THE DEPRESSION PREVENTION COURSE

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Introduction to the 1998 Edition

This is the 1998 version of the Depression Prevention Course. The original version was developed in 1983 for the Depression Prevention Research Project. It is intended to be used by individuals at risk for depression, but not yet meeting full criteria for major depression. The course teaches methods to gain greater control over one’s mood by using methods developed in the treatment of depression, and teaching them to individuals before they need treatment to prevent their crossing the threshold into a major depression. It uses many of the ideas described in the book Control Your Depression, which was revised in 1986 (Lewinsohn, Muñoz, Youngren, & Zeiss, 1986). This book was itself based on a randomized controlled trial which tested three methods to treat depression: increasing pleasant activities, social skills training, and cognitive approaches (Zeiss, Lewinsohn, & Muñoz, 1979). The theoretical framework on which these methods were based was social learning theory (Bandura, 1977).

The current version is faithful to the original. The Depression Prevention Course has been reformatted, fonts have been modernized, and minor editorial changes made. I want to acknowledge my sincere thanks to Sonia Gálvez for her untiring word processing efforts to produce the 1998 version. We decided to produce this revised version because, after 15 years, the course is still being requested by colleagues across the world. For example, it was chosen as one of the interventions in a randomized clinical trial being conducted in several European countries (Dowrick et al, in press). It has been translated into Korean, Japanese, and Mandarin by Dr. Joe Yamamoto and colleagues at the University of California, Los Angeles (Yamamoto et al., 1997). In 1994, the Depression Prevention Course received the National Mental Health Association’s Lela Rowland Prevention Award (Muñoz, 1997). We are happy to continue to make it available at no cost. Please do provide the correct reference for the source of the materials, namely Muñoz (1998). We also appreciate receiving information about its effectiveness in diverse populations.

Our own work has demonstrated that the Depression Prevention Course is effective in reducing depression levels in medical patients. And it appears that this effect is mediated by changes in participants’ thinking and activity patterns, as theorized (Muñoz, Ying, Bernal, Pérez-Stable, Sorensen, Hargreaves, Miranda, & Miller, 1995). Its ability to reduce number of new cases in individuals who do not initially meet criteria for major depression has not yet been conclusively shown. (The first and, so far, only study to show a significant difference in number of new cases of clinical depression has been published by Clarke and colleagues, 1995, with a similar intervention, also based on Control Your Depression, with a sample of high school adolescents.) In our own study, out of 150 medical patients randomized to the course or control conditions, 139 were followed at one year. Four participants in the control condition developed a major depressive episode, compared to two in the experimental condition. Of the latter two, one
had come to no sessions, and the other to two out of eight. We find this pattern of results encouraging, but, given the relatively small number of new episodes, the results were not statistically significant.

Colleagues interested in details of the Depression Prevention Research Project are referred to The Prevention of Depression: Research and Practice (Muñoz & Ying, 1993). This book is the most complete description of the theoretical and conceptual background of the study, the design, the results, and suggestions for future research. In addition, we have published several other reports: The rates of underrecognition and misdiagnosis of depression in primary care settings (Pérez-Stable, Miranda, Muñoz, & Ying, 1990), the characteristics of our screening scales for depression (Miranda, Muñoz, & Shumway, 1990), the relationship between stress and utilization of medical services (Miranda, Pérez-Stable, Muñoz, Hargreaves, & Henke, 1991), a review of the depression prevention research field (Muñoz, 1993), and a report of the effect of the intervention on those with significantly higher depression symptoms, but not meeting criteria for major depression -- sometimes called subthreshold depression, or minor depression (Miranda & Muñoz, 1994).

In 1985, as a result of our finding so many primary care patients at San Francisco General Hospital who already met criteria for major depression, but were not being treated for it, we began the Depression Clinic, a bilingual (Spanish-English) treatment, training, and research clinic offering individual and group cognitive-behavioral treatment. We adapted the Depression Prevention Course for use as a group treatment manual and lengthened the group to 12 sessions: three four-session modules focusing on pleasant activities, social skills, and cognitive approaches (English version: Muñoz & Miranda, 1986; Spanish version: Muñoz, Aguilar-Gaxiola, & Guzmán, 1986). The original group of therapists consisted of me and two Clinical Psychology Training Program Fellows under my supervision, Jeanne Miranda and Sergio Aguilar-Gaxiola. In addition, Jacqueline Persons and Charles Garrigues joined our group as supervisors for trainees who provided services at the clinic. The clinic provided bilingual therapy at no cost to San Francisco General Hospital patients, and, in 1995, became integrated into a new outpatient service called the Division of Psychosocial Medicine. Out of our work in the clinic, we have published several articles related to the effectiveness of our treatment with very low-income, predominantly minority medical patients. In brief, the cognitive-behavioral methods we use appear to produce clinically and statistically significant improvements in our patients, but not to the degree reported in randomized controlled trials with white populations of higher socioeconomic status. The most comprehensive of our reports is Organista, Muñoz, & González (1994). We have also published articles on how to provide cognitive-behavioral therapy with Latinos (Organista & Muñoz, 1996; Organista & Dwyer, 1995).
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The Depression Prevention Course has also been adapted for work with substance abusers. The major line of research in which it has been used in randomized trials is with smokers (Hall, Muñoz, Reus, & Sees, 1993; Hall, Muñoz, & Reus, 1994; Hall, Muñoz, Reus, Sees, Humfleet, Duncan, & Hartz, 1996). We have also used it in a randomized trial via the mail with Spanish-speaking smokers, with good results (Muñoz, Van-Oss Marin, Posner, & Pérez-Stable, 1997). A pilot study with Spanish-speaking methadone maintenance patients also showed encouraging results in terms of reduction in depression levels (González, Muñoz, Pérez-Arce, & Batki, 1993).

We believe that to address the major public health problem that depression represents, we will need to combine prevention and treatment services for major depression (Muñoz, 1995), with a focus on increasing individuals’ ability to regulate their mood (Gross & Muñoz, 1995). Major reports on this topic from national bodies, such as the Agency for Health Care Policy and Research (Muñoz, Hollon, McGrath, Rehm, & VandenBos, 1994) and the Institute of Medicine (Muñoz, Mrazek, & Haggerty, 1996), recommend that efforts at treatment for depression and prevention research be increased.

In the 1900's, the mental health field began to redefine the emotional problems that have plagued humanity since its beginnings as mental disorders, amenable to study and treatment. As we end the twentieth century, we have been able to develop a diagnostic system that is relatively reliable, and which is amenable to continual improvement in terms of validity. Several treatments have been developed, particularly those of a pharmacotherapeutic and psychotherapeutic nature, which have clearly been shown to be effective in ameliorating acute episodes of major depression and other disorders. However, we have done very little in terms of preventing recurrence after an acute episode abates, and even less in terms of preventing the onset of major depression or other disorders. The prevention of mental disorders will be one of the major scientific advances of the twenty-first century. We hope the Depression Prevention Course will contribute to this new frontier in the mental health field.

Ricardo F. Muñoz, Ph.D.
San Francisco, CA
February, 1998
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Introduction to the 1983 version

This is the 1983 version of a syllabus developed for the Depression Prevention Research Project. The theoretical roots of the syllabus stem from social learning theory as described by Albert Bandura. The specific techniques come primarily from the work of Peter Lewinsohn, with whom the author did his doctoral dissertation. These techniques were collected in published form in the book Control Your Depression by Peter M. Lewinsohn, Ricardo F. Muñoz, Maryann Youngren, and Antonette Zeiss (Prentice-Hall, 1978). Instructors should be familiar with this book, which is referred to throughout the Lecture Notes in Part II.

The present syllabus was developed as part of a research program designed to study the possibility of preventing unipolar depression in adults. The author believes that the literature provides much support for the notion that cognitive and behavioral approaches are effective in the treatment of depression with adults. The educational nature of these approaches makes them easily adaptable to a preventive intervention modality. The hypothesis being studied is that learning these skills prior to becoming depressed will have a protective effect, reducing the risk of later clinical depression.

In 1981, with the support of a Faculty Development Award to the author from the University of California, San Francisco, a pilot study was conducted (in Spanish and English) for which the 1981 version of the course was developed. In addition to the author, Steve Batki, James Dilley, Roberto Gurza, Hector Rivera, and Michael Sam-Vargas served as instructors for the courses offered. Their suggestions helped to shape the present version of the course, and they are gratefully acknowledged.

