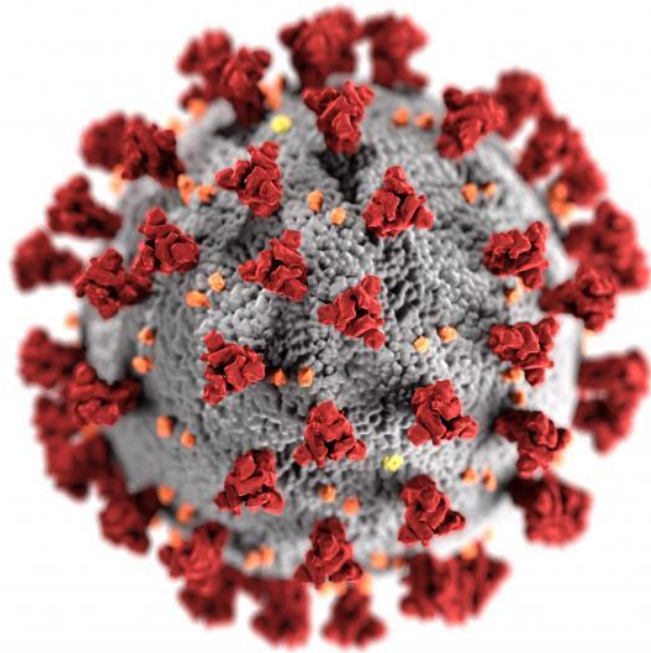


Version – 22nd May

COVID 19 STEP 3 BRIEF COPING INTERVENTION



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Contents

PREPERATION.....	4-7
INTRODUCTION AND RATIONALE	4
SOME ISSUES TO HOLD IN MIND	5
SESSION STRUCTURE.....	5
THE JOURNEY THROUGH ICOPE	6
CARE PATHWAY FLOW DIAGRAM	7
SESSION OUTLINE – A GUIDE FOR CLINICIANS	8-10
CONTACT 1	
ESTABLISHING A FOCUS	8-9
IDENTIFYING AND NAMING A PROBLEM	9
DEVELOPING AN ACTION PLAN.....	10
CONTACT 2	
REVIEW	10
CONTACT 3	
FOLLOW UP	10
REFERENCES	11
APPENDICES	12-44
A- PROTOCOL SUMMARY OF CONTACT 1	12
B- MENU OF RESOURCES.....	13-14
C- ADAPTED BA	15-19
D- COPING STRATEGIES	20
E- REDUCING STRESS RESPONSES	21
F- LIVING WITH WORRY AND ANXIETY.....	22-26
G- ATTENTION TRAINING	27-28
H- MANAGING INTENSE EMOTIONS: DISTRESS TOLERANCE SKILLS	29-34
I- FACE COVID: HOW TO RESPOND EFFECTIVELY TO THE CORONA CRISIS	35-38
J- HAVING CONVERSATIONS WITH THE NEWLY BEREAVED	39-40
K- MANAGING RELATIONSHIPS DURING COVID-19.....	41-44

COVID19 Step 3 Brief Coping Intervention

Introduction and Rationale

What is it?

This protocol is intended for use at Step 3 (high intensity) during the COVID19 pandemic. It is a three-session intervention based on psychological first aid principles, using standard CBT while also including techniques from DBT and ACT where applicable. It is an intervention that seeks to enhance resilience and foster coping through promoting adaptive functioning.

Through helping people mobilise their inner resources, draw on and strengthen their existing support networks it is hoped that they will feel more equipped to cope with their current situation. In this respect it is stabilisation work. The main protocol uses key problem-solving techniques which will be familiar to step 3 clinicians in IAPT services. Where appropriate, clinicians can draw on additional materials via the Appendices section which contains a menu of resources (including handouts drawing from CBT, DBT and ACT interventions; techniques that may assist with specific problems; and relevant signposting). The aim is to provide a Step 3 intervention in a timely manner. While the primary emphasis is not recovery-focused work per se, we would hope it leads to beneficial outcomes and in some cases prevents further difficulty.

Who it is for?

This is an intervention for individuals experiencing significant psychological distress who are struggling to cope and function on a daily basis because they have been impacted by COVID 19. Specifically, it is for frontline NHS and Social Care workers seeking help from iCope, those who have experienced significant difficulties directly associated with having had COVID 19 themselves or their loved ones experiencing it, or have had significant loss or bereavement associated with COVID 19.

A key indicator to bear in mind when determining suitability is the intention to support individuals who are not coping and where COVID 19 (and its fallout) has directly impacted on their ability to function. While people with long term health conditions (LTCs) may benefit from this intervention, the protocol was not designed to address the specific needs of individuals who are deemed high risk during COVID19; rather the focus of the work is on significant psychological distress and for those individuals who are not coping in the current context.

It is intended for use with individuals who are actively seeking help for their difficulties rather than for the population at large and for those whose difficulties are at step 3 threshold.

Who it is not for?

The intervention is a stand-alone treatment, but will not be offered to everyone at Step 3. At this stage, it is not intended for existing iCope clients whose difficulties have been exacerbated by COVID 19 and who are currently in waiting areas on IAPTUS, but this option may be subject to revision in light of the evolving situation which will influence an appropriate service response.

If an individual is too distressed or emotionally overwhelmed to focus on a particular problem or engage in problem-solving via the standard protocol, we have included techniques such as distress tolerance and grounding (eg. present moment focus, breathing techniques etc.) in the Appendices section, which we encourage clinicians to use as an initial response before considering further strategies.

Equally, some individuals may benefit from being heard and their experiences validated before being offered strategies or further resources and we encourage clinicians to work at the individual's pace.

The protocol will not be appropriate for individuals where there are significant concerns about risk as they would need more intensive support from acute or specialist services in the Trust, such as the Crisis Team. Clinicians are encouraged to use their existing supervisory support structures to discuss any issues arising during the course of the work and/or avail of the existing duty system.

Some issues to hold in mind

The principles of psychological first aid outline some key factors which we encourage clinicians to consider when delivering this protocol:

Do's:

- Do aim at reducing distress, assist with current needs, and promote adaptive functioning.
- Do agree goals to change
- Do identify individual particular beliefs regarding change
- Do help them develop strategies to overcome obstacles to change
- Do focus on what the individual has done that is effective or may have contributed to help themselves or others in need
- Do adapt the information you provide to directly address the person's immediate goals and clarify answers repeatedly as needed

Do not's:

- Do not elicit details of traumatic experiences and losses
- Do not make assumptions about what the individual is experiencing or what they have been through
- Do not assume that everyone exposed to a mass emergency or crisis will be traumatised.
- Do not pathologise
- Do not label reactions as 'symptoms,' or speak in terms of "diagnoses," "conditions," "pathologies," or "disorders"
- Do not focus on a person's helplessness, weaknesses, mistakes, or inability to cope
- Do not "debrief" by asking for details of what happened
- Do not speculate or offer erroneous or unsubstantiated information

This is a different way of working at Step 3 and is a stand-alone protocol for use during the current pandemic. Clinicians will need to remain focused and be more directive in their approach, actively encouraging individuals to agree to work upon a problematic issue and try out certain coping strategies in line with their agreed goals. In recognition of the individuals unique experience the protocol is designed for flexible use, providing a guide for the clinician. Clinical judgement will prevail when considering appropriate use of the resources provided in the Appendix section and supervision will support clinicians with regard to decision-making.

Session Structure

The Step 3 brief coping intervention is divided into three appointments which are spread over approximately six weeks. The first session will be 50-60 minutes in duration, with subsequent 50 minute appointments. The proposed content of each contact is outlined in the table below.

Contact 1
Identify the problem, elicit current coping strategies and evaluate available resources. Develop an action plan.
Contact 2
Review action plan from contact 1 (2 weeks later). Revisit and update problem-solving goals. Include additional resources from appendices and own practice as required.
Contact 3
Follow-up on contact 2 and revised action plan (approximately 1 month later). Onward referral if applicable.

The Journey through iCope

The flow diagram on page 7 outlines an individual's current journey through iCope from the point of new referral (Dec EI stage on IAPTUS) through to discharge. A key service aim is to reduce the possibility of multiple assessments and assist efficient movement through the care pathway.

NOTE for clinicians: Please bridge individuals into the current contact by referring to their last contact on IAPTUS.

Where referral triage indicates suitability for a Step 2 assessment, this will now include an embedded COVID 19 'rapid response' call and where appropriate will lead to delivery of a Step 2 treatment intervention with a PWP colleague or in some cases will be stepped up for this COVID Step 3 Brief Coping intervention or to Step 3 assessment /treatment as usual.

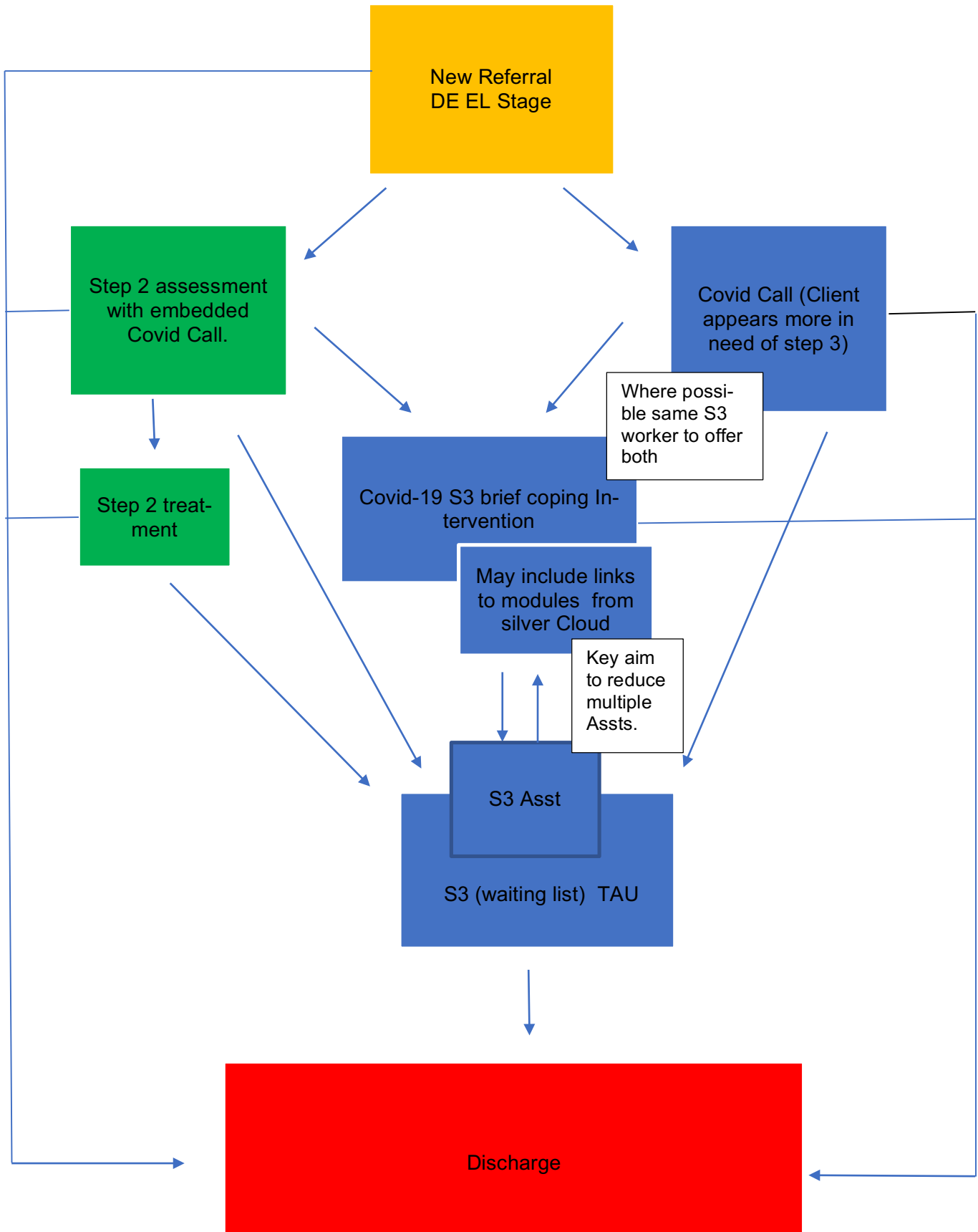
In cases where a referral is deemed more appropriate for Step 3 input from the outset, a COVID 19 call with a Step 3 clinician will be offered in the first instance and the COVID Step 3 Brief Coping intervention implemented where applicable. In cases where this protocol is deemed unsuitable clinicians will consider alternative service options where appropriate, including referral to partner organisations, access to online resources such as Silvercloud, or an assessment with a Step 3 clinician with the view to offering wait list for Step 3 treatment a usual.

