use data from evaluations to modify the program to make it more responsive to participants’ needs.
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, idiosyncrasies.
      2. Congruence/assertiveness.
   E. Personal planning.
      1. Time management.
      2. Positive life choices.

II. Creation and use of support systems.

III. Altering stressful organization norms, policies, and procedures.

Characteristics of effective stress managers:
1. Self-knowledge — strength, skills, liabilities.
2. Varied interests — many sources of satisfaction.
4. Acknowledgements and acceptance of individual differences.
5. Being active and productive.
Action Planning Form

I. Review of events.
   A. Stress event _____________________________

      Check one:
      _____ 1. Conflict with self.
      _____ 2) Conflict with others.
      _____ 3) Lack of information about self.
      _____ 4) Lack of skill.
      _____ 5) Lack of information about the environment.

      Clinical and/or non-clinical tools. Be as specific as possible.
      a. _____________________________________________________________
      b. _____________________________________________________________
      c. _____________________________________________________________
      d. _____________________________________________________________

   B. Stress event _____________________________

      Check one:
      _____ 1. Conflict with self.
      _____ 2) Conflict with others.
      _____ 3) Lack of information about self.
      _____ 4) Lack of skill.
      _____ 5) Lack of information about the environment.

      Clinical and/or non-clinical tools. Be as specific as possible.
      a. _____________________________________________________________
      b. _____________________________________________________________
      c. _____________________________________________________________
      d. _____________________________________________________________

      continued
C. Stress event ______________________________________________________

____________________________________________________________________

Check one:

_____ 1. Conflict with self.

_____ 2) Conflict with others.

_____ 3) Lack of information about self.

_____ 4) Lack of skill.

_____ 5) Lack of information about the environment.

Clinical and/or non-clinical tools. Be as specific as possible.

a. ________________________________________________________________

b. ________________________________________________________________

c. ________________________________________________________________

d. ________________________________________________________________

D. Stress event ______________________________________________________

____________________________________________________________________

Check one:

_____ 1. Conflict with self.

_____ 2) Conflict with others.

_____ 3) Lack of information about self.

_____ 4) Lack of skill.

_____ 5) Lack of information about the environment.

Clinical and/or non-clinical tools. Be as specific as possible.

a. ________________________________________________________________

b. ________________________________________________________________

c. ________________________________________________________________

d. ________________________________________________________________

II. Action plan. List of tools.

1. ___________________________________________________________________

2. ___________________________________________________________________

3. ___________________________________________________________________

4. ___________________________________________________________________

5. ___________________________________________________________________
Program Evaluation
Program Title: ______________________

Name of Leader(s): _____________________________________

Date Workshop Began: _____________
Today’s Date: _____________________

In order that we might know what has been helpful and useful in this group program, your candid answers to the following items are most valuable and appreciated:

1. How would you rate the overall program in terms of its success in meeting your original goals?
   ______ very successful
   ______ moderately successful
   ______ of little help
   ______ a waste of time

2. What parts of the program were *most* helpful and why?
   _________________________________________________________
   _________________________________________________________
   _________________________________________________________

3. What parts of the program were *least* helpful and why?
   _________________________________________________________
   _________________________________________________________
   _________________________________________________________

4. Would you comment briefly on each session and its particular high and/or low points?
   Session I: _______________________________________________
   _________________________________________________________
   _________________________________________________________

   Session II: ______________________________________________
   _________________________________________________________
   _________________________________________________________

   Session III: ______________________________________________
   _________________________________________________________
   _________________________________________________________

   Session IV: ______________________________________________
   _________________________________________________________
   _________________________________________________________

   Session V: ______________________________________________
   _________________________________________________________
   _________________________________________________________
5. What specific changes would you recommend be made in this program? Add any other comments.

_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________

6. Please respond on a 1–5 scale (with 5 being the highest) to the following:

1 = strongly disagree   3 = not sure/no opinion   5 = strongly agree
2 = disagree            4 = agree

a) The program was well geared to my needs.  _____
b) The leader(s) was/were knowledgeable of the subject.  _____
c) The leader(s) was/were capable of transmitting clearly the content and meaning of the program.  _____
d) The leader(s) set a tone for comfortable group interaction and a climate conducive to learning.  _____
e) Time was well utilized and activities were meaningful.  _____