In 1983, the author received a grant for the Center for Prevention Research of the National Institute of Mental Health (Grant No. 37992) to conduct a randomized controlled prevention intervention trial focused on depression and on medical outpatients at San Francisco General Hospital. The study is presently in its eighth month, and therefore no results are yet available. As of now, the courses have been taught by Yu-Wen Ying and the author. Dr. Ying’s suggestions and comments have also been incorporated into the present syllabus and are sincerely acknowledged.

The present syllabus is a working document. It is being made available in a limited manner to researchers working in the area of depression prevention who have asked to examine it for consideration in their own studies.

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Ricardo F. Muñoz
University of California, San Francisco
Department of Psychiatry
San Francisco General Hospital
San Francisco, California 94110

February, 1984
PART I. OUTLINES FOR PARTICIPANTS
THE DEPRESSION PREVENTION COURSE

CLASS 1 -- INTRODUCTION

1. The purpose of this course:

   To teach ways to control one’s mood better, in order to prevent serious depression.

   a. “Prevention” in this class means doing things which will make it less likely that one will get seriously depressed.

   More specifically, we are trying to accomplish three things:

   - to reduce the number of times that one has a serious depression:
   - if one does become depressed, to reduce the duration of the depressive episode; and
   - if one does become depressed, to reduce the intensity of the depressive episode.

2. What is depression? It can be either:

   a. A feeling that everyone has at some time or another; or

   b. A symptom of an emotional problem, which also includes:

      1. Feeling “blue”, sad, numb, or irritable
      2. Not feeling like doing anything, feeling tired all the time
      3. Problems in getting along with people
      4. Feeling guilty, feeling one deserves to be punished
      5. Feeling burdened by too many responsibilities
      6. Physical symptoms, such as

         - no appetite,
         - problems with sleep,
         - aches and pains.

3. How common is depression?

   Very common.

   All adults have felt depressed at some time during their lives. Generally, however, these feelings of depression are not very serious, or very lasting.
In community surveys, about one out of five adults reports high levels of depression.

About one out of six adults in the U.S. become depressed enough to need treatment at some time during their lives.

In the General Medicine Clinic at San Francisco General Hospital, over half of the patients report high levels of depression.

This course was tested with patients in the General Medicine Clinic who wanted to learn about how to control their own mood, and who did not need treatment for depression at the time.

This is an educational course. It is not therapy. It is not treatment, and it is not intended to be used instead of treatment.

We believe that learning to control one’s mood will not only help one feel good, but that it might also have a positive effect on one’s physical health.

Feeling better may also make it easier for people to take care of their everyday problems, and to avoid unnecessary suffering.

4. How can one deal with depression?

There are many ways. The way we will teach in this class is based on SOCIAL LEARNING THEORY. Social learning theory is a way to think about human behavior.

In other words, it is a way of thinking about:

- what “makes people tick”, or

- why people feel the way they do and act the way they do.

Social learning theory says that:

a. People learn to think, act, and feel in certain ways.
b. These three human abilities influence each other all the time:

Thoughts

Actions          Feelings

By learning which thoughts and actions influence our feelings, we can learn to get more control over our feelings.

To learn to control our behavior, we need to learn

1) What comes before the behavior

For example: Just before you start feeling depressed, what kind of things are you doing?

- Which people are you with?
- Which places are you in?
- What kind of thoughts are you having?

2) What comes after the behavior

For example: After you get depressed, do nice things happen to you?

- Do your friends or family treat you nicer?
- Do you get to put off doing things that are hard?
- Do you give yourself special treats?

3) What happens during the behavior

Do you talk to yourself in ways that make you more depressed?
5. Are there other SELF-CONTROL strategies?
   a. Rewarding yourself when you do what you have decided to do
   b. Step-by-step change
   c. Learning by seeing how others do it
   d. Keeping track of what you do and how you feel
   e. Writing down your plans for what you want to change and how you will reward yourself.

FROM BOOK-LEARNING TO REAL LIFE:

1. How do I feel each day?

   Do the Daily Mood Graph this week. DO IT EACH DAY.
   About one hour before you go to bed, think over the day and decide what your mood was like on the average today. The number “1” will stand for the worst possible mood you can imagine, the number “9” for the best mood you can imagine. Write down your mood score and the date, then circle the number that matches your mood score for that day in the graph.

   (An easy way to remember what the numbers mean is to tell yourself that

   “1” means feeling very low,
   “5” means feeling just average, neither low nor high, and
   “9” means feeling very high.)
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CLASS 2 -- HOW THOUGHTS INFLUENCE MOOD

REVIEW: Depression; Social Learning Theory; Self-Control
         The Daily Mood Graph: How was it filling it out each day? Any surprises?

IN-CLASS EXERCISE: RELAXATION

1. THOUGHTS AFFECT MOOD: Specific thoughts make it more or less likely that you will become depressed.

2. Working with thoughts: Good points and bad points.
   Good points: They are always with you.

   Thoughts are your internal environment.
   You can work on them anytime, anywhere.
   They are mainly under your control and no one else’s.
   No one can directly change the way you think.

   Bad points: Taking thoughts for granted -- not being aware of them.
   No one else can see whether you are changing them.

3. Working with thoughts:
   By “thoughts” we will mean “sentences we tell ourselves”.

4. Learning to recognize different types of thoughts:

   a. CONSTRUCTIVE vs DESTRUCTIVE thinking
      Constructive thinking “puts you together”
      Example: “I can learn to control my life to get more of what I want”.
      Destructive thinking “tears you apart”, “destroys you”
      Example: “I am no good,” “Nothing will ever turn out right for me.”

   b. NECESSARY vs. UNNECESSARY thinking
      Necessary thinking helps you do what you have to do.
      Example: “I must remember to put gas in the car.”
      Unnecessary thinking doesn’t change anything (no matter how much you think).
      Example: “There is going to be an earthquake any day now.”

   c. POSITIVE vs. NEGATIVE thinking
      Positive thinking helps you feel better.
Example: “Things are really rough right now, but at least I am doing something about them.”
Negative thinking makes you feel worse.
Example: “It’s no use.”

5. Learning to recognize typical thinking errors we make when we are depressed:

a. **Exaggerating.** Exaggerating problems and the possible harm they could cause, and underestimating one’s ability to deal with them.

b. **Overgeneralizing.** Making a broad, general statement that emphasizes the negative, such as “Nobody likes me.”

c. **Ignoring the positive.** Being impressed by and remembering only negative events.

d. **Pessimism.** Believing that negative things are more likely to happen and that positive things are less likely to happen.

e. **Blaming oneself.** Thinking that negative things that happen are always and entirely one’s fault.

f. **Not giving oneself credit.** Thinking that positive things that happen are always either just luck or somebody else’s doing, and never the result of one’s efforts.

These thoughts and other negative thoughts tend to be automatic, and unreasonable, but appear true or plausible when you are depressed.

The more uncritically they are accepted, the worse you feel.

6. KEEPING TRACK OF THOUGHTS:

**Making lists to get started.**

Think back on the thoughts you have had in the last month. Do they fit any of the categories we mentioned? Think about the people you know. From the way they talk, what kind of thoughts do they seem to have? (Pick some positive-thinking people and some negative-thinking people.) Now let’s make a list together.
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7. Getting a “baseline” -- tracking important thoughts during the day.

Learning to use 3 x 5 cards.
Writing down important thoughts at breakfast, lunch, dinner, and bedtime.
Writing down thoughts when you notice that they are bothering you or making you feel good.
Remember: AImportant A thoughts are those thoughts that affect your mood, either in a positive or a negative direction.

FROM BOOK LEARNING TO REAL LIFE:

1. How do I feel each day? Continue the Daily Mood Graph.
2. Learning to relax. Practice relaxing deeply once or twice a day.
3. Keeping track of thoughts. Use a 3 x 5 card each day. Write down the thoughts you have. Bring them in for the next class, to discuss the types of things that are in your mind most of the time. (You do not have to turn the thoughts in, and you don’t have to mention any thoughts which you feel are too personal in class.)

The best way to record thoughts in 3 x 5 cards is to mark one side with a “+” (for positive thoughts), and the other side with a “-” (for negative thoughts). This way, you begin to learn to tell the difference between them.
CLASS 3 -- LEARNING TO CHANGE YOUR THOUGHTS

REVIEW: The purpose of the course.
Thoughts affect mood.
You can learn to use your thoughts to affect your mood on purpose.
The Daily Mood Graph.
Try putting down the number of positive and negative thoughts you tracked each day next to your mood score. Does your mood change according to the number of positive thoughts or the number of negative thoughts?