In some cases, it may become clear that the COVID Step 3 Brief Coping intervention is applicable despite this not being picked up at an earlier stage. In such cases we strongly encourage the Step 3 assessor to take on this work to facilitate a smooth patient experience. Supervision and existing support structures are encouraged for queries and/or clinical discussion.

NOTE for clinicians: Where possible, the initial step 3 clinician is encouraged to carry out the COVID 19 Step 3 brief coping intervention.

In recognition that issues arising from the COVID 19 pandemic are continually evolving, we anticipate that service structures may need to adapt and we will inform you of any changes to the existing care pathway / service structure where necessary. The working group will continue to meet in anticipation of amendments to the existing protocol and we encourage feedback from clinicians and service users in order to improve the existing protocol.

Care Pathway Flow Diagram: Journey through iCope



Session Outline - A Guide for Clinicians

Contact One: Establishing a focus, identifying a problem area and developing and action plan.

In order to elaborate on the information gleaned from recent contact with iCope (ie. initial COVID rapid response call or previous screen/check-in/assessment) we have provided some supplementary questions that can identify the problem area(s) and provide clarity about a suitable therapeutic response.

You may want to orient the client at the outset through adapting the following opening:

In your initial telephone call with my colleague XXXX you spoke a little about some things that are troubling you. The COVID crisis can affect us in many different ways: physically, emotionally, economically, socially and psychologically. When we are facing a crisis of any sort, fear and anxiety are inevitable. They are normal and natural responses to challenging situations.

*In a minute, I am going to ask you a bit about how the COVID situation is impacting on various areas of your life. Before that, **can I briefly ask if there are particular things that are troubling you in this situation?** I am aware that you previously spoke to my colleague about this.'*

NOTE for clinicians: If no clear information is gathered from a recent iCope contact, begin with 'How would you describe your main concerns at the moment?'. If some information is already available, then summarise this and check for accuracy/any changes.

1. Establishing a focus: Relevant Background

NOTE for clinicians: Please use your judgment when asking the following questions as some clients will be able to move quite swiftly through initial sections and not all questions will be relevant to everyone.

Background questions:

The following suggested questions were developed from WHO guidelines on problems that can present during a large-scale emergency and are divided into four focal areas:

1. Social problems

Question: Have you experienced a major change in your circumstances?

Question: Did you have any pre-existing worries about your circumstances? If yes, has the current situation contributed to your difficulties? In what way?

2. Disrupted social networks

Question: Who are the main people in your life currently and how much contact do you have? Do you have responsibility for others (ie. dependent children, vulnerable adults). Do you feel well supported?

Question: Is anyone in your home currently unwell? Are you living in a position where you can practice a safe level of social distancing? Do you have the capacity for privacy?

3. Mental Health problems

Clinicians will need to check the following:

- Pre-existing issues (including Carenotes history or previous episodes on IAPTus)
- Emergency-induced issues; e.g. grief, acute stress reactions, harmful use of alcohol and drugs, depression and anxiety.

Question: Do you believe you have a mental health issue such as anxiety or depression? When did this start?

Question: Is this a new experience in the current context or have you had mental health issues in the past? Can you describe how your mood is currently?

4. Safety and Risk assessment

NOTE for clinicians: Please use your clinical judgment to explore the following area as necessary. Refer to existing iCope risk protocols.

Where risk issues are identified, carry out a risk assessment as per usual iCope protocols. Questions will include:

- Do you **currently** have any thoughts of ending your life? Get details and do standard assessment – plans or preparations, intent, means, history, protective factors, action plan to keep safe.
- Have you had any thoughts of harming yourself?
- Have you threatened anyone?
- Have you hurt anyone recently?
- Has there been any police involvement?

Domestic violence/ safety questions (where applicable)

- How are things at home and in your relationship?
- Do you feel safe?
- Have there been any violent incidents/ threats/ intimidation?
- Are there any children/vulnerable adults in the home?
- Is anyone else aware of this i.e. involvement with police or friends/family?
- Who will you contact in an emergency?
- How can you (and children) reach a place of safety if needed?

2. Identifying and naming a problem

Find an area to focus on where you feel that change is possible i.e. what is in a person's control. If there are multiple problems, choose an area to focus on where quick change is possible.

Question: If this call was helpful to you, what is the main or key problem/ concern / issue that you would like us to focus on together?

Current and Previous Coping Strategies:

Question: What are you doing at the moment to manage and/or cope with the above problem?

Question: How have you coped with stressful life events in the past? (Consider the impact of social distancing or self-isolation on normal coping).

Question: Are you aware of any unhelpful strategies you are using?

Evaluate Available Resources:

Question: Who is your main source(s) of support? How available is this support currently? Can you think of ways in which you can better draw on this support or new support?

Question: Are you aware of what support is available in your local community? Have you accessed or are you planning to access any community support?

Assist with accessing resources when necessary.

3. Developing an Action Plan: Goal-setting

Question: What ideas do you have about next steps to address this problem?

Encourage the client to say aloud what he/ she / they plan to do and how and when. Make sure the plan is realistic. Use SMART goals where appropriate. Draw up an agreed action plan.

Identify a place to start and small achievable steps. Some of these steps will be completed during the course of Step 3 contacts and some steps will continue independently.

Let the client know you will check in with them on the follow-up call to see how they are progressing.

Contact 2: Review

This appointment will be offered approximately two weeks after Contact 1. The main focus of this session is to review the action plan from Contact 1. Clinicians are encouraged to check in on the client's progress, revisit and update problem-solving goals. Clinicians will be guided by the client's presentation and can include additional resources from Appendices or one's own practice as required. Supervision is advised where possible to discuss any difficulties encountered along with amendments to the intervention where needed.

Clinicians will advise the client that a follow up appointment will be offered in approximately one month to discuss further progress and determine next steps if needed.

Contact 3: Follow up

This final appointment is intended to be a follow up session and will take place approximately one month after Contact 2. In this session the clinician is encouraged to review progress on problem-solving goals and check in on any amendments that were made in Contact 2. This follow up contact is also intended to explore where relevant any deterioration in the client's mental health and consider if further input from iCope is warranted, versus onward referral.

NOTE for clinicians: There is an appreciation that the COVID 19 pandemic and its effects necessitate a continual update of service protocols and delivery. As such we will keep working on any necessary amendments to the existing Step 3 brief coping protocol and adapt service arrangements as necessary. We appreciate your feedback in this process and aim to evaluate this intervention in order to continue our efforts to improve services for client's during this challenging time.

References

Coping with Worry and Anxiety during COVID-19 (open resource by PsychologyTools). This workbook focuses on how to manage heightened anxiety and stress, as well as uncontrollable worries. Workbook accessible via <https://www.psychologytools.com/articles/free-guide-to-living-with-worry-and-anxiety-amidst-global-uncertainty/>

Distress Tolerance. This workbook is focused on managing intense emotions and draws on DBT skills. Adapted from Linehan, M. (2015), *DBT skills training 2nd Ed.* New York: The Guildford Press.

FACE COVID (open resource by Dr Russ Harris) This workbook is based on principles of Acceptance and Commitment Therapy (ACT). Workbook accessible via <https://drive.google.com/file/d/117HY4z4mY5izJpR44ejuZ8rhTyoWEGEG/view> Or typing on Google: "FACE COVID Russ Harris" and click on the first link.

Managing Relationships.

Adapted from Linehan, M. (2015), *DBT skills training 2nd Ed.* New York: The Guildford Press.

Mental Health Foundation. 2020. *Nurturing Our Relationships During The Coronavirus Pandemic.* [online] Available at: <https://www.mentalhealth.org.uk/coronavirus/nurturing-our-relationships-during-coronavirus-pandemic?utm_source=facebook&utm_medium=cpc&utm_campaign=cv19> [Accessed April 2020].

Relate.org.uk. 2020. *Maintaining Your Relationship With Your Partner | Relate.* [online] Available at: <<https://www.relate.org.uk/relationship-help/covid-19-advice-and-information/maintaining-your-relationship-your-partner>> [Accessed April 2020].

WHO, War Trauma Foundation and World Vision International (2011). *Psychological First Aid: Guide for Field Workers.*

Appendices

Appendix A- Protocol Summary of Contact 1

1. IDENTIFYING AND NAMING THE PROBLEM
If this call was helpful to you, what is the main or key problem/ concern / issue that you would like us to focus on together?
2. CURRENT AND PREVIOUS COPING STRATEGIES
What are you doing at the moment to manage and/or cope with the above problem?
How have you coped with stressful life events in the past?
Are you aware of any unhelpful strategies you are using?
Assist with accessing resources when necessary.
3. GOAL SETTING / DEVELOPING AN ACTION PLAN
What ideas do you have about next steps to address this problem? Identify a place to start and small achievable steps.

Appendix B- Menu of Resources

A psychological first aid stance (active listening, validation, normalising, and problem solving) is the foundation of the intervention. However, to support the action plan further resources from below can be selected as and when appropriate given the presenting problem identified in the first contact. Using the resources below is entirely optional and clinicians are not expected to work outside of their own competencies.