Some ways to change your thoughts:

1. **Priming**: A way to get yourself to think about your good points.

   To get a water pump going, you sometimes have to put some water in from the top. When one starts feeling down, sometimes it is hard to begin thinking positive things. Therefore, one can make oneself write down a list of positive things about oneself and one’s life, put one such thought on each of a number of 3 x 5 cards, and take one out at certain times during the day, to get used to remembering that one has nice qualities and that there are nice things in life. After a few days, one can start putting in “wild cards”, that is, cards without a thought, and you have to come up with a positive thought on the spot. This technique helps to increase the number of positive thoughts you have during your day.

2. **Self-reward** ("self-reinforcement")

   One of the nicest things that people can do for us is to compliment us on things we do well. We really like it when someone notices something we have accomplished, and that perhaps took a lot of effort. Hearing such rewarding words can help us feel better.

   Since we often do things that no one notices, it can also help us feel better if at least we ourselves notice what we have done, and give ourselves a pat on the back. Many depressed people do not give themselves credit for
things they do. Many don’t even notice how much they actually do during their day.

Mental self-rewards can be saying to oneself things like: “Well, that was a tough job, but you did it!”, or “You are a good mother, you really care for your children,” or “I am learning to get more control over my life.”

3. **Thought Interruption**: breaking disturbing chains of thought.

There are times when we get into a rut with a certain thought, usually a negative one, which keeps on bothering us throughout the day, making us feel bad. It would be good to learn how to stop such thoughts from ruining our mood. There are a number of techniques that have been used: one is to “yell” (in your mind) the word “Stop!” and shift your attention to whatever else it is that you are doing; another is to tell yourself “This thought is ruining my mood. Let’s move on to another”; a third (especially good if it is a “necessary” thought that you have to do something about later) is to write it down to think about later.

4. **Worrying Time**:

As we said above, there may be thoughts that are necessary and that you cannot ignore altogether. On the other hand, thinking and thinking about a problem will generally not take care of the problem, and can use up all your energy and attention, so that you begin to do badly in other parts of your life. If you have a big problem at work, you might make your family miserable by worrying about it all the time, because you don’t concentrate in your work. Instead of having just one big problem, you can turn it into two. (Or even three, if you start ruining your health.)

One way to avoid this is to begin practicing setting up “obsessive time” during which you will do nothing else but devote your entire attention to the problem that is bothering you. Choose a quiet place and a specific amount of time (10 minutes to 30 minutes a day is as long as one can think of any problem productively, anyway) and do nothing else during that time (no talking, reading, eating, sleeping) but consider the problem and try to come up with a solution. At every other time during the day, use “thought interruption” (see 3., above) to put off the obsessive thought until you can give it your full attention.

5. **The Blow-up Technique**:
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This technique involves blowing up a worry out of proportion to minimize its impact. For example, if you are worrying without good reason about not being a good person, you might imagine being put on the front page of the newspaper with the words “This is a bad person” written next to you. The technique works best if you can exaggerate the worry so much that it becomes ridiculous and funny. If you can chuckle at your mental image, you have been successful at using it. (The point here is that worrying about certain things does nothing to solve them. The best thing to do is to stop worrying about them, and if something can be done, doing it.)

NOTE: Do not use this technique with worries that could become as bad as you can imagine.

6. “The worst that could happen”:

This technique does not rely on humor. It involves merely thinking through the worst that will happen if your fears come true. For example, if you are really worried about meeting a certain deadline, and if your fear is getting in the way of your getting it done, perhaps thinking about the fact that the worst that will happen is that someone will be angry at you for some period of time may reduce your fear enough to let you work well.

7. Time projection:

Sometimes when we get depressed, it seems that things are terrible and that they will always be terrible. There is a feeling that we are stuck behind a thick, heavy curtain, which hides the future, and which we will never go through into a better time than the one we are in. As such, it is helpful to break through that curtain by imagining ourselves moving forward in time to a time when things will be better. (This is not “just kidding ourselves.” Any one has had times in our past when we thought we wouldn’t be able to make it, that we would never get over some hurt, pain, or suffering, and yet we have all made it, we have all survived those bad times. Even if some pain remains around some memories, the pain tends to get less with time.)
8. The pause

(“Time out”): There are times when the best thing to do is to “hold everything” and let our thoughts and anxieties flow by without our actively engaging them. This is a kind of mini-meditation, in which you let your mind rest even for a few seconds, allow yourself to feel the experience of being relaxed, of being still, at peace, tranquil. This is particularly helpful when you are feeling hurried, having a hectic day, or feeling overwhelmed. Just knowing that you can feel at peace can sometimes give you some energy to face your day again.

9. Self-instructions:

Talking to yourself isn’t always crazy. We all do it. It can be like having a coach at your side, giving you directions. You can remind yourself to use techniques. You can remind yourself of how you want to handle things.

10. Relaxation practice

11. Review of types of thoughts we should recognize

CONSTRUCTIVE vs. DESTRUCTIVE thinking
NECESSARY vs. UNNECESSARY thinking
POSITIVE vs. NEGATIVE thinking


“It is a dire necessity to be loved or approved by virtually everyone”
“One should be thoroughly competent and achieving to consider oneself worthwhile”
“Certain people are bad and wicked and should be severely blamed and punished.”
“It is awful and catastrophic when things are not the way one wants them to be.”
“Unhappiness is externally caused; we cannot control our sorrows and problems.”
“If something is dangerous or fearsome one should worry constantly about it.”
“It is easier to avoid than to face certain difficulties and responsibilities.”
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“One should be dependent on others and needs someone stronger than oneself on whom to rely.”
“One’s past history determines one’s present behavior; if something strongly affected your life, it will always affect it.”
“One should become quite upset over other people’s problems and disturbances.”
“There is invariably a right, precise, and perfect solution to human problems and it is catastrophic if this solution is not found.”

The A-B-C-D method: when something disturbs you, ask yourself if it is because you are using a belief or an idea like the ones above.

A is the Activating Event (what happens)
B is the Belief or the self-talk (what you tell yourself about what happened)
C is the Consequence (in this case an emotional consequence)
D is the way you Dispute (argue with) your belief or self-talk

Example:

A: Someone says the soup you cooked is too salty.

B: You begin to feel terrible. The rest of the evening might be ruined.

Ask yourself if there is a belief involved that is making you feel terrible. (The sound of the words or even the exact meaning of the words cannot make you feel terrible. It must be something you are telling yourself in addition.)

C: Some possibilities are:
   “It is a dire necessity that I be approved by the person who said it.”
   “I should be thoroughly competent to be worthwhile.”
   “It is awful when things are not the way I want them to be.”
   “My present unhappiness is caused by the soup being salty. I have no control over how I will feel the rest of the evening.”
   Plus: “I should never make a mistake.”
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Once you have figured out which thoughts or beliefs might be causing your bad mood, you can argue with them, that is, Dispute them:

D: “It is not a dire necessity that this person approve of my cooking.”

“Even if I am not a good cook, that doesn’t mean I am not a worthwhile person. (Besides, just because this soup is salty, that doesn’t mean I’m not a good cook. Anyone can make a mistake.)”

“It would have been nice if the soup had been perfect. But it is not awful that it is not.”

“The soup is salty. That is a fact. Whether I feel bad or not depends on what I tell myself about that fact. If I tell myself that it is a minor thing, and we won’t even remember it next week, I can enjoy the rest of the evening.”

13 An argument for optimism

One of the differences between people who are depressed and those who aren’t is that depressed people tend to be less optimistic than nondepressed people.

Whether one wants to be an optimist or a pessimist is one’s choice, of course, but we would now like to make an argument why being an optimist might be better. An optimist believes that the chances of good things happening are good. That belief itself can increase the chances that good things actually happen. There is no magic involved here, just common sense. Let’s use an example to explain this.

Let’s say that two people are looking for work. Joe is a pessimist and Cathy is an optimist. Even if both of them have exactly the same qualifications, Cathy is more likely to get a job. Here’s how:

Step One: “Should I read the Want Ads?”
Joe: “No use doing it, there probably won’t be any jobs for me.”
Cathy: “Might as well give it a try.”
Result: If there is a job, of course, Cathy has at least a small chance
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of finding it. Joe has no chance at all unless he reads the Ads.

Step Two: “Should I call this number on the Ads?”
Joe: “The job doesn’t quite fit my qualifications.”
Cathy: “It doesn’t fit exactly, but it’s close. Let them decide.”
Result: If there is any chance of getting the job, Cathy’s chances are at least greater than zero, if she calls.

Step Three: “Should I show up for an interview?”
Joe: “Why be rejected again?”
Cathy: “It’s a long shot; but at least I’ll get practice doing an interview.”
Result: She will get the practice; if the job doesn’t quite fit, they might think of her for another job that fits better; if the job fits, she might get it.

As you can see, at each step, optimists increase the chances that their goal will in fact be reached. Pessimists continually reduce the chances, maybe even down to zero, by taking away from themselves the motivation to act.

Our recommendation: notice what you tell yourself about your future. If you have learned to tell yourself negative things, pessimistic things, you may be doing yourself a disservice, you may be adding to your problems. There is something called the “self-fulfilling prophecy”, which basically means that if you predict that something bad will happen, you can sometimes contribute (without meaning to) to making it come out badly.

Remember the connection between thoughts, actions, and feelings. Optimism is basically a learned pattern of thinking that good things will happen. That style of thinking influences what you will do and how you will feel. It is all connected.

FROM BOOK LEARNING TO REAL LIFE

1. The Daily Mood Graph

2. Keeping track of thoughts. Use 3 x 5 cards. one side should be marked with a (+) for positive thoughts and the other with a (-) for negative thoughts.

3. Use the techniques we discussed from now on. For this week, keep track of the techniques that you use and which you like best. Write down which ones you used each day on your 3 x 5 card. Let’s discuss which ones were most helpful next week. Try to remember in which situations you used them. Let’s make this as practical as possible.
CLASS 4 -- HOW ACTIVITIES AFFECT MOOD

REVIEW: The Daily Mood Graph
Discussion of techniques people found most useful in changing thoughts
The 3 x 5 cards. Any changes in the types of thoughts tracked this week?
Check the number of positive and negative thoughts during the days in which you had your best and worst moods

1. The fewer pleasant activities people do, the more depressed they feel.

2. The big question:
   Do you stop doing things because you are depressed?
   or:
   Do you get depressed because you stop doing things?

3. Thinking about the answer:
   It doesn’t have to be just one way or the other.
   Many things in this life influence each other.

4. The answer: The concept of the vicious cycle.
   The less you do, the more depressed you feel, the more depressed you feel, the less you do, which makes you feel even more depressed, and so on.

   Low number of activities

   More feelings of depression

5. Using this concept to control your mood better:
   Since it is hard to just tell yourself to “feel better,” that is, change your feelings by just telling yourself to do it, you can instead focus on what you do. It is easier to tell yourself to do something pleasant and do it. This should affect your mood.
The key here is to use indirect methods (but ones that are easier to control directly) to influence your mood, because it is harder to influence your mood directly.

6. What are pleasant events? Are they the same for everybody?

Pleasant events are very individually defined things. Something that someone finds pleasant may be neutral or unpleasant for someone else.

Examples of what some people consider pleasant events:

- being alone
- driving skillfully
- watching TV
- kissing
- helping someone
- shopping
- crying
- borrowing something

Pleasant events do not need to be special events (although they may be special). Most are very ordinary activities.

7. To keep your mood at a reasonably good level, you must maintain your pleasant events at an adequate level.

8. Sometimes it is hard to remember the kinds of things that are pleasant for us, especially if we haven’t done them in a long time. When we are depressed, it is even harder to remember pleasant things. To help people remember their own pleasant activities, Dr. Peter Lewinsohn of the University of Oregon and his colleagues developed the PLEASANT EVENTS SCHEDULE. We have adapted this list to our course in order to come up with an individualized list for each participant.

9. Fill out the “List of Pleasant Activities”

USING THE LIST:

10. Then write in your personalized set of activities in the “Individualized List of Pleasant Activities.”

Check all events in your individualized list at the end of each day. Write the total at the end of the list.

Do this for two weeks. Bring your list to each class to fill out a graph of your progress.
FROM BOOK LEARNING TO REAL LIFE

1. The Daily Mood Graph.
2. Tracking thoughts (on 3 x 5 cards).
3. Tracking your pleasant activities on your individualized list.
LIST OF PLEASANT ACTIVITIES

INSTRUCTIONS

This list includes 300 activities which people sometimes enjoy. By following the instructions, below, you will be able to come up with an individualized list of 100 activities which you will use during the course to increase your level of pleasant activities.

1. Read the first item
   In front of the item, you will find a blank and a parenthesis:
   ___ ( )

2. If you do not consider the item personally pleasant, leave it blank and go on to the next item.

3. If you find the item somewhat pleasant, place one “x” on the blank line, like this:
   x ( )

4. If you find the item very pleasant, place two “x’s” on the blank line, like this:
   xx ( )

5. If you have placed either one or two “x’s” on the blank line, think back and determine whether it has occurred in the last 30 days. If it has not occurred in the past 30 days, place an “x” inside the parenthesis, like this:
   x ( x )
   or like this:
   xx ( x )

TO SUMMARIZE, this is what each of the possible responses to each item means:

___ ( ): You do not find this activity pleasant
x ( ): You find this activity somewhat pleasant
xx ( ): You find this activity very pleasant
x (x): You find this activity somewhat pleasant and it has not occurred during the past 30 days
xx (x): You find this activity very pleasant and it has not occurred during the past 30 days

NOW PLEASE COMPLETE THE LIST.

YOU WILL FIND FURTHER INSTRUCTIONS AT THE END
THE DEPRESSION PREVENTION COURSE

LIST OF PLEASANT ACTIVITIES

___ (  ) Being in the country.
___ (  ) Wearing expensive or formal clothes.
___ (  ) Making contributions to religious, charitable or other groups.
___ (  ) Talking about sports.
___ (  ) Meeting someone new of the same sex.
___ (  ) Taking tests when well prepared.
___ (  ) Going to a rock concert.
___ (  ) Playing baseball or softball.
___ (  ) Planning trips or vacations.
___ (  ) Buying things for myself.
___ (  ) Being at the beach.
___ (  ) Doing art work (painting, sculpture, drawing, movie-making, etc.)
___ (  ) Rock climbing or mountaineering.
___ (  ) Reading the Scriptures or other sacred works.
___ (  ) Playing golf.
___ (  ) Rearranging or redecorating my room or house.
___ (  ) Going to a sports event.
___ (  ) Reading “How to Do It” book or article.
___ (  ) Going to the races (horse, car, boat, etc.)
___ (  ) Reading stories, novels, poems, or plays.
___ (  ) Going to a bar, tavern, club, etc.
___ (  ) Going to lectures or hearing speakers.
___ (  ) Driving skillfully.
___ (  ) Breathing clean air.
___ (  ) Thinking up or arranging a song or music.
___ (  ) Saying something clearly.
___ (  ) Boating (canoeing, kayaking, motorboating, sailing, etc.)
___ (  ) Pleasing my parents.
___ (  ) Restoring antiques, refinishing furniture, etc.
___ (  ) Watching TV.
___ (  ) Talking to myself.
___ (  ) Camping.
___ (  ) Working in politics.
___ (  ) Working on machines (cars, bikes, motorcycles, tractors, etc.)
___ (  ) Thinking about something good in the future.
___ (  ) Playing cards.
___ (  ) Completing a difficult task.
___ (  ) Laughing.
___ (  ) Solving a problem, puzzle, cross-word, etc.
___ (  ) Being at weddings, baptisms, confirmations, etc.
___ (  ) Criticizing someone.
___ (  ) Shaving
___ (  ) Having lunch with friends or associates.
___ (  ) Playing tennis.
___ (  ) Taking a shower.
___ (  ) Driving long distances.
___ (  ) Woodworking, carpentry.
___ (  ) Writing stories, novels, plays, or poetry.
___ (  ) Being with animals.
___ (  ) Riding in an airplane.
___ (  ) Exploring (hiking away from known routes, spelunking, etc.)
LIST OF PLEASANT ACTIVITIES