Adapted BA (see appendix C & D)
<p>What's the intervention:</p> <ul style="list-style-type: none"> - Psychoeducation about importance of routine/meaningful activities - Establishing routine/engage with valued activities <p>When to use it:</p> <ul style="list-style-type: none"> - Difficulties adjusting to self-isolation/social distancing - Lack of routine - Isolation and loneliness (focus on connecting with others) - Depression/low mood
Stress and worry management (see appendices E, F & G)
<p>What's the intervention:</p> <ul style="list-style-type: none"> - Stress bucket - Relaxation strategies - Worry management - Present moment focus - Attention training <p>When to use it:</p> <ul style="list-style-type: none"> - Increased anxiety due to Covid-19 and its impact
Distress Tolerance (see appendix H)
<p>What's the intervention:</p> <ul style="list-style-type: none"> - Distress tolerance skills taken from DBT - Includes grounding, relaxation and other strategies that clinicians are likely to be familiar with <p>When to use it:</p> <ul style="list-style-type: none"> - Client present with difficulties regulating high emotions - Client needs to develop helpful coping strategies to manage high distress during the Covid-19 outbreak
ACT - FACE COVID (see appendix I)
<p>What's the intervention:</p> <ul style="list-style-type: none"> - Russ Harris' handout and video on applying ACT principles to the Covid-19 outbreak - Transdiagnostic <p>When to use it:</p> <ul style="list-style-type: none"> - Helpful principles that overlap with BA (committed action and values) and distress tolerance (openness to difficult thoughts and feelings, grounding)

Bereavement (see appendix J)

What's the intervention:

- Guidance on how to have conversations around bereavement and information on other services that may be helpful to a client at this time.

When to use it:

- Loss of close ones due to COVID-19

NOTE: The Bereavement Service will be offering a brief intervention for recently bereaved individuals and may need to be considered.

Relationship Difficulties (see appendix K)

What's the intervention:

- Assertiveness skills
- Conflict resolution skills
- Tips for building positive relationships

When to use it:

- Difficulties in relationships as a result of self-isolation (e.g. difficulties sharing space, increased conflict)

Coping with Traumatic Events (To be confirmed)

What's the intervention:

- TBC, separate working group developing guidance

When to use it:

- People who may be at risk of developing PTSD as a result of Covid-19. This group may include patients who have become severely unwell and frontline staff

Appendix C- Adapted BA

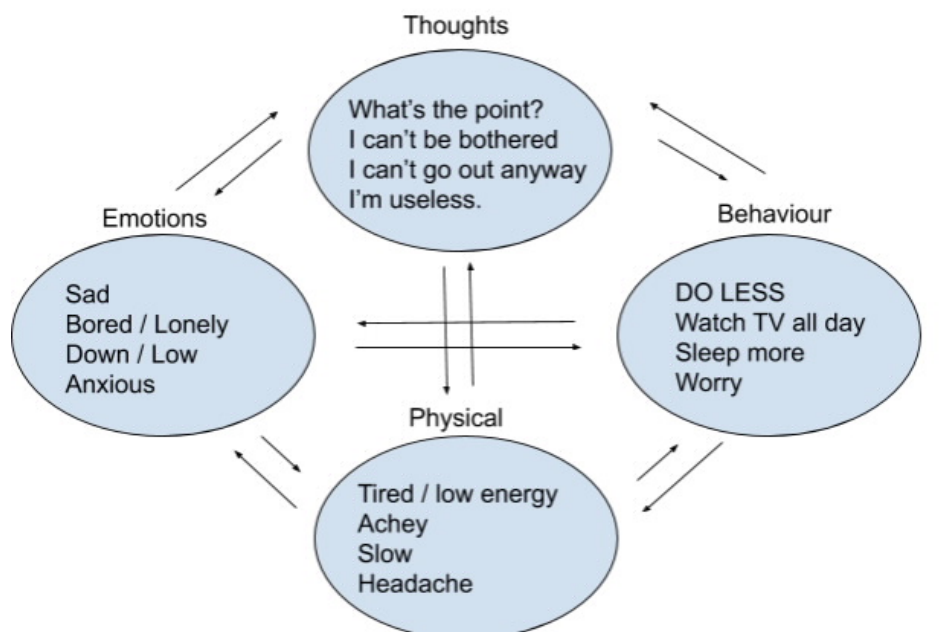
This booklet is an adapted version of the *Managing Low Mood during COVID-19* developed by Harin-gey IAPT

This guide is for people who are struggling to adjust to social distancing and the changes in routine as a result of Covid-19. If you're stuck at home, having to self-isolate and socially distance, you might start to feel tired, unmotivated and bored.

This is understandable: you probably used to have a set routine you stuck to, which got you up in the morning, out of the house at a set time, and busy all day and evening. If you are now working from home or are out of work, you might not see the point in putting clothes on, having lunch or speaking to anyone.

However, it is very important to try and stick to your routine no matter how you feel. This is because if your activity levels decrease, you are likely to feel low.

This is because the less we do, the more tired we feel. The more tired we feel, the lower in mood we get, and of course the less we do. The lower we feel, the more we think negatively. And if we are not doing much, we have more time to think negatively. The more we think negatively, the more tired we feel, and the less we do. This cycle illustrates this feeling:



The importance of routine

It might sound a bit dull, but it's really important to put in place a structured routine for yourself. This includes what you do when you wake up, all the way until you fall asleep.

- Try to have a **daily routine**, for example times for getting up and going to bed. Consider what time you will be having breakfast, lunch and dinner. This should bring some basic structure back to your day, and life might feel a little bit more normal.

Balance your day and week so you have a mix of different types of activities and rest. This could include activities in these areas:

1. **Self-care**

Could include showering, eating lunch, doing physiotherapy exercises or other forms of exercise...

2. **Necessary** (things you need or have to do)

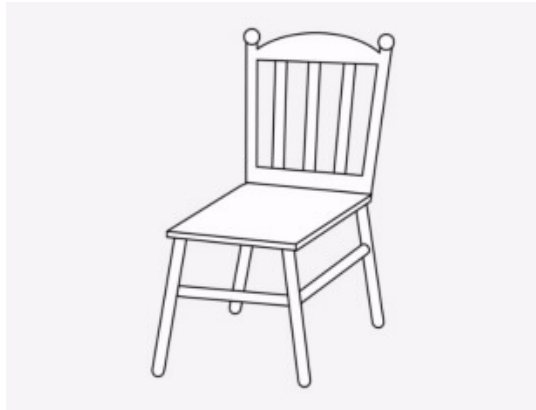
Could include applying for Universal Credit, doing the groceries, finishing that piece of work...

3. Pleasurable and Relaxing

It's especially important to consider activities that will make you feel calmer or more positive. This is especially true in times of increased stress and uncertainty: these should help relieve some of that anxiety and slowly improve your mood.

4. Connection with others.

It is important to continue to feel connected with others despite having to socially distance. What we CAN do is plan some meet-ups into the diary, just like we would if we were meeting face-to-face, and then call or use an app like Skype, Zoom, Google Hangouts...



Imagine that each type of activity is a leg on a chair. If one leg is longer than another (say, you do mostly necessary activities and few pleasurable activities), your chair will fall over.

In the same way, if your day is unbalanced in terms of the types of activities you do, you won't feel happy, calm or achieved.

Make a plan

The first step is to identify things you could do under the four categories mentioned above (there are a few ideas in the next section). Once you've got your Self Care, Necessary, Pleasurable and Connection with others activities written down, break those activities down even further.

Why do this? Breaking activities down into smaller steps can make them feel more achievable, and is likely to make you more productive / waste less time.

For example: "doing the groceries" might be one of your activities. Breaking this task down could include the following steps:

- Look up some recipes I would be keen to cook
- Make a plan for the meals I will be cooking this week
- Look through the pantry and cupboards to see what I already have
- Make a list of items I need to buy
- Locate a couple of bags for life
- Decide which shop is best to go to (closest / most likely to have what I need)
- Go to the shop

Once you've got a detailed plan of action, you need to put it into a schedule or activity diary. Ask yourself exactly where and when you'll do each activity, and how long for.

This is the part that might seem a bit obvious, or not so fun, but ensuring you know when exactly you're doing each activity, and how long for, will make it more likely you actually do it. **Try to follow your plan, NOT your mood** (which will likely tell you to just keep watching Netflix). You could use a diary like the one on the last page of this document.

Take some time to think about what you could do in each category:

<u>Self-care:</u>	<u>Necessary:</u>
<u>Pleasurable:</u>	<u>Connection with others:</u>

What can I do? Some ideas....

Exercise:

- Put on the radio really loudly and have a little dance
- Walk briskly up the stairs
- Stretch or do yoga (look up “home workout” on YouTube and you will find a wealth of videos to follow along with)
- Go for a jog (somewhere quiet!)
- Do some vigorous cleaning
- There are also lots of ideas in the **NHS fitness guides** are available here: <https://www.nhs.uk/live-well/exercise/?tabname=fitness-guides>
 - For example, some of these gentle sitting exercises: <https://www.nhs.uk/live-well/exercise/sitting-exercises/>
- **Joe Wicks PE lessons:** Joe Wicks broadcasts a PE lesson on YouTube at 9am every morning which is also available afterwards. A good way for anyone to exercise: <https://www.youtube.com/playlist?list=PLYCLoPd4VxBvQafyve889qVcPxYEjdSTI>
- **Or try some online Yoga:** <https://www.youtube.com/user/yogawithadriene>

Be creative:

- Draw, paint or sculpt
- Write in a diary or start a blog!
- Sing or play a musical instrument
- Knit or sew
- Carry out a DIY project
- Wander around a museum virtually (<https://www.travelandleisure.com/attractions/museums-galleries/museums-with-virtual-tours> or Google “travel leisure museums virtual tours”)

Soothing and calming:

- Take a bath or shower
- Stroke a pet or soft toy
- Have a warm drink
- Practice meditation, mindfulness or relaxation

(<https://blog.calm.com/take-a-deep-breath> or Google “Calm blog difficult times” and click on the first link)

Constructive activities:

- Work through all those emails just sitting in your inbox
- Deep-clean the kitchen cupboards or your car or your bookshelves
- Meal-prepare your week’s meals (especially helpful if you’re cooking for a family!)
- Wash and store your winter clothes

Connect with others:

- Phone / video call a friend or family member
- Plan an online meet up with family, friends or groups of friends on apps like Zoom, Skype, WhatsApp, Google Hangouts
- Contact someone you have not heard from for a long time
- Help an elderly or vulnerable neighbor
- Have a hug from someone special
- Call a helpline
 - (<https://www.nhs.uk/conditions/stress-anxiety-depression/mental-health-helplines/>) or Google “nhs mental health helplines” and click on the first link

Activities requiring concentration:

- Do a puzzle, crossword or Sudoku
- Play solitaire, computer games or apps
- Watch a really good movie, series or play
 - (The National Theatre is streaming a play live on YouTube every Thursday 7pm: <https://www.youtube.com/channel/UCUDq1XzCY0NIOYVJvEMQjqw> or Google “National Theatre Youtube”)

Self-care:

- Paint your nails
- Get really dressed up for no apparent reason
- Watch your favourite guilty pleasure TV show
- Decorate the living room and have a little party with those you live with
- Make a pillow fort with your children (or just by yourself)

Resources for self-isolation

This website has some links to helpful resources and ideas of things you can do
<https://www.marchnetwork.org/creative-isolation>

Self-Care is key

Everything can feel surreal and you feel exhausted, but it’s important to ensure you keep doing some things that make you feel good. If you are looking after others, be that at work or at home, you might feel like you simply don’t have time!