___ (   ) Having a frank and open conversation.
___ (   ) Singing in a group.
___ (   ) Thinking about myself or my problems.
___ (   ) Working on my job.
___ (   ) Going to a party.
___ (   ) Going to church functions (socials, classes, bazaars, etc.)
___ (   ) Speaking a foreign language.
___ (   ) Going to service, civic or social club meetings.
___ (   ) Going to a business meeting or a convention.
___ (   ) Being in a sporty or expensive car.
___ (   ) Playing a musical instrument.
___ (   ) Making snacks.
___ (   ) Snow skiing.
___ (   ) Being helped.
___ (   ) Wearing informal clothes.
___ (   ) Combing or brushing my hair.
___ (   ) Acting.
___ (   ) Taking a nap.
___ (   ) Being with friends.
___ (   ) Canning, freezing, making preserves, etc.
___ (   ) Driving fast.
___ (   ) Solving a personal problem.
___ (   ) Being in a city.
___ (   ) Taking a bath.
___ (   ) Singing to myself.
___ (   ) Making food or crafts to sell or give away.
___ (   ) Playing pool or billiards.
___ (   ) Being with my grandchildren.
___ (   ) Doing craft work (pottery, jewelry, leather, beads, weaving, etc.)
___ (   ) Weighing myself.
___ (   ) Putting on makeup, fixing my hair, etc.
___ (   ) Designing or drafting.
___ (   ) Visiting people who are sick, shut in, or in trouble.
___ (   ) Cheering, rooting.
___ (   ) Bowling.
___ (   ) Being popular at a gathering.
___ (   ) Watching wild animals.
___ (   ) Having an original idea.
___ (   ) Gardening, landscaping, or doing yard work.
___ (   ) Reading essays or technical, academic, or professional literature.
___ (   ) Wearing new clothes.
___ (   ) Dancing.
___ (   ) Sitting in the sun.
___ (   ) Riding a motorcycle.
___ (   ) Just sitting and thinking.
___ (   ) Social drinking.
___ (   ) Seeing good things happen to my family or friends.
___ (   ) Going to a fair, carnival, circus, zoo, or amusement park.
___ (   ) Talking about philosophy or religion.
___ (   ) Gambling.
___ (   ) Planning or organizing something.
LIST OF PLEASANT ACTIVITIES

___ (   ) Listening to the sounds of nature.
___ (   ) Dating, courting, etc.
___ (   ) Having a lively talk.
___ (   ) Racing in a car, motorcycle, boat, etc.
___ (   ) Listening to the radio.
___ (   ) Having friends come to visit.
___ (   ) Playing in a sporting competition.
___ (   ) Introducing people I think would like each other.
___ (   ) Giving gifts.
___ (   ) Going to school or government meetings, court sessions, etc.
___ (   ) Getting massages or backrubs.
___ (   ) Getting letters, cards, or notes.
___ (   ) Watching the sky, clouds, or a storm.
___ (   ) Going on outings (to the park, a picnic, a barbecue, etc.)
___ (   ) Playing basketball.
___ (   ) Buying something for my family.
___ (   ) Photography.
___ (   ) Giving a speech or lecture.
___ (   ) Reading maps.
___ (   ) Gathering natural objects (wild foods or fruit, rocks, driftwood, etc.)
___ (   ) Working on my finances.
___ (   ) Wearing clean clothes.
___ (   ) Making a major purchase or investment (car, appliance, house, stocks, etc.)
___ (   ) Helping someone.
___ (   ) Being in the mountains.
___ (   ) Getting a job advancement (being promoted, given a raise or, offered a better job; getting accepted to a better school, etc.)
___ (   ) Hearing jokes.
___ (   ) Winning a bet.
___ (   ) Talking about my children or grandchildren.
___ (   ) Going to a revival or crusade.
___ (   ) Talking about my health.
___ (   ) Seeing beautiful scenery.
___ (   ) Eating good meals.
___ (   ) Improving my health (having my teeth fixed, getting new glasses, changing my diet, etc.)
___ (   ) Being downtown.
___ (   ) Wrestling or boxing.
___ (   ) Hunting or shooting.
___ (   ) Playing in a musical group.
___ (   ) Hiking.
___ (   ) Going to a museum or exhibit.
___ (   ) Writing papers, essays, articles, reports, memos, etc.
___ (   ) Doing a job well.
___ (   ) Having spare time.
___ (   ) Fishing.
___ (   ) Loaning something.
___ (   ) Being noticed as sexually attractive.
___ (   ) Pleasing employers, teachers, etc.
___ (   ) Counseling someone.
___ (   ) Going to a health club, sauna bath, etc.
___ (   ) Having someone criticize me.
___ (   ) Learning to do something new.
THE DEPRESSION PREVENTION COURSE

LIST OF PLEASANT ACTIVITIES

--- ( ) Going to a “Drive-in” (Dairy Queen, McDonald’s, etc.)
--- ( ) Complimenting or praising someone.
--- ( ) Thinking about people I like.
--- ( ) Being with my parents.
--- ( ) Horseback riding.
--- ( ) Protesting social, political, or environmental conditions.
--- ( ) Talking on the telephone.
--- ( ) Having daydreams.
--- ( ) Kicking leaves, sand, pebbles, etc.
--- ( ) Playing lawn sports (badminton, croquet, shuffleboard, horseshoes, etc.)
--- ( ) Going to school reunions, alumni meetings, etc.
--- ( ) Seeing famous people.
--- ( ) Going to the movies.
--- ( ) Kissing.
--- ( ) Being alone.
--- ( ) Budgeting my time.
--- ( ) Cooking meals.
--- ( ) Being praised by people I admire.
--- ( ) Feeling the presence of the Lord in my life.
--- ( ) Doing a project in my own way.
--- ( ) Doing “odd jobs” around the house.
--- ( ) Crying.
--- ( ) Being told I am needed.
--- ( ) Being at a family reunion or get-together.
--- ( ) Washing my hair.
--- ( ) Coaching someone.
--- ( ) Going to a restaurant.
--- ( ) Seeing or smelling a flower or plant.
--- ( ) Being invited out.
--- ( ) Receiving honors (civic, military, etc.)
--- ( ) Using cologne, perfume, or aftershave.
--- ( ) Having someone agree with me.
--- ( ) Reminiscing, talking about old times.
--- ( ) Getting up early in the morning.
--- ( ) Having peace and quiet.
--- ( ) Doing experiments or other scientific work.
--- ( ) Visiting friends.
--- ( ) Writing in a diary.
--- ( ) Playing football.
--- ( ) Being counseled.
--- ( ) Saying prayers.
--- ( ) Giving massages or backrubs.
--- ( ) Hitchhiking
--- ( ) Meditating or doing yoga.
--- ( ) Seeing a fight.
--- ( ) Doing favors for people.
--- ( ) Talking with people on the job or in class.
--- ( ) Being relaxed.
--- ( ) Being asked for my help or advice.
--- ( ) Playing board games (Monopoly, scrabble, etc.)
--- ( ) Sleeping soundly at night.
LIST OF PLEASANT ACTIVITIES

___ ( ) Doing heavy outdoor work (cutting or chopping wood, clearing land, farm work, etc).
___ ( ) Reading the newspaper.
___ ( ) Being in body-awareness, sensitivity, encounter, therapy, or “rap” group.
___ ( ) Dreaming at night.
___ ( ) Playing Ping-Pong.
___ ( ) Brushing my teeth.
___ ( ) Swimming.
___ ( ) Running, jogging, or doing gymnastics, fitness, or field exercises.
___ ( ) Walking barefoot.
___ ( ) Playing Frisbee or catch.
___ ( ) Doing housework or laundry; cleaning things.
___ ( ) Being with my roommate.
___ ( ) Listening to music.
___ ( ) Arguing.
___ ( ) Knitting, crocheting, embroidery, or fancy needlework.
___ ( ) Petting, necking.
___ ( ) Amusing people.
___ ( ) Talking about sex.
___ ( ) Going to a barber or beautician.
___ ( ) Having house guests.
___ ( ) Being with someone I love.
___ ( ) Reading magazines.
___ ( ) Sleeping late.
___ ( ) Starting a new project.
___ ( ) Being stubborn.
___ ( ) Having sexual relations.
___ ( ) Going to the library.
___ ( ) Playing soccer, rugby, lacrosse, etc.
___ ( ) Preparing a new or special food.
___ ( ) Birdwatching
___ ( ) Shopping
___ ( ) Watching people.
___ ( ) Building or watching a fire.
___ ( ) Winning an argument.
___ ( ) Selling or trading something.
___ ( ) Finishing a project or task.
___ ( ) Confessing or apologizing.
___ ( ) Repairing things.
___ ( ) Working with others as a team.
___ ( ) Bicycling
___ ( ) Telling people what to do.
___ ( ) Being with happy people.
___ ( ) Playing party games.
___ ( ) Writing letters, cards, or notes.
___ ( ) Talking about politics or public affairs.
___ ( ) Asking for help or advice.
___ ( ) Going to banquets, luncheons, potlucks, etc.
___ ( ) Talking about my hobby or special interest.
___ ( ) Watching attractive women or men.
___ ( ) Smiling at people.
THE DEPRESSION PREVENTION COURSE

LIST OF PLEASANT ACTIVITIES

___ (   )  Playing in sand, a stream, the grass, etc.
___ (   )  Talking about other people.
___ (   )  Being with my husband or wife.
___ (   )  Having people show interest in what I have said.
___ (   )  Going on field trips, nature walks, etc.
___ (   )  Expressing my love to someone.
___ (   )  Caring for houseplants.
___ (   )  Taking a walk.
___ (   )  Collecting things.
___ (   )  Playing handball, paddleball, squash, etc.
___ (   )  Suffering for a good cause.
___ (   )  Remembering a departed friend or loved one, visiting the cemetery.
___ (   )  Doing things with children.
___ (   )  Beachcombing
___ (   )  Being complimented or told I have done well.
___ (   )  Being told I am loved.
___ (   )  Eating snacks.
___ (   )  Staying up late.
___ (   )  Having family members or friends do something that makes me proud of
them.
___ (   )  Being with my children.
___ (   )  Going to auctions, garage sales, etc.
___ (   )  Thinking about an interesting question.
___ (   )  Doing volunteer work, working on community service projects.
___ (   )  Water skiing, surfing, scuba diving.
___ (   )  Receiving money.
___ (   )  Defending or protecting someone; stopping fraud or abuse.
___ (   )  Hearing a good sermon.
___ (   )  Picking up a hitchhiker.
___ (   )  Winning a competition.
___ (   )  Making a new friend.
___ (   )  Talking about a job or school.
___ (   )  Reading cartoons, comic strips, or comic books.
___ (   )  Borrowing something.
___ (   )  Traveling with a group.
___ (   )  Seeing old friends.
___ (   )  Teaching someone.
___ (   )  Using my strength.
___ (   )  Traveling
___ (   )  Going to office parties or departmental get-togethers.
___ (   )  Attending a concert, opera, or ballet.
___ (   )  Playing with pets.
___ (   )  Going to a play.
___ (   )  Looking at the stars or moon.
___ (   )  Being coached.
LIST OF PLEASANT ACTIVITIES

INSTRUCTIONS

HOW TO CHOOSE YOUR 100-ITEM INDIVIDUALIZED LIST OF PLEASANT ACTIVITIES:

Once you have finished filling out the 300-item list, you will have indicated which activities you find somewhat or very pleasant. You will have also indicated which have not taken place recently, i.e., in the last 30 days.

To pick out your individualized list of 100 pleasant activities:

1. Count the items with 3 “x’s”

   \[ \text{xx}_\text{(x)} \]

   Write the total here: ________

2. Count the items with 2 “x’s”

   Those that look like this:

   \[ \text{xx}_\text{(  )} \]

   or like this:

   \[ \text{x}_{\text{(x)}} \]

   Write the total here:________

3. Count the items with 1 “x”

   \[ \text{x}_\text{(  )} \]

   Write the total here:________

4. Add the three numbers above. What is the total?: __________

5. Begin writing the items on your “Individualized List of Pleasant Activities”

   Start with the items that have 3 “x’s”, then those with 2 “x’s”, and finally those with 1 “x”.

If the total (from number 4 above) is more than 100, choose those you’d like to do most and ignore those that you know are very difficult to do. If the total (from number 4 above) is less than 100, think of and add activities which you find pleasant and are not on our list. (If you don’t come up with exactly 100, don’t worry. Just try to get as close to 100 as you can).
INDIVIDUALIZED LIST OF PLEASANT ACTIVITIES

[Insert Form with 100 lines to enter up to 100 activities, plus 14 columns to check completion of activities during two weeks.]
THE DEPRESSION PREVENTION COURSE

CLASS 5 -- INCREASING PLEASANT ACTIVITIES

REVIEW: The Daily Mood Graph
The individualized list of pleasant activities.
How was your experience tracking your individualized list?
Are the activities in the list the kind that you would like to increase?
Were there any problems in getting time to do them?

1. Planning for pleasant events: Why planning is important.
   Commitment: choice-making, priorities, perspective.
   Balancing what has to be done with what you would like to do.
   Anticipation: Solving problems that might interfere.
   Resisting demands on your time.
   Achieving a greater feeling of control.

2. Do the kinds of thoughts you have help to increase your pleasant activities?
   Which thoughts help you do the things you want?
   Which thoughts get in the way of doing the things you want?

3. Doing pleasant activities without spending much money.
   Coming up with a set of pleasant activities nearby.
   The “List of Pleasant Activities One Can Do Nearby”

4. Relaxation Practice.
   Relaxing while you are active.

5. Trying out a self-change program:
   Set specific goals for the next few days in terms of which pleasant activities
   you would like to do.
   Write out a contract for yourself.
   Remember to reward yourself for fulfilling your contract.
   Fill out: “List of personal rewards.” Then fill out: “Personal contract.”

6. Use self-talk to handle thoughts that might get in the way of your doing what
   you have planned.
   Eg: If you are asking yourself:
   “Why should I reward myself for doing pleasant things?”
   What could you tell yourself to convince yourself to go ahead and try it?

7. Discussion about getting greater control over one’s life.
FROM BOOK LEARNING TO REAL LIFE:
1. The Daily Mood Graph.
2. Tracking your pleasant activities on your individualized list.
3. Put your contract into operation this week keep records of what you do and how you reward yourself.
PERSONAL CONTRACT

I, _____________________________________ make the following agreement with myself:

GOAL 1. To increase the number of pleasant activities in order to make my life more pleasant.
This contract covers the following days:

From:__________________________
To:____________________________

During these days I will do at least _______ pleasant activities per day.

GOAL 2. During this week, I will also do the following activity from the LIST OF PLEASANT ACTIVITIES ONE CAN DO NEARBY:

_____________________________________________________

REWARDS:

1. If I meet GOAL 1 for at least 4 days this week I will reward myself with:

___________________________________________________________

2. If I meet GOAL 2, I will reward myself with:

____________________________________________________________

3. I will give myself the above rewards no more than two days following the day when I fulfill each goal.

Signed:___________________       Date:_____________________

Date Goals were met:  #1_____________ #2____________

Date Rewards were received: #1_____________ #2____________
THE DEPRESSION PREVENTION COURSE

LIST OF PLEASANT ACTIVITIES ONE CAN DO NEARBY:

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
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______________________________________________________________________________
THE DEPRESSION PREVENTION RESEARCH PROJECT

LIST OF PERSONAL REWARDS

______________________________________________________________________________
______________________________________________________________________________
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THE DEPRESSION PREVENTION COURSE

CLASS 6 -- HOW CONTACTS WITH PEOPLE AFFECT MOOD

REVIEW: The Daily Mood Graph
Tracking your individualized list of pleasant activities
Your contract: How did it work? What did you accomplish?
How did you reward yourself?
Were there any thoughts that were most helpful for you to help increase your pleasant activities?

1. Some facts about the relationship between depression and contacts with people:
Higher levels of depression are related to:
   a. Less contact with people
   b. Feeling uncomfortable with people
   c. Being more quiet, talking less
   d. Being less assertive, that is, not expressing your likes or dislikes
   e. Being more sensitive to being ignored, criticized, or rejected

2. Another big question: Does depression cause people to be less sociable, or does being less sociable cause depression?
The answer, once again, is probably both. When we feel down, we are less likely to want to socialize. But not having contact with people takes away from us a good source of happiness, so we become more depressed. When we feel more depressed, we do even fewer things with people, and this continues until we are so depressed that we spend most of our time alone.

3. Social support:
Psychologists have documented the strong effect that social support has on people’s well-being. In general, the stronger your support system, the better you will be able to face tough situations. By social support system, psychologists mean the people who are near you and with whom you share your life. This includes your family, friends, neighbors, co-workers, and acquaintances.

Two hints for reducing the chances of being seriously depressed:
   a. If your social support system is small, you may want to enlarge it
   b. If your social support system is of a good size, you may want to appreciate it and keep it strong.
THE DEPRESSION PREVENTION COURSE

How do you do this? That is what this class and Class 7 are about.

We will now go over three ideas:

- How do you come across?
- Assertion
- Increasing your contacts with people

4. How do you come across?
   Acting depressed makes you feel more depressed and makes others less friendly
   a. Your face: Do you smile once in a while? Do you make eye contact?
   b. Your body: Is it slumped? Do you look tired, worn out?
   c. Grooming: Is it appropriate for where you are at the time?
   d. Your speech: Is it too slow or too soft?
   e. Your conversation: Do you show interest in what others have to say? Or, do you ignore others or criticize them most of the time?
   f. Your attitude: Do you complain or whine a lot?