When you feel that way, remember the air-mask analogy: when the air-masks drop in the airplane, we are instructed to put ours on before helping others. This is because the lack of oxygen would make us incapable of fitting someone else’s air-mask or subsequently putting our own air-mask on.

Similarly, you need to help yourself before you help others. If not for you, do it for them.

Social media and news updates

Reduce the amount you consume overall. Notice how it makes you feel and find your own balance. It can be helpful to reach out, connect and find support, but it can also increase your own feelings of anxiety.

Set specific and time-framed periods to look at the news, e.g. 10 minutes twice daily. Consider using the government’s daily press conferences as a reference point

What if I am less tech savvy?

This pack is full of links to websites, ideas around using technology to stay connected to others. If you are less tech savvy, this might feel a bit overwhelming. If you are keen to try to get connected to others using technology, and you have the means to: it may be useful to ask a friend, neighbour or family member to set you up, and talk you through how it all works. If you have a laptop, smartphone or tablet, you could download Whatsapp or Skype onto your phone and video call people that way.

If that isn't possible, there are still plenty of ways to look after yourself and manage your wellbeing. The suggestions in the "Self-Care" section are mostly technology free - remember, you have been functioning just fine without technology! There is no reason you can't call someone on the phone, read a book, or turn the radio on (to a channel other than the news, if you're trying to manage your anxiety). You could watch a TV show or film at the same time as a friend, and then ring them to discuss your thoughts.

If you haven't got access to YouTube (where there are quite a few workout tutorials), you can still do some exercise in your living room, perhaps by using what's around you - lifting books, squatting down repeatedly, stretching your body or walking on the spot to get your steps in.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Breakfast							
Morning							
Lunch							
Afternoon							
Dinner							
Evening							

Appendix D- Coping Strategies

Things to include:

- Maintain a routine as much as you can. Take regular breaks
- Plan regular activities that help you feel good.
- Eat, drink and sleep properly
- Use stress management strategies
- Stay in touch with your friends and family – even if you can't see them in person, you can have video and phone calls.
- Engage in physical activity.
- Be compassionate to yourself and others. It is OK to say you are not OK.
- Focus on what is in your control. Pay attention to things that are going well when you can. Share and celebrate the successes or small wins. Remember this is a marathon, not a sprint. Even though this is a marathon, it will not last forever and the epidemic will end.

Things to avoid:

- Avoid using unhelpful coping strategies like smoking, alcohol or other drugs.
- Try to limit the time you spend watching, reading or listening to the news. Spend time deliberately engaging with tasks that take your mind away from the current crisis.

King's College and the Institute of Psychiatry have a very helpful website with videos and podcasts on various wellbeing topics such as has sleep, exercise, healthy eating, overcoming isolation, managing family life.

<https://www.kcl.ac.uk/ioppn/maintaining-health-and-wellbeing-during-the-covid-19-pandemic>

Appendix E- Reducing Stress Responses

These are simple stress management techniques and coping skills that you can use to protect yourself emotionally.

1. **Visualising a pleasant image of a safe space** - like a beach or a beautiful mountain site or visualising yourself doing a pleasant activity – like walking the woods, being in the garden. Try to visualise the scene in some detail and as vividly and clearly as you can by engaging all of your senses. What you can hear, see, smell and feel as if you are there.

2. **Reduce your muscle tension.** Take a few deep breaths. Focus your attention on the feeling of the air moving in and out of your body. Continue to breathe deeply. Now imagine that the tension in the muscles of your forehead is flowing out of your body with each exhalation. Do the same thing, breath by breath, with the muscles of your jaw, shoulders, arms, and legs.

3. Press your thumbs and forefingers together tightly. Take a slow deep breath and hold it for two or three seconds. Then slowly release your breath while you simultaneously slowly relax the pressure of your fingers and slowly say to yourself RELAX....

Online Resources:

Diaphragmatic breathing exercise

<https://www.youtube.com/watch?v=UB3tSaiEbNY>

This is a three-part video that explains what diaphragmatic breathing is and guides you through a lying down and a seated practice.

<https://www.youtube.com/watch?v=gAkjx25o4eI>

<https://www.youtube.com/watch?v=BckGYBfN5e0>

<https://www.youtube.com/watch?v=1vXITkrNxyw>

Progressive Muscle Relaxation (PMR)

If at first it is easier to be guided than to guide yourself, then you could look at different videos on YouTube for inspiration, eg

<https://www.youtube.com/watch?v=ClqPtWzozXs> (5:53)

<https://www.youtube.com/watch?v=9x3tl81NW3w> (6:06)

<https://www.youtube.com/watch?v=86HUcX8ZtAk> (15:52)

Imagery exercises

- Imagery on a beach → https://www.youtube.com/watch?v=ar_W4jSzOIM
- Imagery in a forest → https://www.youtube.com/watch?v=lgSbF_xH9LU
- Safe Place → <https://www.youtube.com/watch?v=pPBxNLpOLNU>

Appendix F- Living with Worry and Anxiety amidst Global Uncertainty

Open resource by PsychologyTools. This workbook focuses on how to manage heightened anxiety and stress, as well as uncontrollable worries. Workbook accessible via [https://www.psychologytools.com/assets/covid-19/guide to living with worry and anxiety amidst global uncertainty en-gb.pdf](https://www.psychologytools.com/assets/covid-19/guide%20to%20living%20with%20worry%20and%20anxiety%20amidst%20global%20uncertainty%20en-gb.pdf)

What is worry?

Human beings have the amazing ability to think about future events. 'Thinking ahead' means that we can anticipate obstacles or problems, and gives us the opportunity to plan solutions. When it helps us to achieve our goals, 'thinking ahead' can be helpful. For example, hand washing and social distancing are helpful things that we can decide to do in order to prevent the spread of the virus. However, worrying is a way of 'thinking ahead' that often leaves us feeling anxious or apprehensive. When we worry excessively, we often think about worst case scenarios and feel that we won't be able to cope.

What does worry feel like?

When we worry it can feel like a chain of thoughts and images, which can progress in increasingly catastrophic and unlikely directions. Some people experience worry as uncontrollable – it seems to take on a life of its own. It is natural that many of us may have recently noticed ourselves thinking about worst-case scenarios. The example below illustrates how worries can escalate quickly even from something relatively minor. Have you noticed any thoughts like this? (confession: we both have!)



Worry isn't just in our heads. When it becomes excessive we feel it as anxiety in our bodies too. Physical symptoms of worry and anxiety include:

- Muscle tension or aches and pains.
- Restlessness and an inability to relax.
- Difficulty concentrating.
- Difficulty sleeping.
- Feeling easily fatigued.

What triggers worry and anxiety?

Anything can be a trigger for worry. Even when things go right, you might manage to think to yourself "but what if it all falls apart?". There are particular situations where worry becomes even more common, though. Strong triggers for worry are situations that are:

- **Ambiguous** – open to different interpretations.
- **Novel and new** – so we don't have any experience to fall back on.
- **Unpredictable** – unclear how things will turn out.

Does any of this sound familiar at the moment? The current worldwide health situation ticks all of these boxes, and so it makes sense that people are experiencing a lot of worry. It is an unusual situation with much uncertainty, which can naturally lead us to worry and feel anxious.

Are there different types of worry?

Worry can be helpful or unhelpful, and psychologists often distinguish between worries concerning 'real problems' vs. 'hypothetical problems'.

- **Real problem** worries are about actual problems that need solutions right now. For example, given the very real concern about the virus at the moment, there are helpful solutions which include regular hand-washing, social distancing, and physical isolation if you have symptoms.

- **Hypothetical** worries about the current health crisis might include thinking about worst-case scenarios (what we might call catastrophising). For example, imagining worst case scenarios such as *most* people dying.

When does worry become a problem?

Everyone worries to some degree, and some thinking ahead can help us to plan and cope. There is no 'right' amount of worry. We say that worry becomes a problem when it stops you from living the life you want to live, or if it leaves you feeling demoralised and exhausted.

What can I do about worry?

It is natural for you to worry at the moment, but if you feel that it's becoming excessive and taking over your life – for example if it's making you anxious, or if you're struggling to sleep – then it might be worth trying to find ways to limit the time you spend worrying, and taking steps to manage your well-being. In the next section of this guide, we have included a selection of our favourite information handouts, exercises, and worksheets for maintaining well-being and managing worry. These can help you too:

- **Maintain balance in your life.** Psychologists think that well-being comes from living a life with a balance of activities that give you feelings of pleasure, achievement, and closeness. Our information handout *Look After Your Wellbeing By Finding Balance* discusses this in more detail. The *Activity Menu* on the following page contains suggestions of activities to help you to distract yourself and stay active. Remember that we're social animals – we need connections to thrive and flourish. We would recommend trying to do at least some activities that are social and involve other people. In times like these you might have to find some creative ways to do social things at a distance. For example, by keeping in touch online or by phone.
- **Practise identifying whether your worry is 'real problem' worry, or 'hypothetical worry'.** The *Worry Decision Tree* is a useful tool for helping you to decide what type your worry is. If you're experiencing lots of hypothetical worry, then it's important to remind yourself that your mind is not focusing on a problem that you can solve right now, and then to find ways to let the worry go and focus on something else. You might also use this tool with children if they are struggling to cope.
- **Practise postponing worry.** Worry is insistent – it can make you feel as though you have to engage with it **right now**. But you can experiment with postponing hypothetical worry, and many people find that this allows them to have a different relationship with their worries. In practice, this means deliberately setting aside time each day to let yourself worry (e.g. 30 minutes at the end of each day). It can feel like an odd thing to do at first! It also means that for the other 23.5 hours in the day you try to let go of the worry until you get to your 'worry time'. Our *Worry Postponement* exercise will guide you through the steps you need to give it a try.
- **Speak to yourself with compassion.** Worry can come from a place of concern - we worry about others when we care for them. A traditional cognitive behavioural therapy technique for working with negative, anxious, or upsetting thoughts is to write them down and find a different way of responding to them. Using the *Challenging Your Thoughts With Compassion* worksheet you can practise responding to your anxious or worrying thoughts with kindness and compassion. We have provided a worked example to get you started.
- **Practise mindfulness.** Learning and practising mindfulness can help us to let go of worries and bring ourselves back to the present moment. For example, focusing on the gentle movement of your breath or the sounds you hear around you, can serve as helpful 'anchors' to come back to the present moment and let go of worries.

Look After Your Wellbeing by Finding Balance

With the current health situation, many of our normal routines and daily activities are changing. Naturally this can be unsettling, and we can find that the things we usually did to look after our well-being have become difficult. Whether you are working from home, or in some form of physical isolation or distancing, it can be helpful to organise a daily routine that involves a balance between activities that:

- Give you a sense of **achievement**
 - *When we are struggling with anxiety and worry, we can lose touch with things that used to give us pleasure. Plan to do some activities each day that are pleasurable and make you feel joyful. For example, reading a good book, watching a comedy,*

dancing or singing to your favourite songs, taking a relaxing bath, or eating your favourite food.

- Help you feel **close and connected** with others
 - *We are social animals, so we need and naturally crave closeness and connection with other people. With the current health crisis many of us may be physically isolated or distant from others, so it's important that we consider creative ways to connect in order that we don't become socially isolated and lonely. How can you continue to connect with family and friends and have social time in a virtual way? Perhaps using social media, phone and video calls you could set up shared online activities e.g. a virtual book or film club. You could also explore local online neighbourhood groups, and see if there are ways to be involved in helping your local community.*
- Activities that you can do just for **pleasure**.
 - *When we are struggling with anxiety and worry, we can lose touch with things that used to give us pleasure. Plan to do some activities each day that are pleasurable and make you feel joyful. For example, reading a good book, watching a comedy, dancing or singing to your favourite songs, taking a relaxing bath, or eating your favourite food.*

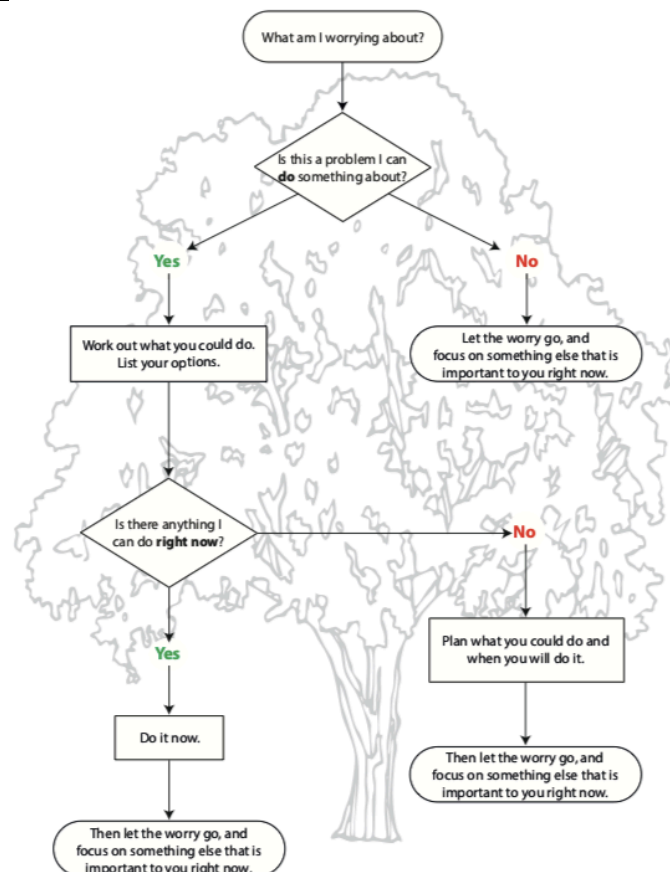
An imbalance of pleasure, achievement, and closeness can affect our mood. For example if you spend most of your time working with no time for pleasure or socialising, then you may start to feel low and isolated. Conversely, if you spend most of your time relaxing for pleasure and not doing other things that are important to you then this can also impact your mood.

At the end of each day could you check in with yourself and reflect on 'what did I do today that gave me a sense of achievement? Pleasure? Closeness with others?' Did I get a good balance, or what can I do differently tomorrow?

Use an Activity Menu to Give You Some Ideas To Stay Occupied

- View Activity Menu from Psychology Tools pdf guide → [https://www.psychologytools.com/assets/covid-19/guide to living with worry and anxiety amidst global uncertainty en-gb.pdf](https://www.psychologytools.com/assets/covid-19/guide%20to%20living%20with%20worry%20and%20anxiety%20amidst%20global%20uncertainty%20en-gb.pdf)

Use This Decision Tree to Help You Notice 'Real Problem' Vs. 'Hypothetical Worry'



Worry Postponement for Uncertain Times

Psychologists think that there are two types of worry:

1. **Real problem worries** are about actual problems affecting you right now and which you can act on now. “*My hands are dirty from gardening, I need to wash them*”, “*I need to call my friend or she will think I have forgotten her birthday*” “*I can’t find my keys*”, “*I can’t afford to pay this electricity bill*”, “*My boyfriend isn’t speaking to me*”.
2. **Hypothetical worries** are about things that do not currently exist, but which *might* happen in the future. “*What if I die?*”, “*What if everyone I know dies?*”, “*Maybe this worrying is making me crazy*”

People who are bothered by worry often experience it as *uncontrollable*, time consuming, and sometimes believe that it is beneficial to engage in worry when it occurs. Experimenting with postponing your worries – deliberately setting aside some time in your day to do nothing but worry and limiting the time you spend worrying – is a helpful way of exploring your relationship with worry. Follow the steps below for *at least* one week.

Step 1: Preparation

Decide **when** your worry time will be, and for **how long** it will be for.

- ‘Worry time’ is time you set aside every day for the specific purpose of worrying.
- What time of day do you think you will be in the best frame of mind to attend to your worries? •
- When are you unlikely to be disturbed?
- If you are unsure, 15 to 30 minutes every day at 7:00pm is often a good starting point.

Step 2: Worry postponement

During the day, decide whether worries that surface are ‘real problem’ worries you can act on now, or whether they are hypothetical worries that need to be postponed.

If the worry is a *real problem worry* you can do something about right now, then take action now. If it is not, postpone thinking about it until worry time and redirect your attention to the present by becoming mindful of the present moment:

- Use your senses (sight, sound, touch, smell, taste)
- Try to focus your attention externally rather than internally
- Say to yourself “I’m not going to engage in this worry right now. I will engage in this worry later.”

Step 3: Worry time

Use your dedicated worry time for worrying. Consider writing down any of the hypothetical worries that you remember having had throughout the day. How concerning are they to you now? Are any of them the kinds of worries that can lead you to take practical actions?

- Try to use all of your allocated worry time, even if you do not feel that you have much to worry about, or even if worries do not seem as pressing at this time.
- Reflect upon your worries now – do they give you the same emotional ‘kick’ when you think about them now as they did when you first thought of them?
- Can any of your worries be converted into a practical problem to which you can look for a solution?

Challenging Your Thoughts Compassionately During a Global Health Crisis

- Thought Record Table available via Psychology Tools pdf guide → [https://www.psychologytools.com/assets/covid-19/guide to living with worry and anxiety amidst global uncertainty en-gb.pdf](https://www.psychologytools.com/assets/covid-19/guide%20to%20living%20with%20worry%20and%20anxiety%20amidst%20global%20uncertainty%20en-gb.pdf)

Some Final Tips

- **Set a routine.** If you are spending more time at home it is important to continue with a regular routine. Maintain a regular time for waking up and going to bed, eating at regular times, and

getting ready and dressed each morning. You could use a timetable to give structure to your day.

- **Stay mentally and physically active.** When you plan your daily timetable, have a go at including activities that keep both your mind and body active. For example, you could try learning something new with an online course, or challenge yourself to learn a new language. It's also important to keep physically active. For example, doing rigorous housework for 30 minutes, or an online exercise video.
- **Practice gratitude.** At times of uncertainty, developing gratitude practice can help you to connect with moments of joy, aliveness, and pleasure. At the end of each day write down what you are grateful for, eg. 'I'm grateful that it was sunny at lunchtime so I could sit in the garden'. You could start a gratitude journal, or keep notes in a gratitude jar. Encourage other people in your home to get involved too.
- **Notice and limit worry triggers.** As the health situation develops it can feel like we need to constantly follow the news or check social media for updates. However, you might notice this also triggers your worry and anxiety. Try to notice what triggers worry. For example, is it watching the news for more than 30 minutes? Checking social media every hour? Try to limit the time that you are exposed to worry triggers each day. You might choose to listen to the news at a set time each day, or you could limit the amount of time you spend on social media for news checking.
- **Rely on reputable news sources.** It can also help to be mindful of where you are obtaining news and information. Be careful to choose reputable sources. The World Health Organisation provides excellent information here: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public>

Appendix G- Attention Training

Attention Training Exercise – Sounds

- Sit quietly in a comfortable position, and close your eyes
- Just notice how you are feeling
- Then, imagine that your attention is moving away from you and into the room where you are sitting
- Pay attention to noises coming from the room – see if you can notice sounds that you did not hear before, such as a clock ticking
- Then, expand your attention to focus on sounds coming from beyond the room – you may hear traffic, or people speaking in the distance
- Do this for a few minutes, then allow your attention to come back to you before you open your eyes

Present Moment Focus Training

Although focusing your attention on future possible negative events is unhelpful, it has probably become a habit. As with all habits, practice will be needed to help you turn your attention away from internal worry thoughts, onto what is happening around you in the present moment. Practice focusing on the present moment, rather than on your internal worry thoughts is likely to help.

We suggest that you practice for at least 10 to 15 minutes each day. However, it is unlikely that you will be able to be fully present moment focused during this time. Your attention may well repeatedly come back onto your worry thoughts. That's completely normal and to be expected when you're trying to break a habit. When your worry thoughts pop back into your mind, just gently observe these thoughts and then re-focus your attention on the present moment. Please record your practices in the tables below.

Instructions for practicing present moment focus

The world around us is full of different sounds, colours, objects, textures and events. During your practice sessions, we would like you to become more aware of what is happening around you in the present moment. As you do so, you will probably find that you become less aware of your worry thoughts. Each practice session should have three components.

1. Becoming aware of different sounds/sights

In the first step, try to become aware of the range of different sounds and/or sights around you.

Practicing inside

- Listen to a music CD or the radio: in turn pay attention to the different instruments that are playing (guitar, drums, piano, violin, clarinet, etc).
- Alternatively sit quietly and pay attention to the sounds in the room and any sounds you can hear outside.
- Now pay attention to what objects are around and the colours you can see. Where is there light and where is there shade? Pay attention to what it would feel like to touch these objects. What textures would they be? Would they be hard or soft?

Practicing outside

- Go for a walk outside: pay attention to the sounds around you. What sounds can you hear nearby? What sounds can you hear further away? Can you hear cars, people, birds etc?
- Now pay attention to what buildings, plants, traffic and people are around. What colours and shading can you see? Pay attention to those. What are the different textures around you?

2. Switching your attention between the different sounds/sights

In the second step you need to switch your attention between the different sounds and sights. You can try this equally well indoors and outdoors

- Choose several different sounds.

Appendix H- Managing Intense Emotions: Distress Tolerance Skills

Distress Tolerance skills are a range of skills that come from a therapy called Dialectical Behavioural Therapy (DBT), which emphasises learning to manage intense emotions. This is important because sometimes, like in the current crisis, there may be difficult circumstances that we cannot change (in the short term) which are highly stressful and understandably give rise to a lot of emotion. Often, this intense emotion might come hand in hand with an action urge to get away from/ escape the difficult emotion. If acted on, this may make things worse.

In this instance, we need to find ways to tolerate and cope with the situation as it is – without resorting to less adaptive/more unhelpful ways of coping with distress (e.g. using substances, impulsive behaviour, getting into arguments, self-harm etc.). Distress tolerance skills are about learning to do this.

A premise of distress tolerance skills is that experiencing, tolerating and accepting emotional pain are ultimately the way to reduce distress. But there are also times to distract from distress –e.g. put emotions on the shelf in the short term.

Distress Tolerance Skills are needed when:

- There is a high level of emotional distress.
- Acting on emotions and urges will make things worse
- The issue cannot be solved immediately (**if there is a solution, use problem solving skills instead**)
- Client must temporarily tolerate painful events and emotions
- Clients are in a short term highly stressful situation

The skills covered here are:

- STOP skills
- TIPP skills
- IMPRESSED skills
- Radical Acceptance

STOP Skills

These are skills to use when feeling intense emotions to prevent you from doing something you may regret. It is about slowing things down, noticing what is going on so that you can think about how to respond.

Stop

Do not just react. Stop! Your emotions may try to make you act without thinking. Stay in control!

Take a step back

Take a step back from the situation. Let go. Take a deep breath. Do not let your feelings put you over the edge and make you act impulsively.

Observe

Take notice of what is going on inside and outside of yourself. What is the situation? What are your thoughts and feelings? What are others saying or doing?

Proceed mindfully

Act with awareness. Think about your goals. What do you want to get from this situation? Which actions will make it better or worse? Do what is effective (what helps you to move towards your goals and values). What other skills/coping strategies do you need to use?

TIPP Skills

These skills can be used when emotions are very intense and you need to bring them down quickly. No need to follow all of the steps, sometimes step 3 on its own is enough.

Tip your temperature

Intensely exercise
Pace your breathing
Progressively Relax

1. **Tip the TEMPERATURE of your face:** use ice water to calm yourself down fast (used to stop yourself doing something that could be damaging)
 - Put your face in a bowl of ICE WATER (15-30 seconds)
 - OR splash ICE WATER on your face,
 - OR hold a gel ICE pack on your face.
 - Hold your breath as you do it
 - Activates the “dive reflex”

2. **INTENSELY EXERCISE** to calm down a body revved up by emotion
 - Engage in intense exercise, if only for a short while.
 - Expend your body’s stored up physical energy by: Running, Walking, Fast Jumping, Playing Basketball, Weight Lifting, etc.

3. **PACE YOUR BREATHING BY SLOWING IT DOWN**
 - Breathe deeply from the abdomen.
 - Slow your pace of inhaling and exhaling way down (on average 5 to 7 breath cycles per minute).
 - Breathe more slowly out than when breathing in (for example, 4 seconds in and 8 seconds out).

4. **PROGRESSIVELY RELAX YOUR MUSCLES**
 - Practice Progressive Muscle Relaxation
 - TENSE (5 seconds) each big muscle groups in your body, then let go when breathing out and RELAX each muscle group
 - NOTICE the tension. NOTICE the difference when relaxed.

Resources

Diaphragmatic breathing exercise

<https://www.youtube.com/watch?v=UB3tSaiEbNY>

This is a three-part video that explains what diaphragmatic breathing is and guides you through a lying down and a seated practice.

<https://www.youtube.com/watch?v=gAkjx25o4eI>

<https://www.youtube.com/watch?v=BckGYBfN5e0>

<https://www.youtube.com/watch?v=1vXITkrNxyw>

Useful App

If you want to use an app to assist you one you can try the **Breath Ball**. The app is free to download and use. There is ball that inflates and deflates on the screen to help you keep the rhythm.

Progressive Muscle Relaxation (PMR)

If at first it is easier to be guided that to guide yourself, then you could look at different videos on YouTube for inspiration, eg

<https://www.youtube.com/watch?v=ClqPtWzozXs> (5:53)

<https://www.youtube.com/watch?v=9x3tl81NW3w> (6:06)

<https://www.youtube.com/watch?v=86HUcX8ZtAk> (15:52)

IMPRESSED Skills

This is an acronym to help you remember a number of helpful distress tolerance skills. Look through them and think about how you can use the skills mentioned in your current situation.

Some of these may be things you do already (e.g. doing Sudoku, having a hot bath). If so, you can start doing them more strategically when feeling distressed to help you calm down. Some may not seem applicable or helpful to you. That's ok, that's why there are so many, you can pick the ones that you find most helpful but please keep an open mind and try them out.

You can then develop a distress tolerance plan based on them.

Imagery

Meaning

Present moment focus

Relaxation

Encouragement

Stop

Self soothe

Engage

Distract

Imagery

- Imagine very relaxing scenes
- Imagine a place where you feel secure and safe
- Imagine hurtful emotions draining out of you like water from a pipe
- Imagine yourself coping well
- Remember a good time in your past, bring yourself back there

Resources for Imagery

Imagery on a beach

https://www.youtube.com/watch?v=ar_W4jSzOIM

Imagery in a forest

https://www.youtube.com/watch?v=lgSbF_xH9LU

Safe Place

<https://www.youtube.com/watch?v=pPBxNLpOLNU>

Meaning

- Try and find meaning in the pain and what you are going through
- Focus on the positive aspects of the situation, no matter how small
- Find something to be grateful for

Present moment focus

- Use your senses to ground you in the present moment
- Use the 5-4-3-2-1 technique to acknowledge:
 - 5: FIVE things you see around you (e.g Your hands, a pen, the sky, a plant)
 - 4: FOUR things you can touch around you. ...
 - 3: THREE things you hear. ...
 - 2: TWO things you can smell. ...
 - 1: ONE thing you can taste. ...

Relaxation

- Breathe deeply
- Have a hot bath
- Practice relaxation, yoga or gentle stretching
- Change your facial expression/body posture (this sends a different message to the brain)

- Massage your face or body

Encouragement

- Develop a mantra to encourage yourself. For example:
- “This will pass”
- “I have managed through difficult situations before”
- “I am doing the best I can”
- “It is ok not to be ok, I can manage through this”
- “I can do this”

Stop

- Take a planned break with a time limit. Give yourself a time out.
- Go under the duvet for 20 minutes (and make sure you get up after that)
- Do something else, then return to the task/problem
- Turn off your phone for a day

Self-Soothe

- Do something nice for yourself that engages your five senses
- Develop a self-soothing box with objects that can help to soothe and relax you (see box for ideas)
- If you are finding it difficult to allow yourself to use self-soothing you might need to learn to give yourself permission by saying something like ‘I do deserve this’.
- It is important to be mindful and present when using any self-soothing. This means being totally focussed on the object/sensation you are anchoring your attention to. This involves letting go of distracting thoughts particularly ones like ‘this isn’t working’.

Self-Soothing– some ideas

- **Soothing through your five senses:**
 - Soothing smell (e.g. favourite perfume or lotion, essential oils, scented candle,)
 - Soothing with vision (e.g. photos of loved ones smiling, beautiful landscapes, fresh flowers, make the space look pretty)
 - Soothing sounds/music (e.g. nature sounds, white noise, relaxing music)
 - Soothing touch (e.g. blanket, hot water bottle, comfy clothes, putting lotion on body)
 - Soothing taste (e.g. hot chocolate, tea, treat to eat mindfully)
- **Soothing object** that brings back good memories (e.g. shell, holiday souvenir, gifts)
- Important **letters/notes from others** (e.g. birthday card, write down kind messages you received from others on your phone or keep them somewhere you can find them)
- **Compassionate letter** to myself that is encouraging and reminds me of my resources/times when I have managed well

Engage

- Engage fully in what you are doing, return to it if your mind wanders
- Use your senses to ground you in the present
- Engage with other people, do something nice for them, seek support if needed

Distraction

- Engage in a distracting activity and give it your full attention (e.g. hobbies, Sudoku, computer games, gardening)
- Spend time with others (face to face or online)
- Distract from your thoughts, let go of dwelling and worrying.
- Count to 10

Radial Acceptance

This is a skill to use when you cannot keep painful emotions and events from coming your way.

The principle of acceptance can also be applied to events and experiences in our daily life (as well as our emotions, thoughts and sensations). Practicing acceptance is not the same as saying that bad things that happen to us are ok, or that we want to be feeling a certain way, it is about coming to a

place internally that allows us to tolerate what has happened and how we feel about it. To truly accept reality, we must understand the facts about the past and present, even if they may be uncomfortable or undesirable.

Acceptance is letting go of fighting reality (e.g., moving from ‘this shouldn’t be this way’ to ‘this is the way it is even though I don’t want it to be so’). Pain creates more suffering when you refuse to accept the pain. While pain is inevitable in life, suffering is optional.

It is really important to remember that accepting something is not the same as judging it good or passive resignation.

We are not saying accept that things can’t change. We are saying the more time that is spent saying it should not have happened, the less acceptance (and ability to change what you can) and the more distress.

Radical Acceptance involves the following steps:

- Observe that you are fighting against reality. (Ex: “It shouldn’t be like this.”)
- Remind yourself that the unpleasant reality cannot be changed. (Ex: “It happened.”)
- Acknowledge that something led to this moment. (Ex: “This is how it happened.”)
- List what your behavior would look like if you did accept the facts then act accordingly.
- Plan ahead with events that seem unacceptable and think about how you should appropriately cope.
- Remain mindful of physical sensations throughout your body such as tension or stress.
- Embrace feelings such as disappointment, sadness, or grief.
- Acknowledge that life is worth living even when there might be temporary pain.

Turning the Mind

Acceptance of reality as it is requires an act of choice. It is like coming to a fork in the road. You have to turn your mind towards the acceptance road and away from the “rejecting reality” road. You have to make an inner commitment to accept things as they currently are in this moment. Sometimes, you have to make the commitment many times in the space of a few minutes.

Willingness

Willingness is about being flexible and cultivating a willing response to each situation. It is focusing on effectiveness and connecting with the world around you in an open, non-defensive way. Sometimes these steps have to be followed again and again!

My Distress Tolerance Plan

A step by step plan to tolerate intense emotions that you can use. Write down the triggers and the skills you have identified from the ones suggested above.

Triggers:

1.
2.
3.
4.
5.
6.
7.
8.
9.
10.

Appendix I- Face COVID: How to respond effectively to the Corona crisis by Dr Russ Harris

FACE COVID (open resource by Dr Russ Harris) This workbook is based on principles of Acceptance and Commitment Therapy (ACT). Workbook accessible via <https://www.baps.org.uk/professionals/covid-19-information-for-paediatric-surgeons/attachment/face-covid-by-russ-harris-pdf-pdf/>

Or typing on Google: "FACE COVID Russ Harris" and clicking on the first or second link.

You can also watch a YouTube animated video here:
<https://www.youtube.com/watch?v=BmvNCdpHUYM>

'FACE COVID' is a set of practical steps for responding effectively to the Corona crisis, using the principles of acceptance and commitment therapy (ACT). Here's a quick summary of the key steps, and in the pages that follow we'll explore them all in more depth:

F = Focus on what's in your control
A = Acknowledge your thoughts & feelings
C = Come back into your body
E = Engage in what you're doing

C = Committed action
O = Opening up
V = Values
I = Identify resources
D = Disinfect & distance

Let's now explore these, one by one

F = Focus on what's in your control

The Corona crisis can affect us in many different ways: physically, emotionally, economically, socially, and psychologically. All of us are (or soon will be) dealing with the very real challenges of widespread serious illness and the inabilities of healthcare systems to cope with it, social and community disruption, economic fallout and financial problems, obstacles and interruptions to many aspects of life ... and the list goes on.

And when we are facing a crisis of any sort, fear and anxiety are inevitable; they are normal, natural responses to challenging situations infused with danger and uncertainty. It's all too easy to get lost in worrying and ruminating about all sorts of things that are out of your control: what might happen in the future; how the virus might affect you or your loved ones or your community or your country or the world – and what will happen then - and so on. And while it's completely natural for us to get lost in such worries, it's not useful or helpful. Indeed, the more we focus on what's *not* in our control, the more hopeless or anxious we're likely to feel. So the single most useful thing anyone can do in any type of crisis – COVID19-related or otherwise - is to: **focus on what's in your control.**

You can't control what happens in the future. You can't control COVID-19 virus itself or the world economy or how your government manages this whole sordid mess. And you can't magically control your feelings, eliminating all that perfectly natural fear and anxiety. But you can control *what you do* - here and now. And that matters.

Because *what you do* - here and now - can make a huge difference to yourself, and anyone living with you, and a significant difference to the community around you.

The reality is, we all have far more control over our behaviour, than we do over our thoughts and feelings. So our number one aim is to take control of our behaviour - right here and now - to respond effectively to this crisis.

This involves both dealing with our inner world – all our difficult thoughts and feelings - and our outer world – all the real problems we are facing. How do we do this? Well, when a big storm blows up, the

boats in the harbour drop anchor – because if they don't, they'll get swept out to sea. And of course, dropping anchor doesn't make the storm go away (anchors can't control the weather) - but it can hold a boat steady in the harbour, until the storm passes in its own good time.

Similarly, in an ongoing crisis, we're all going to experience 'emotional storms': unhelpful thoughts spinning inside our head, and painful feelings whirling around our body. And if we're swept away by that storm inside us, there's nothing effective we can do. So the first practical step is to 'drop anchor', using the simple ACE formula:

A = Acknowledge your thoughts and feelings

C = Come back into your body

E = Engage in what you're doing

Let's explore these one by one:

A = Acknowledge your thoughts and feelings

Silently and kindly acknowledge whatever is 'showing up' inside you: thoughts, feelings, emotions, memories, sensation, urges. Take the stance of a curious scientist, observing what's going on in your inner world.

And while continuing to acknowledge your thoughts and feelings, also

C = Come back into your body

Come back into and connect with your physical body. Find your own way of doing this. You could try some or all of the following, or find your own methods:

- Slowly pushing your feet hard into the floor.
- Slowly straightening up your back and spine; if sitting, sitting upright and forward in your chair.
- Slowly pressing your fingertips together
- Slowly stretching your arms or neck, shrugging your shoulders.
- Slowly breathing

Note: you are not trying to turn away from, escape, avoid or distract yourself from what is happening in your inner world. The aim is to remain aware of your thoughts and feelings, continue to acknowledge their presence and at the same time, come back into and connect with your body, and actively move it. Why? So you can gain as much control as possible over your physical actions, even though you can't control your feelings. (Remember, F = Focus on what's in your control)

And as you acknowledge your thoughts & feelings, and come back into your body, also

E = Engage in what you're doing

Get a sense of where you are and refocus your attention on the activity you are doing. Find your own way of doing this. You could try some or all of the following suggestions, or find your own methods:

- Look around the room and notice 5 things you can see.
- Notice 3 or 4 things you can hear.
- Notice what you can smell or taste or sense in your nose and mouth
- Notice what you are doing
- End the exercise by giving your full attention to the task or activity at hand. (And if you don't have any meaningful activity to do, see the next 3 steps.)

Ideally, run through the ACE cycle slowly 3 or 4 times, to turn it into a 2- 3 minute exercise.

If you wish, to help you get the hang of this, you can download some free audio recordings of 'dropping anchor' exercises, varying from 1 minute to 11 minutes in length. You can listen to these and use them as a guide to help you develop this skill. You can download or stream them from the left hand box on this webpage: <https://www.actmindfully.com.au/free-stuff/free-audio/>

NOTE: please don't skip the A of ACE; it's so important to keep acknowledging the thoughts and feelings present, especially if they are difficult or uncomfortable. If you skip the A, this exercise will turn into a distraction technique – which it's not supposed to be.

Dropping anchor is a very useful skill. You can use it for handling difficult thoughts, feelings, emotions, memories, urges and sensations more effectively; switching off auto-pilot and engaging in life; grounding and steadying yourself in difficult situations; disrupting rumination, obsessing and worrying; and focusing your attention on the task or activity you are doing. The better you anchor yourself in the here and now, the more control you have over your actions – which makes it a lot easier to do the next steps: **COVID**

C = Committed Action

Committed action means effective action, guided by your core values; action you take because it's truly important to you; action you take even if it brings up difficult thoughts and feelings. Once you have dropped anchor, using the ACE formula, you will have a lot of control over your actions – so this makes it easier to do the things that truly matter. Now obviously that includes all those protective measures against COVID-19 – frequent handwashing, social distancing, and so on. But in addition to those fundamentals of effective action, consider:

What are simple ways to look after yourself, those you live with, and those you can realistically help?

What kind, caring, supportive deeds you can do?

Can you say some kind words to someone in distress – in person or via a phone call or text message?

Can you help someone out with a task or a chore, or cook a meal, or hold someone's hand, or play a game with a young child?

Can you comfort and soothe someone who is sick? Or in the most serious of cases, nurse them and access whatever medical assistance is available?

And if you're spending a lot more time at home, through self-isolation or forced quarantine, or social distancing, what are the most effective ways to spend that time?

You may want to consider physical exercise to stay fit, cooking (as) healthy food (as possible, given restrictions), and doing meaningful activities by yourself or with others.

And if you're familiar with acceptance and commitment therapy or other mindfulness-based approaches, how can you actively practice some of those mindfulness skills?

Repeatedly throughout the day, ask yourself 'What can I *do* right now - no matter how small it may be - that improves life for myself or others I live with, or people in my community?' And whatever the answer is – do it, and engage in it fully.

O = Opening up

Opening up means making room for difficult feelings and being kind to yourself. Difficult feelings are guaranteed to keep on showing up as this crisis unfolds: fear, anxiety, anger, sadness, guilt, loneliness, frustration, confusion, and many more. We can't stop them from arising; they're normal reactions. But we can open up and make room for them: acknowledge they are normal, allow them to be there (even though they hurt), and treat ourselves kindly.

Remember, self-kindness is essential if you want to cope well with this crisis – especially if you are in a caregiver role. If you've ever flown on a plane, you've heard this message: 'In event of an emergency, put on your own oxygen mask before assisting others.' Well, self-kindness is your own oxygen mask; if you need to look after others, you'll do it a whole lot better if you're also taking good care of yourself.

So ask yourself, 'If someone I loved was going through this experience, feeling what I am feeling – if I wanted to be kind and caring towards them, how would I treat them? How would I behave towards them? What might I say or do?' Then try treating yourself the same way.

For more on self-kindness, also known as self-compassion, read this eBook:

https://drive.google.com/file/d/1_Q3UcT9Q8VuSbiRm7x7-xjaxy5xkrba/view?usp=sharing

V = Values

Committed action should be guided by your core values: What do you want to stand for in the face of this crisis? What sort of person do you want to be, as you go through this? How do you want to treat yourself and others?

Your values might include love, respect, humour, patience, courage, honesty, caring, openness, kindness or numerous others. Look for ways to 'sprinkle' these values into your day. Let them guide and motivate your committed action.

Of course, as this crisis unfolds, there will be all sorts of obstacles in your life; goals you can't achieve, things you can't do, problems for which there are no simple solutions. But you can still live your values in a myriad of different ways, even in the face of all those challenges. Especially come back to your values of kindness and caring.

Consider:

What are kind, caring ways you can treat yourself as you go through this?

What are kind words you can say to yourself, kind deeds you can do for yourself?

What are kind ways you can treat others who are suffering?

What are kind, caring ways of contributing to the wellbeing of your community?

What can you say and do that will enable you to look back in years to come and feel proud of your response?

I = Identify resources

Identify resources for help, assistance, support, and advice. This includes friends, family, neighbours, health professionals, emergency services. And make sure you know the emergency helpline phone numbers, including psychological help if required. Also reach out to your social networks. And if you are able to offer support to others, let them know; you can be a resource for other people, just as they can for you.

One very important aspect of this process involves finding a *reliable and trustworthy* source of information for updates on the crisis and guidelines for responding to it. The World Health Organisation website is the leading source of such information:

<https://www.who.int/emergencies/diseases/novel-coronavirus-2019>

Also check the website of your country's government health department. Use this information to develop your own resources: action plans to protect yourself and others, and to prepare in advance for quarantine or emergency.

D = Disinfect & distance physically

I'm sure you already know this, but it's worth repeating: disinfect your hands regularly and practice as much social distancing as realistically possible, for the greater good of your community. And remember, we're talking about physical distancing – not cutting off emotionally. (If you aren't quite sure about what this means, read this: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public>)

This is an important aspect of committed action, so align it deeply with your values; recognise that these are truly caring actions.

In Summary

So again and again and again, as problems pile up in the world around you, and emotional storms rage in the world within you, come back to the steps of FACE COVID:

F = Focus on what's in your control

A = Acknowledge your thoughts and feelings

C = Come back into your body

E = Engage in what you're doing

C = Committed action

O = Opening up

V = Values

I = Identify resources

D = Disinfect & distance

Appendix J- Having Conversations with the Newly Bereaved

NOTE for clinicians: Don't make assumptions about what people need and where people may be at in relation to their loss. Be curious and ask them what they would find helpful in terms of having a conversation (see section 4 below).

1. **Acknowledge the loss:** As simple as this sounds this is a very important thing to do. Many people (including health professionals) when presented with news of a death often forget to respond in a warm empathetic way. Saying "I'm so sorry" or "I'm very sorry to hear that" will establish you as a someone who genuinely cares and is able to listen.
2. **Validate their emotions and feelings:** Grief is a very individual process and everyone will have their own unique experience. There are a wide range of commonly reported feelings. Here are some of them; shock, distress, fear, sadness, panic, relief, guilt, resentment, disbelief, denial, regret, detachment.
3. **Normalise their feelings:** "Grief takes many different forms, there's no right way to feel".
4. **Finding a focus:** As with all the brief step interventions it is important to identify and name the main area to focus on. You can refer back to the main protocol. So, within the known context of bereavement you can still ask the core question "What would help you cope right now?" or "What can we focus on together that would be helpful to you?"

Practical concerns and considerations: The person who died may have been a partner, parent or carer. The client may be in need of practical support and signposting.

Ways to remember the deceased: We know that it can be helpful to create a place in the house to remember the deceased. This can help to process the reality of the loss, especially where people feel particularly upset about not having had the opportunity to say goodbye.

Grieving and isolation: Talking and being with friends and family can be one of the most helpful ways to cope after someone dies. A focal task could be to help your client reach out to their social network.

However, when someone is in grief they can often feel that other people don't respond in the way they would want. This is often due to other people's own fears about the situation. Or they might be feeling helpless as they know they can't fix your client's grief. It is good to have a conversation with your client about this. You can help your client explain to their family members and friends what they need at this time, for example to think about who they can call in the middle of the night. Or who can they share stories with about the person who has died. When thinking about their specific needs it is good to ask "Who can help you with that?".

COVID19 – Resources for Bereavement Support:

- **Cruse bereavement care – [cruse.org.uk](https://www.cruse.org.uk)**

Provides support after the death of someone close including face to face, telephone and support groups. Also bereavement support to children. The website is very good, lots of helpful information about grief. Special section on being bereaved by Covid and traumatic bereavement.

- **The Loss Foundation – [the lossfoundation.org](https://www.lossfoundation.org)**

Providing local support groups for people following the loss of a loved one to cancer. They are now offering groups for people bereaved by Covid 19.

- **Camden, City, Islington & Westminster Bereavement Service (Our IAPT partners) [bereavement-counselling.org](https://www.bereavement-counselling.org)**

Offering counselling to those who are bereaved. Good information about bereavement. Also offer pre-bereavement counselling for people who have a terminally ill relative/friend. They are now also offering a brief 3 session Covid 19 quick response model (This service is not on their website yet)

- **Money Advice Service**

<https://www.moneyadviceservice.org.uk/en/articles/what-to-do-when-someone-dies>

Information on how to deal with money after a death, from paying for the funeral to dealing with paperwork and managing household bills.

Other bereavement organisations that might be helpful:

- **Winston's Wish – winstonswish.org.uk**

Childhood bereavement charity.

- **SANDS – sands.org.uk**

Stillbirth and neonatal death charity.

- **The Miscarriage Association – miscarriageassociation.org.uk**

Support and information for people affected by miscarriage.

- **SOBS – uk-sobs.org.uk**

Providing support for people bereaved by suicide.

- **Support After Suicide – supportafter suicide.org.uk**

Providing information and support. Good information on their website.

- **The Compassionate Friends – tcf.org.uk**

Offering support after the death of a child at any age.

- **Dying Matters - dyingmatters.org**

Offers information on end of life and bereavement. Aims to help people talk more openly about dying, death and bereavement, and to make plans for end of life.

Appendix K- Managing Relationships During COVID-19

From the Mental Health Foundation Website:

Five tips for nurturing healthy relationships

- **Give time** - put more time aside to connect with your friends and family
- **Be present** - this means really paying attention to the other people in your life and trying not to be distracted by your phone or your work or other interests
- **Listen** - really listen to what others are saying and try to understand it and to focus on their needs in that moment
- **Let yourself be listened to** - honestly share how you are feeling, and allow yourself to be heard and supported by others
- **Recognise unhealthy relationships** - harmful relationships can make us unhappy. Recognising this can help us to move forward and find solutions

Create some certainties

- **Agree on who is using which parts of the home and when** - for those of us who live with other people and who are feeling irritated or overwhelmed by constant togetherness, it may help to agree who is going to use which parts of the home - for instance during the day, when we may need to work and/or look after children.
- **Make best use of the physical space you have** - this may be about planning your day, sharing or alternating use of space, being aware of others' needs or just doing things a little differently.
- **Share out household tasks** - it may help to share out household tasks such as washing up, cleaning and food shopping. Having a daily routine may help us to feel more in control, at a time when we have lost a lot of control over our daily lives.

Keep talking and listening

- **Create a time each day to express** - it may be to agree a time each day when everyone in our home can say how they are feeling - for instance, it could be what we have found most difficult and what we are grateful for that day.
- **Allow a space to share and listen without judgement** - sharing feelings, without fear of being criticised or told off, can help us feel calmer and closer to each other. It may help to remember that everyone is affected by the COVID-19 situation and may be feeling more anxious and perhaps more irritable than usual.

From the Relate Website:

Maintaining your relationship with your partner

- Let your partner know things you appreciate about them
- Consider putting big and difficult conversations on hold while you deal with the current situation – this is especially true if one of you is ill or thinks they may have symptoms.
- If you've been arguing with your partner over a particular issue, consider calling a truce during this period to make living under one roof more bearable.
- Try to understand if your partner needs to prioritise other people at the moment (e.g. elderly or vulnerable relatives)
- If you are both working from home try to take turns and share – e.g. the most comfortable room to work in.
- Use your once a day exercise to get some space from one another if necessary.

Avoiding fall-outs

Treat each other with kindness especially when the outside world can feel threatening. If you are self-isolating you are likely to have a lot more time on your hands. Think about how you can use this time in a way that will help the family / you as a couple in the longer term.

If you're getting frustrated with others in the house, it might be an idea to share how you're feeling by getting in touch with a trusted friend outside.

Choose your battles and weigh up if they are worth it at this time.

Remember that children will learn from how you deal with conflict. Keep this in mind when you are all under one roof together.

Understand that with the best will in the world, rows are quite likely in these circumstances. It's how you deal with them that counts - e.g. is there a possibility of forming a truce.

Enhancing your own effectiveness in relationships with assertiveness skills (the material is drawn from the Interpersonal Effectiveness Module in DBT)

These are skills to help head off conflicts, prevent resentments from building up, asking others for help, say no when necessary, ask for what you need in a way that does not alienate others.

GUIDELINES FOR BEING EFFECTIVE: ASKING FOR WHAT YOU NEED

A way to remember these skills is to remember: **DEAR MAN**, where each letter stands for a step needed to get what you want i.e., D stands for Describe, E for Express etc.

DESCRIBE

Describe the situation (if necessary). Stick to the facts and resist using judgmental statements. For instance:

"This is the third time this week that you've asked me to lend you money."

EXPRESS

Express how you feel or what opinions you have about the situation clearly. Don't expect the other person to read your mind or know how you feel. Give a brief reason for making your request.

"I'm short of money so late that it is really hard for me. But I also like to be able to help you out, and it is hard for me to say no."

ASSERT

State clearly and directly what you want, whether that is asking for something or saying no to a request. Don't expect the other person to know what you want them to do if you don't tell them (don't expect them to mind read). Don't tell others what they "should" do.

"I have to say no this time; I can't lend you cash so often."

REINFORCE

Reward people who respond positively to you when you ask for something, say no or express an opinion. Sometimes it helps to reinforce people before they respond to your question by telling them the positive effects of getting what you want or need.

"Thanks for being so understanding. I really appreciate it."

STAY MINDFUL

Keep your focus on your objectives in the situation and maintain your position. Don't be distracted on to another topic.

There are two helpful techniques for staying mindful:

1. **Broken Record.** Keep asking, saying no or expressing your opinion over and over. You don't have to think of something new each time, just keep saying the exact same thing. Keep a mellow tone of voice, and gain strength from maintaining your position.
2. **Ignore.** If the other person attacks, threatens or tries to change the subject, ignore. Just keep making your point regardless of their attempts to divert you. If you respond to their attacks, you have allowed the other person to take control of the situation. If you want to deal with the attacks, then deal with them later.

APPEAR CONFIDENT

This comes across in the tone of voice, physical manner, use of eye contact. Try to avoid stammering, whispering, or staring at the floor. Even if you are not feeling confident hold your body and voice in a way that conveys confidence. How confident to act in a situation is a judgement call. There is a fine line between appearing arrogant, and appearing too apologetic.

NEGOTIATE

Be willing to give to get. Offer and ask for alternate solutions. Reduce your request.

If you are trying to say no to something, maintain your no, but offer to do something else or solve the problem another way. A helpful skill here is "turning the tables." Turn the problem over to the other person, ask them what they would do in your shoes (i.e., try to generate alternative solutions).

"What do you think we can do?" "I am not able to say yes, but you really seem to want me to. What can we do here?"

DIFFICULT SITUATIONS

Some people have really good skills themselves, and keep refusing your legitimate requests, or they keep pestering you to do something you don't want to do. In such instances, use the same "DEAR MAN" skills, but change the focus to the current interaction.

1. **Describe** the current interaction. "You keep asking me over and over again even though I have already said no." Avoid blaming the other person, i.e., don't say "you just don't want to hear me"
2. **Express** your opinions or emotions about the interaction. "I'm not sure that you understand what I am asking?" "I'm starting to feel angry about this."
3. **Assert** your wishes. When the other person is refusing a request suggest that you put off the conversation to another time. Give the person another chance to think about it. If they are pestering you, ask them to stop.
4. **Reinforce**. When saying no to someone who keeps asking, suggest that you end the conversation. Use relationship effectiveness skills to maintain or improve a relationship, while you are trying to get what you want.

RELATIONSHIP EFFECTIVENESS: USEFUL TO HOLD IN MIND FOR MAINTAINING AN IMPORTANT RELATIONSHIP

These skills can be used in combination with the DEAR MAN skills described above when it is important to maintain a good relationship with the other person.

A way to remember these skills is the word **GIVE**:
Gentle, Interested, Validating, Easy manner

BE GENTLE

People tend to respond to gentleness. Avoid attacks, threats, and judgmental statements:

- *No attacks*. This one is pretty clear. People won't like you if you threaten them, attack them or express much anger directly.
- *No threats*. Don't make statements like "I'll just leave then if you..." Try to tolerate no to requests. Stay in the discussion even if it gets painful, and then exit gracefully.
- *No judging statements*. Don't use name calling, shoulds/shouldn'ts, or implied put downs in voice or manner. No guilt trips.
- *Take responsibility for your feelings*. People respond much better to requests if you take responsibility for your feelings using "I" statements instead of "you made me feel..." statements. For example, it is much better to say "I felt disappointed when you did not respond to my call" rather than "you made me feel sad".

ACT INTERESTED

This involves being interested in the other person. People tend to feel better if you are interested in them, and if you give them time and space to respond to you.

Listen to what they have to say (i.e. share the air time). Don't interrupt or talk over the other person. Be sensitive to the other person's desire to have the discussion at another time if that is what they want. Be patient.

VALIDATE

Be non-judgmental, out loud. Validate the other person's feelings, wants, difficulties and opinions about the situation. Find the "grain of truth" in what the other person is saying. Try to figure out what

problems the other person might be having with your request, and then acknowledge their feelings or problems.

"I know that you are very busy, but..."

"I can see that this is very important to you...."

"I know that this will take you out of your way a bit...."

This is a good skill to practice even if no conflict situation arises. More than any other skill, this one has the potential to affect the quality of relationships.

USE AN EASY MANNER

Try to be light-hearted. Use a little humour. Smile. Ease the other person along. This is the difference between soft sell and hard sell. People don't like to be bullied, pushed around or made to feel guilty.

DIFFICULT SITUATIONS

GIVE skills can make even difficult situations a bit more palatable. For instance, there will be times where you have to stand up for yourself and allow the other person to be angry, sad or disappointed.

"I know that you are disappointed that I have responded to your request in this way. I am going to have to live with you feeling disappointed in me for now."

DEAR MAN skills also double as relationship effectiveness skills. When you use them effectively you are clear about what you need, want and are willing to do for others in return. In essence, you make it easier for the other person to know what you want and how to please you. This removes the burden of always trying to guess what you want or need, and increases the chances of them "getting it right."