THE WAY YOU FEEL AFFECTS THE WAY YOU ACT;
THE WAY YOU ACT AFFECTS THE WAY YOU FEEL

5. Assertion: Saying what you feel appropriately
   The differences among being passive, assertive, and aggressive.
   Assertion is being able to say positive things and negative things comfortably.
   You do not always have to say what you think, but it is nice to have the choice.
   Making a list of situations in which you would like to be more assertive
   Fill out: “LIST OF SITUATIONS IN WHICH ONE CAN PRACTICE ASSERTIVENESS”

Learning to be more assertive:

a. Practicing in your mind
   1) Imagine the scene as clearly as possible (as if it were a photograph).
   2) Imagine the action starting (as if it were a movie).
   3) Imagine yourself saying something assertive.
   4) Imagine the response you get.

   If you liked how it came out, practice it again.

   If you don’t like it, try it again, changing what you didn’t like.

b. Learn by imitating others whose style you like
c. Get alternative suggestions from friends on how to handle a situation
d. When you feel ready, try out your plan in real life. See what happens. Keep on trying it until you feel comfortable.
e. Remember, try it with positive as well as negative comments.

6. Increasing your contacts with people

For some people, just deciding to increase their contact with people may be all they need. For others, a concerted effort is necessary. If this is the case for you, remember to use a contract and remember to use powerful rewards.

This is advisable because:

a. You may have some disappointments as you begin.
b. You’ll need extra motivation and energy. (It is easier to stay in a rut).
c. You may need to do some difficult things to arrange time for social activities. (Remember how planning your time can help you get things done).

You may want to review and add new items to your reward menu. Writing out the contract works best.

7. Making a list of possible pleasant contacts with people.

Fill out: “LIST OF PLEASANT ACTIVITIES ONE CAN DO WITH OTHERS”

FROM BOOK LEARNING TO REAL LIFE:
1. The Daily Mood Graph.
2. Tracking your pleasant activities on your individualized list.
3. Tracking your daily interactions (Use 3 x 5 cards).
LIST OF SITUATIONS IN WHICH ONE CAN PRACTICE ASSERTIVENESS
LIST OF PLEASANT ACTIVITIES ONE CAN DO WITH OTHERS
THE DEPRESSION PREVENTION COURSE

CLASS 7 -- INCREASING INTERPERSONAL ACTIVITIES

REVIEW:  The daily Mood Graph
          Tracking your individualized list of pleasant activities
          Tracking your daily interactions on 3 x 5 cards
          Could you identify any particularly positive types of interactions?
          Any particularly difficult types of interactions?
          Any interactions in which you wished you could have been more assertive?

1.  Increasing pleasant contacts with people when you don’t know many people:

   a.  One of the easiest ways to meet people without feeling too self-conscious is to do something that you really like doing, in the company of other people. When you are doing something you like, you are more likely to be in a better mood, and therefore, it will be easier to be friendlier to others.

   In addition, even if you don’t find anyone in particular whom you would like to get to know better, you will be less likely to feel that you were wasting your time.

   Since the main focus is the activity you are doing, and not just meeting others, there will be less pressure on you than there might be in a setting where the whole purpose is to meet people.

   Finally, if you do meet people you would like to get to know better, they are likely to be people with whom you share at least the one interest that brought you together.

   Examples: If you enjoy helping others, you may want to consider joining a group of volunteers who have gotten together to help other people.

   If you enjoy preparing food, you may want to look into groups that get together around pot lucks, picnics, and other food-related activities.

   If you enjoy sports, you may want to join a neighborhood team, or a group that goes to sports events together.

   If religion is an important part of your life, you may want to become more active in groups from your church.
THE DEPRESSION PREVENTION COURSE

Exercise: What other suggestions can the group come up with?

2. Places to meet people in the city or nearby.

Fill out: “PLACES OR ACTIVITIES WHERE ONE CAN MEET OTHERS”

3. Increasing contacts with people whom you already know.
   Phone contact can be fairly brief and inexpensive.
   Suggesting an activity can often be really appreciated by others.
   Think about how you would feel if someone thought enough of you to
   suggest doing something together.
   Do you have trouble doing this because you are shy or because you are
   afraid of how you would feel if the person said “no”?
   How would you deal with these feelings?
   Consider what you think, the effect of practice, assertive mental practice.
   Group exercise: What kind of activities would you like to be asked to do?
   Think of activities that would be relatively easy to do, that are not
   expensive, that do not take too much time (or too little time), and that do
   not require a lot of preparation or equipment.

4. Asking someone to do something in San Francisco.
   Fill out: “ACTIVITIES TO WHICH ONE CAN INVITE OTHERS”

5. Relaxation practice: Relaxing while talking with someone.

6. The importance of planning to live your life the way you want to live it:
   One of the greatest sources of problems in carrying out some of these
   ideas is that people often feel that they don’t have the time to do them.

   On the other hand, doing these things would probably help them to feel
   better, so that they could enjoy the things they “have to do” more, and
   perhaps even learn to do them faster or more effectively.

   Part of the problem in doing some of these things is that people often get
   into ruts, and once they are in them, they no longer consider whether that
   is the way they want to live.
   In preparation for our last class, next week, we will begin to think about
   our lives, and how we would like to live them.
7. What are your basic needs?
Abraham Maslow (a psychologist) listed what he thought were the “hierarchy” of human needs. (That is, a list which goes in order from the most basic to the most idealistic):

   a. Physiological needs: The needs of the body for survival, such as food, water, warmth.
   b. Safety needs: the need to guard against danger, to feel physically safe.
   c. The need for love and belongingness: to feel loved and to feel love for others, as well as to feel that you “belong,” that you are part of a group of people and have something in common with them.
   d. Self-esteem needs: a feeling of being worthwhile, of being proud of what you do and what you are.
   e. The need for self-actualization: the need to live up to your highest potential as a human being. (This potential is different for each of us).

   Group exercise: How does this list sound?
   Are there things that people would like to add to the list?
   Any other reactions?

8. What are your personal goals?

   One of the best ways to “put your life in order” is to become aware of what your goals are.
   Your goals will probably be influenced by your personal values.
   Values are general principles or personal guidelines
   Goals are specific objectives.
   Are your values and goals compatible?
   Values give meaning to goals.

   When values are in conflict one has a “dilemma.” This means that one has to choose between two equally good or bad alternatives. There is no clear-cut “better” choice. At a time like this, a conscious choice to give precedence to one of your values will make it less likely that you will feel that you are betraying your principles.
   One way to strengthen your chosen values is to choose a social support system (that is, the people with whom you spend time with) that will support the values you want to live by.
9. Types of goals:

Individual goals: The goals that have to do primarily with you alone.
Interpersonal goals: The goals that have to do with you in relation to others.

Short-term goals: The type of goal that can be put on a “to-do” list.
Long-term goals: Where would you like to be in regard to your individual and interpersonal goals 3, 5, 10 years from now? In looking at your past 3, 5, 10 years from 3, 5, 10 years in the future, what kinds of memories would you like to have:

Life goals: Your philosophy of life. If you had to tell someone what life is all about for you what would you say?

10. Destructive goals.

Perfectionism (because it is unattainable).
Considering oneself “a failure” if one isn’t “the best”.
Setting goals for others and making our happiness dependent on their reaching them.

11. Note the goals that you have already reached.
Note also the goals that require constant progress.

12. Fill out: YOUR LIST OF GOALS

Describe how you would like to think, behave, and interact with others, in order to prevent serious depression and to live a more pleasant life

FROM BOOK LEARNING TO REAL LIFE

1. The Daily Mood Graph.
2. Tracking your pleasant activities (the second set of 14 days).
3. Increasing your daily interactions.
4. Your goals.
PLACES OR ACTIVITIES WHERE ONE CAN MEET OTHERS

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ACTIVITIES TO WHICH ONE CAN INVITE OTHERS

(Remember: “Others” can include relatives, friends, neighbors, and new acquaintances)

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__________________________________________________________________
LIST OF GOALS - (Page 1 of 3)

Individual Goals

THE BASIC NEEDS (From Maslow)
1. Physiological: (Food, water, warmth, etc)
2. Safety: To feel free of continual danger
3. Love and Belongingness
4. Self-esteem: feeling pride about what you do or what you are
5. Self-actualization: Developing your potential

OTHER GOALS SUCH AS:
1. Lifestyle
2. Spiritual, religious, philosophical
3. Economic
4. Educational
5. Vocational
6. Physical activity level
7. Recreational and/or creative

WRITE DOWN THE GOALS YOU FIND IMPORTANT
(Consider the goals listed above, as well as how what has been covered in the course could help you reach your goals)

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THE DEPRESSION PREVENTION COURSE

THE DEPRESSION PREVENTION RESEARCH PROJECT

LIST OF GOALS (Page 2 of 3)

GOALS THAT INVOLVE OTHERS

1. Family Life Style
2. Friendships
3. Romantic relationships
4. Group commitments
5. Leadership roles

WRITE DOWN THE GOALS (WHICH INVOLVE OTHERS) WHICH YOU FIND IMPORTANT (CONSIDER THE GOALS LISTED ABOVE, AS WELL AS HOW WHAT HAS BEEN COVERED IN THE COURSE COULD HELP YOU REACH YOUR GOALS)

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LIST OF GOALS (Page 3 of 3)

SHORT-TERM GOALS (Things you’d like to do within 6 months)

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LONG-TERM GOALS (Things you would like to do at some point in your life)

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LIFE GOALS (Philosophies of life: What do you think is what matters most in life?)

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CLASS 8 -- PLANNING FOR THE FUTURE: PREVENTING DEPRESSION

REVIEW: The Daily Mood Graph
- Tracking your individualized list of pleasant activities
- Tracking your daily interactions
- Your goals: any reactions to writing them down?

1. Thinking preventively:
   Don’t wait until things go badly to pay attention to your well-being.
   Nourish yourself psychologically to attain “positive mental health."

| Emotional and Psychological Problems | Normal State of Mental Health | Positive Mental Health |

2. Well-adjusted people are good at:
   a. Knowing the consequences of their acts.
   b. Having many alternatives to use in any situation.
   c. Planning ahead to obtain their goals.

3. Some people say that one’s personality never changes. This is not true
   Your “personality” can be defined as:
   a. The way you react to things.
   b. The way you see the world.
   c. The way you act when you are alone or with others.

4. Some “personalities” become depressed more easily than others.
   Try out ways of thinking and behaving that will make it less likely that you will get seriously depressed.

5. You can increase your control over how you feel and how you will react to things.

6. You can be a scientist with your own life.
   You can experiment with different ways of doing things.
   You can evaluate whether you like these new ways and change them again, if you like.
THE DEPRESSION PREVENTION COURSE

7. Remember:
   a. Your thoughts affect your mood
   b. Your behavior affects your mood. (Especially the number of pleasant activities that you do).
   c. Your contacts with people affect your mood

8. Remember also: although you may not be able to change how you feel directly, you can:
   a. Change your thoughts.
   b. Increase the number of pleasant activities you do.
   c. Increase the number of pleasant contacts you have with people.

9. Placing the course and the techniques in perspective
   a. Social learning theory is a way to understand how people learn to act, feel, and think in certain ways. It does not tell us what we should strive to experience or do in our lives. As such, it is a tool to be used, not a philosophy to live by. You supply your own philosophy.
   b. The course is targeted specifically at teaching techniques that have been found helpful in the treatment of depression to people who are not presently seriously depressed, with the intention of making these tools available to them so they can gain better control of their mood in the future.
   c. The techniques learned in the course can serve as basic skills in the pursuit of one’s objectives in life. Those objectives are yours to define, however.
   d. We believe that a positive mood state can make it easier for individuals to
      1) calmly and constructively decide what values and goals to live for, and
      2) effectively pursue these goals.

10. Where have people sought goals?
    Individual knowledge and experience.
    Family and friendship: Nurturing and being nurtured by others
    One’s cultural heritage.
    Religion.
    Politics.
    Philosophy.
    Creativity.
11. Consider your “assumptive worlds,” i.e., your basic assumptions about life
What do you think life is all about?
   a. Do you see existence as friendly, threatening, or indifferent?
   b. How do you see human beings?
   c. Do you compare yourself with others? If so, do you compare yourself in a balanced way, that is, with those who are worse off than you, as well as those that are better off?
   d. Do you enjoy what you have now?
      OR
      are you always waiting to achieve the next goals before you can feel satisfied?
   e. Do you get used to what you have and begin taking it for granted?
      Or do you remind yourself to enjoy and appreciate it?

12. The final message:

Although human freedom is not absolute, humans can increase their freedom by how much they control their lives. This class has tried to teach ways to increase control over your mood by teaching you how your thoughts, behavior, and interactions with others affects your mood. We hope you will be able to use these ideas and methods to have a happier life.
# LIST OF SKILLS TAUGHT IN THE COURSE

Please list how helpful each technique was for you in helping you maintain a positive mood by placing an “X” in one of the five columns for each skill.

<table>
<thead>
<tr>
<th>Skill</th>
<th>I don’t remember using this one</th>
<th>Made me feel worse</th>
<th>Made no difference</th>
<th>Helped a little</th>
<th>Helped a lot</th>
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<tbody>
<tr>
<td>1. The explanation of Social Learning Theory</td>
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<td>2. The explanation of how thoughts, actions, and feelings affect each other</td>
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<td>3. Keeping written records of my mood each day</td>
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<td>4. Writing my positive and negative thoughts on cards</td>
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<td>5. Counting the number of positive and negative thoughts I had each day and writing down the number</td>
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<td>6. “Priming” - making a list of my positive characteristics to say to myself during the day</td>
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<td>7. Self-reinforcement - giving myself mental “pats on the back”</td>
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<td>I don’t remember using this one</td>
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8. Thought interruption -- telling myself to stop thinking a negative thought

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9. “Blow-up” technique - exaggerating a worry until it becomes funny

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10. Worrying time - setting aside a specific amount of time to worry about something and not worrying about it at other times

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11. Time projection - advancing mentally through time to a better period to get perspective on a tough situation

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12. The pause -- “hold everything” mentally and rest your mind for even a few seconds

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13. Self-instructions - talking to yourself as if you were advising a friend

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<th>I don’t remember using this one</th>
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<tbody>
<tr>
<td>14.</td>
<td>The explanation about how your mood is affected by the number of pleasant activities you do</td>
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<td>15.</td>
<td>Filling out the “List of Pleasant Activities” (with the 300 items)</td>
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<td>16.</td>
<td>Figuring out my 100-item “List of Individualized Pleasant Activities”</td>
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<td>17.</td>
<td>Keeping daily count of my pleasant events and my mood</td>
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<td>18.</td>
<td>Seeing how my pleasant events and my mood affect each other</td>
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<td>19.</td>
<td>Deep muscular relaxation training</td>
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<td>20.</td>
<td>The ideas about why scheduling my time is important</td>
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<td>21.</td>
<td>Increasing social activities</td>
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## THE DEPRESSION PREVENTION COURSE

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<th>Activity</th>
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<td>22 Increasing assertion</td>
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<td>23 Practicing in your imagination to improve assertiveness</td>
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<td>24 Learning about constructive vs destructive thinking</td>
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<td>25 Learning about necessary vs unnecessary thinking</td>
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<td>26 Learning about thinking errors like exaggerating, overgeneralizing, and ignoring the positive</td>
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<td>27 Learning about the eleven beliefs that can cause us misery</td>
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<td>28 Using the A-B-C-D method to dispute negative self-talk</td>
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<td>29 Thinking preventively trying to attain “positive mental health”</td>
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Muñoz Depression Prevention Course 1998
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<td>30. Discussion about values and goals</td>
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<td>31. Writing down my goals</td>
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<td>32. Making list of places to go nearby</td>
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<td>33. Making a contract with myself to do more pleasant activities</td>
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<td>34. Rewarding myself for doing more pleasant activities</td>
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<td>35. Our argument for optimism, suggesting that being optimistic can make it more likely that good things will happen to you</td>
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<td>36. The discussion about the five levels of basic needs, that is, the hierarchy of needs</td>
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<td>37. Having the written outlines for each class, so that you can keep them for later</td>
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THE DEPRESSION PREVENTION COURSE

I don't remember using this one  Made me feel worse  Made no difference  Helped a little  Helped a lot

_____  ______  ______  ______  ______

38. The opportunity to discuss these ideas with the group

☐  ☐  ☐  ☐  ☐  ☐

Please write down anything else about the course that either helped you or made you feel worse:

a. __________________________________________

b. __________________________________________

c. __________________________________________

Is there anything else you would like us to know about what the course was like for you? If so, please write it down here: