

# Social Anxiety in Schizophrenia

## A Cognitive Behavioural Group Therapy Programme

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# Group in progress







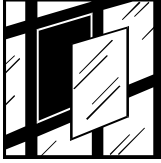
Please don't disturb...  
Thank You!!



# SESSION 1

## SESSION OBJECTIVES:

-  To familiarise programme participants to group context.
-  To facilitate and direct the clients' motivation to change.
-  To provide psychoeducation and group treatment information.
-  To initiate monitoring of perceptions of anxiety in social situations.



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# Therapist's Notes



## DETAILED CONTENTS



### ***The Approach:***

This therapist manual is designed to provide the mental health practitioner with a structured, yet flexible approach to the treatment of social anxiety in individuals with schizophrenia. The approach described in detail within the *therapist manual* has been shown to be effective as a group treatment programme. We assume that this manual will be used by mental health practitioners of varying levels of clinical experience. Therefore, it has been written to meet this varied level of need.



### ***The Therapist:***

In the course of group therapy, participants will begin to examine their interpersonal style and eventually to experiment with new behaviours. The journey which each group member embarks upon, is unlikely to be facilitated by a rigid therapist ie., one who places a strong barrier between themselves and group participants. This treatment approach provides structure, the opportunity for role play and the sharing of experiences. The therapist incorporates various roles; facilitator, coach and role model. Thus the therapist encourages a social atmosphere based on adult learning principles and the promotion of trust in the therapeutic environment.



### ***What You'll Need:***

It is advantageous to have available a: (1) white board (coloured markers), (2) pencils for group members, (3) loose leaf folders for the storage of the group members handouts (h/o) and all other group material (remind members to bring this to ALL group sessions), (4) tape recorder for taping of sessions (not necessarily required), (5) tea and coffee supplies, (6) provision of adequate area for mid session breaks, (7) hole punch, (8) clip board for each group member whilst in session, (9) 'group in progress' sign to be placed on door of therapy room.



### ***House-keeping:***

This includes discussing such aspects as where to find the toilets (if the group members are new to this environment). Additionally, the provision of breaks during the group is an important consideration. It is suggested that the group be two hours in duration, with the inclusion of a break. The duration of the break will be based on the composition of group

## EQUIPMENT/ACTIVITY

The following 'icons' are used in this manual for the following purpose:



For 'therapist' information



Suggested manner of addressing session content to group members



Group activity

**The therapist**

**What you'll need**

**House-keeping**





## DETAILED CONTENTS

members and the individual therapist's judgement. We have found that in order to compensate for attention difficulties within this population, it is recommended that drinking and eating be reserved for the session break.

### Let's begin... (30 minutes)



#### **Client Introduction:**

The formation of this group will inevitably represent a new and often frightening first experience. In order to reduce the distress typically encountered by group members in the first session, the first phase of group interaction involves an 'ice breaker'. We have found the following two structured warm-up exercises to be a gentle beginning to the group. These two exercises assist in decreasing anticipatory anxiety and permit each member to engage in brief, light and non-threatening interactions. The second of these potential ice breakers occurs in the *Self Disclosure* section.



#### *'My Shoe Ice Breaker':*

This involves asking each group member to simultaneously look down at their shoes and think to themselves, how they would describe them (colour, fit, age, etc.), and to think of a brief story which directly relates (e.g. where they were purchased, an unfortunate accident encountered whilst wearing them) to them. The therapist begins this ice-breaker, first by stating their name and then commenting on their shoes. Subsequent group members then participate by following the therapist's role as a 'shoe-describer'.



#### **Familiarisation to Group Process:**

All ideas relevant to this discussion should be brainstormed by group members using the white board to record their responses.



An initial question could be: "*What sort of group rules do each of you feel is important in the running of our group?*"



Upon gathering as many ideas as possible from the group members, it is often necessary to suggest 'other ideas' which are important in the successful running of the group.



The following points help guide the group interaction:

## EQUIPMENT/ACTIVITY

### **Client introduction**

### **My shoe ice breaker**

### **Group rules**



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**EQUIPMENT/ACTIVITY**

- *Confidentiality*  
It is preferable for all group members to feel comfortable disclosing details about their lives without concern that this information will be repeated outside the group. It is important to reiterate the ethical and legal implications of client and therapist confidentiality. This concept extends to group members. It is suggested that you ask each group member to pledge not to divulge the identities of other group members or to provide 'group information' outside of the group.
- *Use language everyone can understand*  
Sometimes professional labels become second nature to mental health practitioners. In groups it is important to describe concepts in everyday language. A possible manner of introducing this, is by providing the example of a highly accomplished academic who understands the concepts yet communicates them in an unhelpful way (e.g. excessive terminology). Inform group members that if a concept is explained by a group leader in an unhelpful manner, the group members are within their rights to ask for clarification.
- *Sessions are tape recorded – optional*  
Taping sessions can be useful for both the therapist and the client. It can help with treatment integrity and provide the client with useful feedback about their interactions and performance on some of the activities. If sessions are to be taped, remember to obtain the informed consent of each participant.
- *All members are respectful and helpful to each other*  
In order that mutual respect is enhanced within the group setting, appropriate social interactions are encouraged and the use of unhelpful terms or labels is not promoted.
- *Commitment to therapy*  
This is a closed group and as such, it is not advisable to introduce new members after the second session. It can be explained to group members that the learning of skills and strategies to increase their level of comfort in social situations is enhanced by building on information they have learned in previous sessions. Additionally, since the group does not work effectively with reduced group numbers, it is important they provide a commitment to

**Confidentiality**

**Use language everyone can understand**

**Tape record session (optional)**

**Respect**

**Commitment**



## DETAILED CONTENTS

attend all 12 sessions. One way of enhancing this commitment, is to have group members declare this in front of all other group members.

- *Breaks within each session*  
Suggested guidelines have been provided as to the length of the 'break time' within group sessions. Once again it is important for the therapist running the group to make a decision as to the length and number of break times, based on the composition of the group.
- *Attend each session and arrive on time*  
It may be useful to explain to the group that in order that they benefit from the group, it is necessary to arrive for the session at the agreed upon time. Additionally, it is important that each session is attended so as to improve the nature of learning from one of disjointedness to relative stability.
- *Telephone if can't attend*  
This is to ensure a group members lack of attendance is not unexpected to other group members or the therapist.
- *Always do your best to complete the homework*  
A suggested manner of addressing this component is: "The week has 168 hours within it, and we meet once a week, so we spend a fraction of time together. In order that the benefits of the group are enhanced, it is necessary to attempt and complete the tasks that other group members have been provided."
- *Buddy system*  
It is suggested that group members be introduced to the idea of being paired with another randomly selected group member with whom they will agree to be in phone contact each week. The purpose of the buddy system is four fold, (1) it serves to remind the group member that they are involved in a program of change that extends beyond the weekly group sessions, (2) it enhances a sense of belonging to the group and a concomitant sense of camaraderie with at least one other group member, (3) it gives them a source of support as well as additional information about the skills, procedures and assignments relating to the group, and (4) it provides in-vivo psychotherapy.  
Within the buddy system, alternate the person

## EQUIPMENT/ACTIVITY

### Breaks

### Attendance/punctuality

### Non-attendance

### Homework importance

### Buddy system



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## EQUIPMENT/ACTIVITY

who initiates the weekly phone-call. This can be a powerful exercise, in that, the person with social anxiety practices a useful social skill in a natural setting. At the discretion of the therapist there should be a periodical rotation of group members in the buddy system.

- *Weekly therapist phone call*  
To provide group members with a means of discussing difficulties with homework or group issues outside of the group, an advantageous technique which can be used is the weekly phone call with a group therapist. Additionally, it helps to promote a sense of commitment to group members and also serves as a prompt to engage in activities which were assigned at the end of the session as homework.

- ☞ Provide: Increasing Confidence In Social Situations Group h/o (H/O: 1), which provides information concerning group times and a summary of previously discussed group rules.

- 📖 *Motivation for Change*  
*Practice makes perfect:*  
At this point, the therapist introduces the need for practice outside session times. It might be useful to point out that practice involves behaving differently ie., confronting situations which have previously been difficult. Foster within the group members, perseverance and persistence, and explain that over time they will think and feel differently.

It will be important that specific tasks and activities which are assigned within the group are practiced whilst group members are outside of the group. Some of these tasks involve: reading, writing, 'thinking things through in their head', relaxation and doing things.

- 📖 Due to the importance of attempting/ completing intra-session assignments, the following guidelines are valuable to consider: Identify and prepare to overcome potential obstacles that may prevent the group member from completing assignments (in session and weekly therapist phone call)  
Obtain a verbal commitment from the client that assignments will be completed.  
Assignments should be challenging, yet not overwhelming to client.

### Weekly therapist phone call

Provide: Increasing Confidence In Social Situations Group h/o (H/O: 1)

**Practice, practice and more practice**

**Homework completion important**



## DETAILED CONTENTS

## EQUIPMENT/ACTIVITY



### *Self-Disclosure:*

In order that group members become accustomed to the process of self-disclosure it is important to ensure this is occurring in a safe environment. Although self disclosure is an important group goal, a primary therapeutic goal involves social interaction.



In order to combine these two elements, group members are provided with a handout and asked to complete the Why Change h/o (W/S: A). Upon completion, they are asked to pair up with one of the other members of the group. At times the therapist may make the pair assignments. This may involve pairing group members who do not have a strong interpersonal relationship outside of the group. Each pair is instructed to exchange sheets, read the other's answers, and to understand them as fully as possible by asking for clarification or for additional information. After each pair has interacted for 3-5 minutes, the groups re-form, and each member of a pair reads aloud his or her partner's answers to the questions. Additionally, they tell the group anything he or she has learned about the answers to each question.



Provide: Why Change h/o (W/S: A)  
(participants to complete sentences):

- a) 'Social fears limit my life by...'
- b) 'If I was not socially anxious I would be able to ...'



### *Monitoring progress:*

It is important to provide group members with a rationale for monitoring their progress. You might find it helpful to include within your rationale the following (as if spoken to the patient...):



"Firstly, it helps to stay motivated by seeing the progress forward you are making, (2) since you are learning new skills and techniques to confront your anxiety, these records will allow you to look back on the notes when you have forgotten how to do something you know is important or when you are having difficulty completing something you have done in the past, (3) helps you to identify all of your fears, and remind yourself of the manner you handled these difficulties in the past, (4) finally by keeping records and recording progress you

### **Self-disclosure**

Provide: Why Change h/o (W/S: A)

### **Monitoring progress**



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**EQUIPMENT/ACTIVITY**

become more realistic as to how you present to others“.

**Break Time** (20 minutes)

**Break-Time**

**Discussion** (20 minutes)



**Psychoeducation:**

**Psychoeducation**

You might begin the discussion with the following question:



“How many people are shy (men and woman)? You usually find approximately equal numbers of men and women, possibly even slightly more men with social anxiety.”



**Shyness**

**Always shy?**



Another discussion point:

‘Do you believe that, once shy, always shy’? People in general who are shy at a young age are usually still shy many years later. Individuals may experience ups and downs, in which their experience of social anxiety is at times a problem and at others’ not such a large problem. Shyness usually has a habit of staying around, yet that does not mean you are unable to deal with excessive shyness in an improved manner.



A further discussion point, ‘How social anxiety works’ (this can be adapted for the group members):



**Thinking Reactions:**

**Thinking reactions**

Firstly, individuals with social anxiety tend to assume that other people will think poorly of them. When they are in social situations they assume that others expect them to perform perfectly, and if they don't, they will be seen as stupid, incompetent or will feel embarrassed. Shy people tend to be quite unrealistic in their thoughts about other people in social situations. Therefore, an important lesson will be to teach group members to think more realistically about what others are thinking about them. Secondly, people with social anxiety spend a lot of time looking for possible signs from others, showing that they are doing badly. For example, they may see others yawning or frowning, which may give them a possibly incorrect message that they are boring. We only have so much attention to go around, therefore if individuals are spending all of their time looking for these signs of others' dissatisfaction or negative attention towards them, they will have little energy left to



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## EQUIPMENT/ACTIVITY

focus on the task at hand. *Third*, people with social anxiety tend to have a very negative view of the way they are coming across towards others. Thus, this is another area which may require work in the group.



### *Body Reactions:*

When people are anxious they usually act in a number of characteristic ways. This includes sweating, heart pounding, shaking, breathing fast or feeling confused. Through the use of relaxation training, group members will be better able to handle the way in which their body reacts when they are anxious.

### Body reactions



### *Acting Reactions:*

When socially anxious people go into social situations, they tend to behave in certain ways. Two of the most common actions are avoidance or escape. For example, they may turn down an invitation to go somewhere, give in to an unpleasant request to avoid conflict or not talk to an attractive man or woman they have been admiring.

### Acting reactions



A further discussion point, 'Treating Social Anxiety' (this can be adapted for the patient)



### *Treating Social Anxiety*

The three parts of social anxiety; body, acting and thinking reactions all effect each other and keep the anxiety going in a viscous cycle.

### Components of programme

The group sessions will target all three parts of social anxiety with five main techniques:

- (1) *Relaxation Exercises:* this involves learning exercises which help us control our breathing and relax our bodies.
- (2) *Role Plays:* these are practice situations that are specific to each group member.
- (3) *Thinking Changes:* this involves questioning automatic thoughts that relate to social anxiety.
- (4) *In-vivo Practice:* this involves the opportunity for practice in real life setting and is usually done in terms of a hierarchy of difficulty.
- (5) *Homework:* involves activities that take place outside of the group session.


### **Goal Setting for Week** (10 minutes)


- Use of: **Social Situations Record** h/o (W/S: B)
- ☞ Demonstrate use of monitoring: time, situation & anxiety level.





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 The ***Social Situations Record*** h/o (W/S: B) will be used throughout the program. It will change as during the progression of the group, yet will maintain a similar format. A further discussion point relates to the use of this h/o. Ask the client to keep this form at all times, whether it be on the kitchen table, in their purse or wallet or even in their back pocket.  
(this could be used with group members):

 "In order to get the hang of using the form it is most beneficial to use it whenever anxiety is experienced or very soon after, no matter how little this is. There are three columns, all with pictures above each one of them. In the first column there is room to detail the date and time. In the second column, there is room to record the situation or event in which the anxiety occurs. Keep in mind that this may not necessarily be a current event but might simply be when you were thinking of an upcoming event. In the final column, which is below the picture of what looks like an extremely frightened child, you rate the level of anxiety experienced. Where '0' would represent no anxiety at all, and the most extreme level of anxiety would be rated at a level of '100'. Just give the rating of the anxiety experienced a go, as time will be spent talking about how best to rate the level of anxiety experienced in the next session."

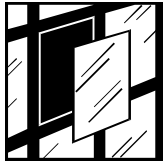
 Arrange collaboratively-convenient time for weekly phone-call to participants.

 ***Mid-week phone call:***  
Reinforce session one and the importance of homework & progress experienced. In addition, ask the group member whether any difficulties are being currently experienced.

Description of: ***Social Situations Record*** h/o (W/S: B)

**Mid-week phone call**





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# Handouts & Worksheets

# Increasing Confidence In Social Situations Group

Time:

Place:

Number of sessions:

First session:

Final session:

## **Group Rules:**

1. All things talked about in the group are to remain confidential.
2. There is to be no use of unhelpful terms or labels in the group.
3. All members are to be respectful and helpful to each other.
4. No new members to join after week 2 of the group.
5. There will be at least one break in each session.
6. Participants will do their best to attend each session and arrive on time. If you are not able to attend, then phone the therapist on:
7. There will be a 'buddy' system.
8. The therapist will phone each week to see how things are going.
9. {other group rule}\_\_\_\_\_
10. {other group rule}\_\_\_\_\_

I, \_\_\_\_\_ have read and will do my best to follow OUR  
group rules

----- (signature)

# Why Change?

The fears  
by...



of social anxiety limit my life

- 
- 
- 
- 
- 
- 

If social anxiety was not a difficulty, I could...



- 
- 
- 
- 
- 
-

# Social Situations Record -1

W/S: B

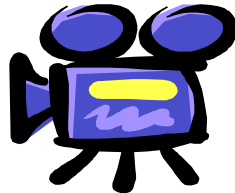
This sheet is to be used to record how you feel each time you are in a social situation. It can be a public place, travelling somewhere, any time you come in contact with other people or you are thinking of a social situation. Please bring this sheet to our next group.

The number scale *below* can be used to help you record how nervous and anxious you feel in that situation. The higher the number, the more anxious you are.

0	10	20	30	40	50	60	70	80	90	100
None		Mild		Moderate		High				Extreme



Date and time



Situation or Place



Level of Nerves or Anxiety (0-100)

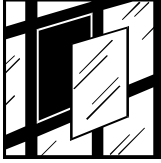
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# SESSION 2

## SESSION OBJECTIVES:

- 👉 To further extend the concept of monitoring anxiety levels.
- 👉 Provide information concerning breathing physiology and retraining.
- 👉 Introduction to thought monitoring.



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# Therapist's Notes



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Introduction To Concept of SUDS (10 mins) Due to the SUDS (Subjective Units of Distress Scale) use throughout treatment, it is necessary to spend time at the initial stages of treatment to familiarise group members to the use of this rating scale. This promotes reliability and validity of subsequent ratings. A suggested manner of addressing this component follows:

SUDS introduction

"The SUDS is a 0-100 scale with a greater number indicating increased distress. Points of reference reside at 25 (mild anxiety), 50 (moderate anxiety, beginning to have difficulty concentrating), 75 (high anxiety, thoughts of escaping), and 100 (worst anxiety experienced or imagined experiencing). Specific situations are anchored to these reference points."

If the clients' rating appears to drift and/or they display a tendency to use a portion of the scale, the therapist is able to refer back to the original anchor points.

In order to provide a confidential means of labelling personal SUDS ratings, mini 'post-it notes' with space for pre and post group ratings, may be used. At the end of the group, the post-it notes are collected by one of the therapist.

Pre-session SUDS rating (Check in SUDS)

Check in SUDS

Review (15 minutes):

Brief re-introduction of group members: It is suggested to have each member of the group briefly re-introduce themselves, as this will help facilitate cohesion with previous group members and better enable new members (2nd session becomes closed group) to feel part of the group.

Re-introduction of group members

Social Situations Record h/o (W/S: B) : This is a daily record of upcoming exposure practice and of the level of anxiety experienced. It encourages group members to self-monitor and reminds them to complete homework assignments. Additionally, it provides evidence to counter the 'typical' tendency to remember failures rather than successes. Feeling excessively anxious whilst travelling on a crowded train to a neighbouring suburb, may have more bearing and be more readily

Use: Social Situations Record h/o (W/S: B)



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discussed, than habitual journeys to the local bakery. These self-report records are particularly valuable at the time of a set-back or relapse, for review purposes. As they provide a means for individuals to accurately assess current difficulties. Additionally, they encourage clients to plan relevant practice independently, and to keep track of progress.

- In terms of the Social Situations Record h/o (W/S: B) provided last session, it is important to ensure there has been an attempt at completion and whether it has been used appropriately.

Social Situations Record h/o (W/S: B) completion attempt?

- Feeling(s) Concerning Group Attendance: Although each individual has attended the group of their own volition, it is important to address any concerns relating to future attendance. Regardless of whether there appears to be concerns raised within the group setting, it is important to discuss the advantages of a group programme. This includes: (1) taking part in an others' experience (vicarious learning), (2) taking self- control, (3) 'there are others like me', (4) public commitment, (5) encouragement through others' successes.

Group attendance concerns

- It is unnecessary to specifically mention these, however individual concerns relating to each of these should be discussed within the group.

- Personal rating for anxiety within group setting. This is done via a SUDS rating specifically related to 'attending a group'.

SUDS re: attending group setting

Calming Technique (25 minutes):

- Explanation of Breathing Physiology (this could be used with group members):
  - "Breathing is a necessity of life that most people take for granted. With each breath of air, you obtain oxygen and release the waste product carbon dioxide. If you have poor breathing habits, it is harder for you to cope with stressful situations."
  - "Improper breathing contributes to anxiety, depression, muscle tension, headaches and fatigue. Being aware of your breathing and practicing good breathing habits will help you to deal with the large amounts of anxiety you are currently experiencing."

Breathing physiology

- "You can use either (1) chest breathing or,

Schizophrenia and Co-morbid Social Anxiety





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(2) stomach breathing. Chest breathing is often the one used by people who are bothered by too much anxiety in their life. Chest breathing is shallow and often irregular and rapid. Anxious people may experience breath holding, hyperventilation, shortness of breath, or fear of passing out. The second type of breathing which is used by people who better deal with anxiety in their life, is called stomach breathing (abdominal/ diaphragmatic breathing) – used by new born babies and sleeping adults.”

### Chest or stomach breathing

📖 *Stomach Breathing:*

(this could be used with group members):

👉 “Breathe is drawn in to the lungs and exhaled as the diaphragm becomes smaller and expands. Breathing is even and not limited. The breathing system (respiratory) is better able to do its job of producing energy from oxygen and removing waste products, when a person is using stomach breathing. By knowing more about individual breathing patterns and shifting to more stomach breathing, it is possible to reduce your muscle tension and bring on more relaxation in a persons life.”

### Stomach breathing

👉 It is suggested to have clients determine whether they are a chest or diaphragmatic breather.

📖 This can be accomplished by the ‘*Awareness*’ exercise, designed for group members:

👉 “Place the hand you write with on the stomach between your lower ribs and belly button (navel). Put the other hand on the breastbone, just below the collarbones. Take a deep breath and notice:”

### Breathing awareness

- “Which hand moves the most?”
- “Did you breathe in through your mouth or nose?”



👉 “If breathing was through the nose, the stomach likely expands first and there is little upper chest movement. This would indicate a good breather.

On the other hand, if breathing was carried out quickly through the mouth, the upper chest would likely heave first and there would be little or no movement under the hand which was located on the stomach. This would indicate an unhelpful breathing style and would be unlikely to help in decreasing the anxiety experienced.”






## DETAILED CONTENTS

## EQUIPMENT/ACTIVITY


-  *Strategies for Breathing Retraining*  
(this could be used with group members):
-  "Sit comfortably, without crossing your legs. Let as much air as possible 'sigh' out of your lungs without pushing. Shoulder and upper chest relaxation is most important here. With lips together, jaw relaxed, draw air slowly in through your nose, relaxing and expanding your waist so your stomach puffs up. Let the air 'fall' out of your chest as the elastic recoil of your lower chest and diaphragm breathes air out effortlessly.

Take very small stomach breaths at first, making sure you start each in-breath with the stomach (diaphragm)."

-  "Say to yourself: **'Lips together, jaw relaxed, breathing low and slow'**. Imagine a fine piece of elastic around your waist stretching as you inhale; or think of breathing into your belt or waistband. Check chest movement using the chest / stomach technique. If you find it hard to keep breathing low and slow, place a heavy book on your stomach. This will help focus your effort."

-  *Breathing Timing*  
(this could be used with group members):
-  "Once someone is confident about their breathing pattern, it is important to concentrate on how many breathes per minute they are making. This can be accomplished by getting a sensation of how long two to three seconds are, by counting silently (adding the word 'hundred' after each number, roughly equals one second - ie. one hundred, two hundred, etc.). If someone has been a very fast breather for a long time, it may only be possible to manage a one-second-in, two-second-out cycle for the first few practice sessions.

It is important to focus on the evenness of the breathing pattern. It is important to gradually increase the time taken to breathe in and out. Breathing out usually takes slightly longer than breathing in, with a relaxed pause at the end of the exhalation."

-  *Practice with Breathing Pattern*  
(this could be used with group members):

### Breathing retraining

**Lips together, jaw relaxed,  
breathing low and slow**

### Timing



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☞ "With practice this new breathing pattern will eventually become second nature and a good habit. At first, someone who has been using the mouth/upper chest breathing habit, will find the nose-stomach breathing technique somewhat unnatural. It usually takes quite a bit of practice to train stomach muscles to be accustomed to working in this fashion. It is important not to be hard on oneself if they fall back into bad breathing habits. It is far better to concentrate on both the next breath and getting it correct."

**Practice with breathing patterns**

☞ In order for breathing retraining to occur, it is suggested that the Daily Record of Your Breathing Rate h/o (W/S: C) be provided for group members to use.

Provide: Daily Record of Your Breathing Rate (W/S: C) h/o

☞ Read information contained on the above mentioned h/o with other group members and provide a practical example.

**Read handout**

**Break Time** (5-10 minutes)

**Break Time**

**Review** (30 minutes)

☞ Prior to using the following h/o, it is important to break it into manageable sections which may be read aloud within the group.

☞ Provide Psycho-education h/o: What is Social Anxiety? (H/O: 2) h/o.

Provide: What is Social Anxiety (H/O: 2) h/o

☞ Although this h/o represents a scaled down version of the previous sessions review of information pertaining to social anxiety, it provides a conceptual framework for clients to understand the components involved and the degree of work necessary to make this treatment package effective. If questions arise which are not covered by this summary, it is important to address them. Additionally, it is suggested that the concepts reviewed in this section be linked to personal situations that the group members have experienced.


**Discussion**

☞ **Thought Monitoring**


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The ***Stuck to Unstuck Thought (STUNT) Diary (1) h/o (W/S: D)***, is used. This expands on the previous monitoring form by including the 'gathering' of thoughts. It is suggested that this form be provided once the following discussion has been completed. The concept of thought monitoring is an important first step which forms the structural basis of further discussion. Thus, it is important that the form is understood by all group participants.

**Thought monitoring introduction**

 *Introduction to **Stuck to Unstuck Thoughts Diary** 1 h/o (W/S: D)*, (this can be adapted for group members):


This is an introduction to the new h/o which in the past was titled the ***Social Situations Record (W/S: B)***. This one is different, in that it incorporates a new column, 'thoughts and worries'. Although this form will change slightly in the next version, it is important to realise this is a difference which allows one to move from 'stuck' to 'unstuck' thoughts. This new form is called the ***Stuck to Unstuck Thoughts Diary***. A quick and easy way to remember this, is to shorten the full name to the beginning letters. One possible abbreviation is: STUNT Diary."

 Write the name of the h/o on the board with an explanation of the abbreviated form of STUNT .

**Write S.T.U.N.T on board**


 Provide: ***STUNT Diary (1) (W/S: D)*** h/o

Provide: ***STUNT Diary (1)*** h/o (W/S: D)

 *Identifying Thoughts:*

(this can be adapted for group members):  
The first important step is to learn to identify the thoughts someone is having in social situations. In some cases, this will be obvious, but in others' it may not be apparent at all. Whenever a feeling of shyness or anxiety occurs in a social situation, it is useful to ask the following questions of oneself; (1) 'What am I afraid of?' and (2) 'What do I think is going to happen?' Remember, that outside events do not directly cause our feelings, so you need to stop, slow down and think about how we are thinking about the event.

**Identifying thoughts**

 *Ways of Better Hearing Self-talk'*  
(this can be adapted for the group members):  
Three rules which help in understanding what our self-talk is, include: (1) Try not to focus on

**Rules for identifying stuck thoughts**



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thoughts that include feelings such as 'I will feel bad'. After all, feelings are what we are attempting to change, (2) When writing down thoughts, it is important to phrase it in the form of what is expected will happen, and (3) it is necessary to be honest with oneself about the thoughts we are experiencing. Since at times it might be somewhat embarrassing to realise we are thinking a certain way and to tell other people about these thoughts. Remember that with increased honesty, more success occurs in confronting the social anxiety which effects the sufferer.

- ☞ It is important to 'run through' an example so as to leave the group with a workable example. If group members are finding it difficult to identify and proceed through a personal example, it may be important for the therapist to use a typical / characteristic example. Based on the information which has been gathered to date on the group members, 'representative' examples should not be difficult to obtain.

Practical example

**Goal Setting for Week** (10 minutes)

- STUNT Diary (1) (W/S: D) h/o
- Daily Record of Your Breathing Rate (W/S: C), h/o

**My Journal - Session 2** (10 minutes)

- 📖 Due to this being the first journal page completed by group members, it is suggested that the rationale be provided to group members for it's use. It is suggested that the following information be included within the therapists rationale:  
(1) It provides a means of listing the homework items which the group members and the therapist have decided as appropriate, and thus acts as a reminder for the activities which are required between sessions. (2) It provides space for the group members to summarise important points learned within the session.

For the remainder of sessions, this will be a task performed by all group members at the end of each session for approximately five minutes. It is likely the instruction pertaining to what needs to be addressed in their summary be repeated over the following sessions. The summary of the



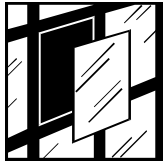
**DETAILED CONTENTS**

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session is not purely the content presented, instead, it is this AND personal points relevant to each participant.

☞ End group with 'Check-out SUDS Rating'

**SUDS Rating**



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# Handouts & Worksheets

## What is Social Anxiety?

An important reason for social anxiety occurring, is due to us learning to act in a nervous way. While growing up or since the beginning of your illness, you may have learned to respond to social situations with an anxious habit. In other words, *anxiety* may simply be a learned bad habit.

Therefore, *anxiety* can be unlearned and replaced with something else!

The anxiety habit can have three parts to it:

(1) **Body**, (2) **Acting**, and (3) **Thinking** reactions.

### Body Reactions

When you are in social situations and become *anxious*, your body experiences several changes, such as: rapid beating or pounding of your heart, changes in breathing, muscles becoming tense, sweating and others'...

What are the bodily reactions you experience?

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These bodily symptoms are your body's way of gearing you up to protect itself from situations which it considers dangerous.

**But Social Situations are generally not dangerous!**

*Where does your bodily reaction come from?*

Imagine a caveman in prehistoric times. He walks out of his cave and finds himself facing a very hungry lion. How does his body react? What likely happens, is his body receives a rush of adrenaline which prepares his body to either fight the lion or to run away. He will experience the same symptoms you may sometimes experience in social situations. His heart beats faster, his muscles tense and so forth. This response works because his life is at risk.

No matter what you may fear about the social situations, your life is not at stake - your body has just become used to responding in that way.



## Acting Reactions

When you feel anxious or expect to feel anxious, you act in some way to control the anxiety. You may avoid the situation that makes you anxious by: not going to social gatherings where you may feel uncomfortable, not staying seated when lots of people gather together or not catch a bus or walk down the street by yourself. This is called **avoidance**.

*What sort of situations do you avoid?*

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*What effect does avoiding social situations have on you?*

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*Some of the effects of avoidance include:*

- Not doing things you want to do.
- Not getting things you want to have.
- Feeling relief in the short term, but reducing confidence the next time you are in the same situation.
- Stops you from getting over the anxiety.

A **second** acting reaction may be to behave differently. That is, your mind goes blank, so you say nothing. You may feel as if your face goes red and you keep your head down; you may feel you have talked too much and so you say nothing more; you may feel uneasy and move around in your chair.

**All of these** acting habits can be overcome by unlearning the **anxiety habit**.

## Thinking Reactions

When you are in social situations and are becoming anxious or just before you enter one, your mind is not blank, **in fact** it is working overtime.

What do you think about in those situations?

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*Some possible thoughts include:*

"I won't know what to say."      **OR**      "People are watching me."  
"I may do something stupid."      **OR**      "He/she may think I'm boring."  
"I'm going to faint or collapse." **OR**      "I'm speaking too much."

When we have these thoughts, we usually accept them as facts. Sometimes, we don't wonder if they are true or accurate. We call these thoughts Automatic Thoughts. If these thoughts are negative automatic thoughts (**Stuck Thoughts**), and we don't question them, this may result in us becoming anxious. These thoughts are usually negative, bad thoughts about yourself / others or the world around you.

### **Summary:**

The three parts of social anxiety; body, acting and thinking reactions all effect each other and keep the anxiety going in a viscous cycle.

Our programme will target all three parts of the social anxiety with five main techniques...

- (1) **Relaxation Exercises**→ this involves learning exercises which help us control our breathing and relax our bodies.
- (2) **Role Plays**→ these are practice or acting out situations that are fitting to each of you.
- (3) **Thinking Changes**→ this involves questioning your thinking or stuck thoughts that are connected to your social anxiety.
- (4) **Homework**→ involves actions that you can each take in real life (outside of the group) to put into practice what we do in the group.
- (5) **Real-life Practice**: this involves the opportunity for practice in real life settings and is usually done in terms of a step ladder of difficulty.

# Daily Record of Your Breathing Rate

## Instructions

- Monitor your breathing rate at the times shown below.
- If you have just done some form of activity (e.g. walking upstairs, etc.) that increases your breathing rate, take your breathing rate about 20 minutes after you have finished the activity.
- Try to be sitting or standing quietly when you count your breathing. Don't try to alter your breathing rate as you are counting.
- Breathing Exercise:
  - a) put your writing hand on your stomach and the other hand on your chest,
  - b) breathe in through your nose and out through your mouth. Remember...jaw relaxed, breathe low and slow
  - c) Do this for approximately 5 minutes three times per day.
- Remember to: 1) monitor your breathing rate, 2) practise the breathing exercise, and 3) monitor your breathing rate again.



## CALMING TECHNIQUE

1. Ensure that you are sitting on a comfortable chair or laying on a bed
2. Take a breath in for 4 seconds (through your nose if possible)
3. Pause for 2 seconds
4. Release the breath taking 6 seconds (through your mouth).

Date	10:00 a.m.		2:00 p.m.		7:00 p.m.	
	Before	After	Before	After	Before	After
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
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_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

**Breathing Rate:** Number of breaths (in and out) in one minute.

# Stuck to Unstuck Thoughts Diary (STUNT Diary) #1

W/S: D

This sheet is to be used to record how you feel each time you are in a social situation. It can be a public place, travelling somewhere, any time you come in contact with other people or you are thinking of a social situation. Please bring this sheet to our next group.

The number scale *below* can be used to help you record how nervous and anxious you felt in that situation.

0	10	20	30	40	50	60	70	80	90	100
None		Mild		Moderate			High			Extreme



1. What am I thinking?
2. What do I expect is going to happen?

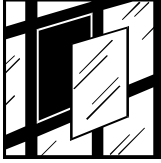
Date & time	Situation or place	Stuck Thoughts or Worries	Level of nerves or anxiety



# SESSION 3

## SESSION OBJECTIVES:

- ✎ More emphasis on the techniques used in diaphragmatic breathing.
- ✎ Introduction to Progressive Muscle Relaxation.
- ✎ Introduction to link between activating event, thoughts and feelings.
- ✎ Identifying and challenging dysfunctional beliefs (stuck thoughts).



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# Therapist's Notes



## DETAILED CONTENTS

## EQUIPMENT/ACTIVITY

☞ Welcome group members.

**Welcome**

📖 In this program, the therapist, SUDS ratings are taken before and after the session. This gives the group members familiarity with the technique and within session feedback. Throughout the manual, we talk about the **Check-In** and **Check-Out SUDS Rating**.

**SUDS rating**

📖 **Check-In SUDS Rating** (5 minutes)  
This rating is done quickly before the review. Clients may experience difficulty in rating their levels of anxiety. Due to the importance of these ratings, it may be necessary to remind clients of the anchor points which were decided upon in the previous session. It is important that anchor points have been established at this point in treatment.

**Check-in SUDS Rating**

**Review** (20 minutes)

📖 **STUNT Diary # 1** h/o (W/S: D):  
It may be useful to ask each member of the group to provide personal examples of social situations which involve anxiety. It is preferable to focus on examples of situations involving actual or upcoming social contact. Often examples involving other emotions (depression, agitation, frustration) may be used by group members as examples. It is important to validate this as an accurate recording, yet for this groups primary objective, social anxiety will be used. If questions such as, "is this the right kind of anxiety", arise, it is important to clarify the form of anxiety being addressed within session. This allows a degree of consistency and a maintenance of the social anxiety theme within the group.

**STUNT Diary #1** h/o (W/S: D)

📖 Additionally, a potential rule of thumb is to use a level of greater than '30' on the SUDS rating scale as indicative of the need to implement active strategies.

☞ It is useful to determine whether breathing rate monitoring is occurring.

**Breathing monitoring**

👁️ Some potential questions to ask clients include:  
(1) "have you been practicing monitoring your breathing rate since the last session?" and (2) "what were the difficulties you have experienced?"

📖 It is important to check breathing rate recordings during the subsequent sessions. This will help to establish the importance of this exercise and



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homework completion in general. Lack of homework completion will be noticeable at this point, due to the perceived simplicity surrounding breathing monitoring.

- 📖 Prior to the attainment of awareness of breathing patterns, the importance of modification (rate and location) may be perceived by some group members as unimportant. In order to counter this, it may be useful to reinforce the concept of practice and the initial uncomfortableness and scepticism of learning this and other new skills.

**Calming Technique** (20 minutes)

- 📖 **Breathing Exercise / Breathing Monitoring:** In addition to the content of session two, in which the primary focus was on the rationale and awareness of appropriate breathing, the focus in this session is developing the strategy for appropriate diaphragmatic breathing.

**Breathing rate monitoring**

- 📖 **Timing:** In the previous session, minimal emphasis was placed on the timing aspects associated with diaphragmatic breathing. An additional direction could include the: '**2 seconds in... hold...and three seconds out**' strategy. It is useful to include the additional discussion point of approximating 12 to 15 breaths per minute.

**Emphasis on timing**

- 📖 **Progressive Muscle Relaxation Introduction.** (this can be adapted for the group members):
  - ▶ Relaxation is voluntarily letting go of tension
  - ▶ When relaxed, nerves in muscles change the type of signals sent to brain.
  - ▶ Tension eventually becomes 'normal'
  - ▶ Tension can cause irritability, jumpiness, nervousness or apprehension.
  - ▶ Small amounts of tension are useful, yet in larger doses it interferes with performance.
  - ▶ If too much tension exists an individual may become slightly apprehensive the majority of the time and worry about things unnecessarily. Learning to relax allows someone with too much tension to gain control over these difficulties.

**PMR introduction**

- ☞ Do Progressive Muscle Relaxation technique (See: Bernstein, D.A., & Borkovec, T.D. (1973). *Progressive relaxation training: a manual for the helping professions*. Champaign, IL: Research Press.)

**Engage in PMR exercise**

- ☞ It may be useful to ask clients to continue using,





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**EQUIPMENT/ACTIVITY**

Daily Record of Your Breathing Rate h/o (W/S: C)


**Break Time** (5-10 minutes)

**Break Time**


**Discussion** (40 minutes)

 **Cognitive Therapy Introduction**  
(this could be used with group members):


**Cognitive therapy introduction**

 "Let me read you something that describes a large part of what we will be doing.... *The Basic Rule of Realistic Thinking: Our feelings and emotions are not directly caused by the things going on outside of us. Our feelings and emotions are directly caused by our thoughts, attitudes and beliefs - in other words, by what goes on inside our heads.*"

The purpose of this component is to provide group members with an introduction into how an activating event (social situation), automatic thoughts (beliefs) and the consequences (emotions, feelings and behaviour) are linked.

 **Automatic Thoughts**  
(this could be used with group members):

**Automatic thought education**

 "The brain is turning over thoughts and ideas all the time, although we are not consciously aware of most of them, because it happens relatively fast and we are not accustomed to slowing them down."

**Brain turns over thoughts**

1 "It is useful for the brain to do this since it helps us to consider several possibilities. This includes: a) possible explanations for the situation, b) possible responses (e.g staying or avoiding the situation) and also, c) the possible results of making those responses."

**Why useful?**

2 "It is the job of the brain to select the most useful ideas and bring them to conscious awareness so that we are able to think about them more carefully."

**Select useful ideas**

3 "Because the brain is throwing up these different ideas so rapidly it is not surprising that some of them are poorly formed or even completely wrong."

**Some AT's not good**

4 "The unhelpful and poorly formed ideas normally fall out of the thought system right away before we know they are there, but every once in a while our brain will jump on one of them and give it more importance than it is worth."

**AT's fall out or are jumped on**



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5 "Automatic thoughts often reflect worries and concerns, however they can be about anything at all, anything we have ever seen, heard or learned. Additionally, it can be anything we know about from any source at all."


**AT's reflect...**


6 "It is not possible to control automatic thoughts from occurring, as if it were like switching an on-off electric switch to control whether there was a light on within a room."


**Can't control occurrence of AT's**

 It is advantageous to engage in the following exercise so as to provide concrete information with regards to automatic thoughts (this question could be asked of group members):


**Exercises: (can't control AT'S)**


 "Does anyone believe it is possible to turn on / off your thoughts :

 If group members answer 'yes' to the previous question, it may be useful to engage in one of the following exercises:

 a) "Try to think of nothing at all for 30 seconds. Remember, a yoga master may be able to do this, yet they have spent many years perfecting this skill."


b) "Try not to think about the pressure of the chair on your legs; think about anything else but not that."

 These exercises will likely demonstrate to group members that it is difficult to control the occurrence of our automatic thoughts.

 *Link Between Activating Event, Thought and Consequence:*

In order to help group members become familiar with the link between the activating event, automatic thought and consequence, it may be useful to provide the following description. This would involve providing the example of three individuals waiting for a bus and the three separate emotional reactions to the bus not arriving on time for each person (the following description could be used with group members):

**A to B to C link**

 "Person (1): *happy*, since they have an excuse for missing a class at school, person (2) *sad*, since this is one of many events which has 'gone wrong' since getting out of bed this morning, and person(3) *angry*, since a movie he was planning to go to, will be missed."

**ABC example (bus example)**



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### EQUIPMENT/ACTIVITY

📖 It may be useful to have group members think of a similar ABC example and have them work on this with the therapist facilitating the example by using a white board.

**ABC example (group example)**

📖 *Socially Anxious Thought Styles*  
(this can be adapted for the group members):  
Excessively shy people tend to think about social situations in two general ways, which results in them being excessively anxious. Firstly, they tend to overestimate the likelihood that bad things will happen in social situations. For example in a group of people, a shy person may decided not to speak since, "it is very likely I will say only stupid things". The second way shy people tend to think is, that they overestimate the consequence of negative events occurring in social situations. So with this same person, they may think that if they do begin to talk, others' will almost definitely think of them as the most boring person they ever met.

**General thinking style (two types)**

📖 *Message for Group Members*  
(this could be used with group members):  
"If we can learn to control our beliefs, attitudes, and thoughts, then we can learn to have better control of our feelings."

📖 *General Ideas About Thoughts*  
(this could be used with group members):

**General ideas about thoughts**

- 1 Strong thoughts lead to strong emotions. We may not be able to remove those thoughts, yet we can reduce the strength of the emotion.
2. Realistic thinking is not positive thinking. With positive thinking the world is colored rosy, yet in reality, most of the time, this is not the case. Also, for effective changes to occur, you must believe your thoughts and not purely repeat positive statements over and over again.

**Strong thoughts = strong emotions**

**Not positive thinking**

📖 *Identifying Unrealistic Thoughts*  
(this can be adapted for group members):

- 1 Be honest about the thoughts which are being examined. In order to get the most benefit from unsticking stuck thoughts, it is necessary to be honest about what the thought is. Sometimes this might be somewhat embarrassing, and yet, when someone is working at unsticking stuck thoughts, 'honesty is the best policy'.

**Identifying unrealistic thoughts (Stuck thoughts)**

**Be honest about thoughts**



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2 Try not to focus on thoughts that include feelings (e.g. "I think I am quite anxious about going to the party")

Thoughts are different than feelings

3 Don't phrase thoughts in the form of questions, as this is difficult to sort out. Instead of writing, "Why is everyone looking at me?", it would be more useful to put it in the form of; "I think everyone is looking at me".

Thoughts not questions

- It is important to ensure the group members understand the primary concept of the ABC link. Ask individual member for their conceptualization (take home message)...Write on white board.

Confirm accurate A-B-C understanding

Goal Setting for Week (5 minutes)

- STUNT Diary #1 h/o (W/S: D)
Daily Record of Your Breathing Rate h/o (W/S: C)
Situations where I feel Shy, Nervous or Embarrassed h/o (W/S: E)

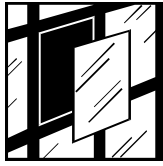
- The previous h/o is designed to introduce group members to confronting situations in which moderate to high levels of anxiety are experienced. It is a precursor to the construction of hierarchies designed to break a feared situation into manageable sub-sections. Review material contained in folder

My Journal- Session 3

It is advantageous to have clients first complete list of homework assignments, then allow them five minutes to write down points which relate to 'some important points I learned today'.

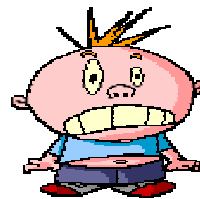
- End group with, 'Check-Out SUDS Rating'

SUDS Rating



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# **Handouts & Worksheets**



**Situations** where I Feel:  
**Shy, Nervous or Embarrassed**

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# Stuck to Unstuck Thoughts Diary (STUNT Diary) #1

W/S: D

This sheet is to be used to record how you feel each time you are in a social situation. It can be a public place, travelling somewhere, any time you come in contact with other people or you are thinking of a social situation. Please bring this sheet to our next group.

The number scale *below* can be used to help you record how nervous and anxious you felt in that situation.

0	10	20	30	40	50	60	70	80	90	100
None		Mild		Moderate			High			Extreme



1. What am I thinking?
2. What do I expect is going to happen?

Date & time	Situation or place	Stuck Thoughts or Worries	Level of nerves or anxiety

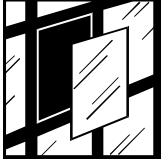


# SESSION 4

## SESSION OBJECTIVES:

- 👉 Discussion of difficulties encountered in relaxation.
- 👉 Differentiating between thoughts, feelings and situations.
- 👉 Introduction to challenging negative automatic thoughts (stuck thoughts).





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# Therapist's Notes



**DETAILED CONTENTS**

**EQUIPMENT/ACTIVITY**

- ☞ Welcome group members.
- ☞ Begin with 'Check-in SUDS Rating', and then move to Calming Technique.

**Welcome**

**SUDS rating**

**Calming Technique** (15 minutes)

- ☞ ***Breathing Exercise:***  
Review the basics of the breathing exercise with 40 cycles of breathing practice in-vivo. Inquire as to whether practice has been occurring. Ask group members to continue monitoring their breathing (no handout provided).

**Brief breathing practice**

📖 ***Progressive Muscle Relaxation Difficulties***

Before doing the relaxation exercises, discuss some of the difficulties which occasionally occur in the initial stages of learning relaxation exercises. (this can be adapted for the group members):

**Common problems with relaxation**

- a ***Fear of losing control:***  
Explain that relaxation is within our control, and can be stopped at any time. It is important to remind oneself that we are in control of our mind, body and feelings.
- b ***Unusual bodily sensations:***  
Some people feel tingling or hot and/or cold sensations, 'jumping' muscles or heaviness in the limbs. These are all normal sensations which are experienced as we loosen up and become more aware of the different muscles in the body.
- c ***Limited success in the beginning:***  
Relaxation is a skill like any other. It is learned with continual practice, so encourages the group members to persevere.
- d ***A wandering mind:***  
When an individual begins practising relaxation exercises, they may have difficulty concentrating or focusing on the instructions contained on the tape. This may be frustrating. Encourage the group member to allow the thought to pass by, and gently bring their attention back to the relaxation exercise.

**Fear of losing control**

**Unusual bodily sensations**

**Limited success in beginning**

**Wandering mind**

- ☞ Complete PMR exercise
- ☞ At this point ask the group members for feedback about their relaxation practice.
- ☞ Provide members with a copy of a PMR tape for use between sessions, and with a ***Monitoring***

**PMR exercise**

**Question: similar difficulties?**



**DETAILED CONTENTS**

**EQUIPMENT/ACTIVITY**

Your Relaxation Level h/o (W/S: G), so as to facilitate the use of the taped relaxation outside of the group sessions. Encourage to engage in PMR exercise, daily if possible.

Provide: PMR Tape

Provide: Monitoring Your Relaxation Level h/o (W/S: G)

**Review** (20 minutes)

Situations Where I Feel Shy, Nervous or Embarrassed h/o (W/S: E), reviewed: This is to ensure all clients are actively attending to situations which are being avoided or experienced with high levels of distress.

Use of: Situations Where I Feel Shy, Nervous or Embarrassed h/o (W/S: E)

STUNT Diary #1 h/o (W/S: D), review: The majority of the second half of the session is spent on this segment. This component may be extended until after the break, so as to further educate group members into the A-B-C link. It may be useful to elicit examples from each group member and ensure that examples provided are accurate recordings of cognitions.

Use of: STUNT Diary (1) h/o (W/S: D),

Cognitive Therapy -Continued (a)  
 Provide: Our Thinking (thoughts and feelings) h/o (H/O: 3). Go over handout which summarises the discussion concerning the role, automatic thoughts have on our emotions. Each group member is to read a portion of the handout. As with the previous handout on the components of the treatment program, each group member is confronting a form of social anxiety by reading the handout aloud.

Provide: Our Thinking (thoughts and feelings) h/o (H/O: 3)

**Break Time** (5-10 minutes)

**Break Time**

**Discussion** (30 minutes)

- Activating Event, Beliefs and Emotions (this can be adapted for the group members):
- ▶ Until now, time has been spent discussing the link between thoughts, emotions and the situation. By separating these components from each other, we are better able to make changes to the way we think and feel.
  - ▶ Feelings are best described in one word. Of course there are different feelings beside anxiety. This program is about anxiety management, therefore elicit from group members a range of words they use to express anxiety.
  - ▶ The situation is best thought of as an activating event captured by a video camera. That is, record the situation in the same way that a video camera

**Differentiating between activating event, belief and emotions**

**Feelings**

**Situation**



DETAILED CONTENTS

EQUIPMENT/ACTIVITY

might record it, 'simply the facts'. This may be either an actual event or situation leading to unpleasant feelings, It may also be a mental picture or recollection, leading to unpleasant feelings.

- ▶ Thoughts are best described as self-talk. Remember not to fall into the trap of recording your thoughts in the form of a question, as it is difficult to question a question! Instead it is better to ask yourself what you expect is going to happen.

☞ Provide: Is it a Situation, Emotion, Thought h/o (W/S: H), and break participants into dyads, and carry out the activity.

📖 **Cognitive Therapy - Continued (b)**

*Challenging Stuck Thoughts:*  
 Until now, the group members have been practising distinguishing between thoughts and feelings. It is now time to teach the group participants how to challenge their unhelpful thinking. What follows are the steps necessary for unsticking stuck thoughts (this can be adjusted for the group members):

*Steps involved in changing unhelpful thinking:*

- 1 **Identify the thoughts:**  
Identifying our thoughts has been covered previously.
- 2 **Assess the thoughts:**  
This involves taking a step back from the situation and looking at it without letting the anxiety experienced wrongly colour the real assessment of the situation.
- 3 **Use of Evidence Testing Questions:**  
This involves questioning and thinking of alternative ways to think about the situation using questions which help us unstick thoughts.

📖 *Evidence Testing*  
 (this can be adjusted for the group members):  
 People who tend to be excessively shy and therefore highly anxious are inclined to believe and therefore 'tune' in to information that supports that the object/situation/event is threatening. By tuning into this information their anxiety holds on and won't let go easily. An important skill which is useful in overcoming and reducing the anxiety which is

**Thoughts**

Provide: Is it a Situation, Emotion, Thought? h/o (W/S: H),

**Challenging stuck thoughts**

**Steps in changing thinking**

**Identify thoughts**

**Taking a step back**

**Use evidence testing questions**

**Evidence testing**


**Tuning into information**




### DETAILED CONTENTS

### EQUIPMENT/ACTIVITY

experienced, is to change what is tuned in to. The key to reducing this level of anxiety, lies in what is called **Evidence Testing**.

 *Certainty About Thoughts*  
(this can be adapted for group members):  
This involves attempting to be **sure** about our thoughts. It is about seeing if we are tuning out valuable information that may make us feel less anxious. Evidence testing is about asking yourself questions that will help you look for other information around you and make a decision with accurate information about your thoughts instead of just accepting them.


**Being sure about our thoughts**

 It is suggested that the following evidence testing questions are to be written on the board with an example of how to put into practice these questions with relation to the STUNT diary with the addition of the evidence testing questions.


**Evidence testing questions**


The four main evidence testing questions are:

1. Past Experience:  
*'How much has this happened before?'*
2. General Rules:  
*'Is this something that generally happens?'*
3. Alternative Explanations:  
*'What other explanations are there?'*
4. Role Reversal:  
*'How would I feel if I was to 'step' into the other person's shoes?''*

 Provide: STUNT Diary (2) Completed h/o (H/O: 4)

Provide: STUNT Diary (2) Completed h/o (H/O: 4)

 Work through this h/o, and answer questions which arise. In most instances the handout is self-explanatory. Yet, after each of the group members has read aloud the handout in segments, it may be important for each group members to provide a summary of the information discussed.

 Provide, STUNT Diary (2) h/o (W/S: F)



**DETAILED CONTENTS**

**EQUIPMENT/ACTIVITY**

Goal Setting for Week (5 minutes)

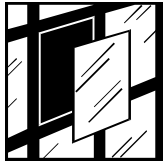
☞ Provide, STUNT Diary (2)  
h/o (W/S: F)

- STUNT Diary (2) h/o (W/S: F)
- Monitoring Your Relaxation Level h/o (W/S: G)
- Continue breathing exercises
- Complete Situations where I Feel: Shy, Nervous or Embarrassed h/o (W/S: E)
- Listen to PMR Tape
- Review material contained in folder.

☞ Complete, 'My Journal - Session 4' (5 minutes)  
It is suggested to have group members first complete a list of homework assignments. Then allow them five minutes to write down points which relate to 'Some important points I learned today'. It is important that group members are not merely providing a verbatim copy of the information conveyed in the session. Rather, this section is designed to be information related to the session AND points pertinent to the individual.

☞ End session with, 'Check-out SUDS Rating'

**SUDS Rating**



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# Handouts & Worksheets

## MONITORING YOUR RELAXATION LEVEL

As explained it's important to practice relaxation to achieve the best results, this is a new skill you're learning. It is useful to monitor your own progress by keeping a relaxation diary that records the *when, where* and *how* of your practice. You'll also be able to identify particular situations and / or times of the day when you are most tense.

The following table is an example of a recording method that might be useful. On this scale:

**10** represents the most tense or anxious you have ever been.

**0** represents the most relaxed and calm you have ever been

Date & Time	Comments / Reactions	Relaxation Level 0-10

### Comments / Reactions:

What parts of your body relaxed easily?

What sensations were you aware of in your body?

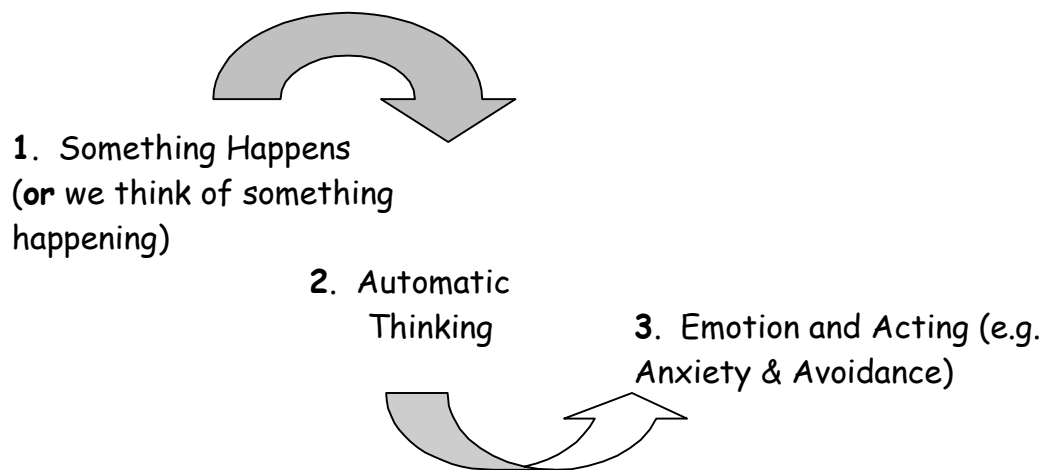
Was your mind relaxed?

What sorts of images were most relaxing for you?



## Our Thinking (thoughts and feelings)

Basic Rule of Realistic Thinking *Our feelings and emotions are not directly caused by the things going on outside of us. Our feelings and emotions are directly caused by our thoughts, attitudes and beliefs- in other words, by what goes on inside our heads.*



- All of the time, our brains are turning over thoughts and ideas. This is why they are called **automatic thoughts**.
- Our brain's job is to select the most useful ideas and bring them into conscious awareness so we can think about them more carefully.
- Since our brains work so quickly it is not surprising that some of our thoughts are poorly formed, or even completely wrong.
- Every once in a while our brain will jump on one of those poorly formed thoughts and give it more importance than it is worth.
- There are three kinds of automatic thoughts:
  1. **Neutral thoughts**→e.g. "I think I will buy some bread today"
  2. **Positive thoughts**→e.g. "This is something I can do really well"

3. **Negative thoughts**→e.g. "I must look like a fool, I bet everyone thinks I am acting stupid"
- We cannot control our automatic thoughts, but we can certainly question them.
  - People who are very shy, usually have two main types of negative thoughts which happen over and over again:
    - a) They over-estimate the chance of bad things happening in social situations. e.g. "I will make no sense when I speak to a group of people".
    - b) They over-estimate the cost of negative events in social situations. e.g. "If I am boring at a party, everyone will hate me".
  - If we can learn to challenge our beliefs, attitudes, and thoughts, then we can learn to change our feelings of high anxiety to lower anxiety.
  - When people start off, it is sometimes difficult to *catch* their automatic thinking, yet after a while it becomes easier to report them!
  - **To help you identify your negative automatic thoughts:**
    1. As soon as you feel anxious, ask yourself: "*what just went through my mind?*"
    2. If you are still having difficulty slowing down your thoughts, so that you can know what they are, ask yourself, "*What do I expect is going to happen?*"
    3. Make sure you are not confusing your thoughts and your feelings. Remember your feelings are usually best described in only one word...e.g. 'nervous', 'anxious', 'tense'. Whereas, your thoughts are usually in the form of a sentence...e.g. "*Everyone must think I look really stupid*".

## Is it a Situation, Emotion or Thought?

Situation, Emotion or Thought?




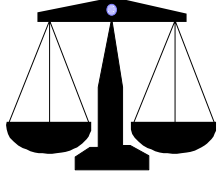
1. Nervous \_\_\_\_\_
2. Talking to my friend on the phone \_\_\_\_\_
3. Something terrible is going to happen \_\_\_\_\_
4. Sitting in a restaurant \_\_\_\_\_
5. Shopping for my groceries \_\_\_\_\_
6. Panic \_\_\_\_\_
7. I'm sure this won't work out \_\_\_\_\_
8. Anxious \_\_\_\_\_
9. They think I'm silly \_\_\_\_\_
10. Fearful \_\_\_\_\_

# STUNT Diary (2) (completed)

This sheet is to be used to record how you feel each time you are in a social situation. It can be a public place, travelling somewhere, any time you come in contact with other people or you are thinking of a social situation. Please bring this sheet to our next group..

The number scale *below* can be used to help you record how nervous and anxious you felt in that situation.

0	10	20	30	40	50	60	70	80	90	100
None		Mild			Moderate		High			Extreme

 <p>Level of nerves or anxiety (0-100)</p>	 <p>Situation or place</p>	<ol style="list-style-type: none"> <li>1. What am I thinking?</li> <li>2. What do I expect is going to happen?</li> </ol>  <p>Thoughts or Worries</p> <p><i>'Stuck Thoughts'</i></p>	<ol style="list-style-type: none"> <li>1. What past experiences show this stuck thought is not completely true all the time?</li> <li>2. What generally happens in situations like this?</li> <li>3. What other explanations are there for my feelings, besides this stuck thought?</li> <li>4. If someone I cared about had experienced this, what advice would I give them?</li> </ol>  <p>Evidence Testing</p> <p><i>'Un-sticking'</i></p>
<p><b>70 %</b></p>	<p><b>Standing in line at supermarket and someone begins talking to me.</b></p>	<p><b>A. I will sound stupid if I talk to them.</b></p> <p><b>B. They will notice that I look a 'nervous wreck'.</b></p>	<p><b>1A. I can remember coming to this supermarket in the past, and no one said I was stupid.</b></p> <p><b>2A. I usually sound fine in situations like this.</b></p> <p><b>3A. I might not have a lot to talk about, but that does not mean I am stupid.</b></p> <p><b>4A. You are just feeling anxious, and it's unlikely you sound stupid when you speak to other people.</b></p> <hr/> <p><b>1B. I have been here before and been anxious, yet no one made any comments about my anxiety.</b></p> <p><b>2B. Other people don't usually notice I am anxious, they are usually concerned about their own things.</b></p> <p><b>3B. They might think I am wondering about my shopping list.</b></p> <p><b>4B. The other people in the supermarket are most likely so concerned about buying all of the important things they need, that they are not really concerned about how uncomfortable you look.</b></p>

# STUNT Diary (2)

Stuck to Unstuck Thought Diary

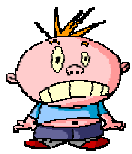
This sheet is to be used to record how you feel each time you are in a social situation. It can be a public place, travelling somewhere, any time you come in contact with other people or you are thinking of a social situation. Please bring this sheet to our next group.

The number scale *below* can be used to help you record how nervous and anxious you felt in that situation.

0	10	20	30	40	50	60	70	80	90	100
None		Mild		Moderate		High				Extreme

1. What am I thinking?
2. What do I expect is going to happen?

1. What past experiences show this stuck thought is not completely true all the time?
2. What generally happens in situations like this?
3. What other explanations are there for my feelings, besides this stuck thought?
4. If someone I cared about had experienced this, what advice would I give them?



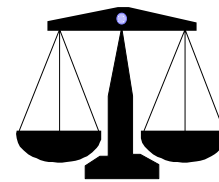
**Level of nerves or anxiety (0-100)**



**Situation or place**



**Thoughts or Worries  
'Stuck Thoughts'**



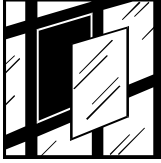
**Evidence Testing  
'Un-sticking'**



# SESSION 5

## SESSION OBJECTIVES:

- ✎ Introduction to exposure/reality testing.
- ✎ Discussion of steps necessary for proper exposure step construction.



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# Therapist's Notes



DETAILED CONTENTS

EQUIPMENT/ACTIVITY

- ☞ Welcome group members.
- ☞ Begin with 'Check-in SUDS Rating', and then move to Calming Technique.

Welcome  
SUDS rating

**Calming Technique** (20 minutes)

📖 *Breathing Exercise:*  
It is important to provide a summary of previously presented information relating to breathing. Additionally, it is suggested that group participants engage in 40 cycles of practice in-vivo. Although not designated as homework, inquire into whether practice has been occurring. Once again, it is important to speak of the importance of practicing techniques such that they become second nature.

Breathing practice

📖 *Progressive Muscle Relaxation:*  
Before proceeding to the actual exercise, review previously mentioned difficulties in learning to relax: (1) *Fear of losing control*, (2) *Unusual bodily sensations*, (3) *A wandering mind*, (4) *Limited success in beginning*.

Common problems with relaxation

- ☞ Complete PMR exercise.

In session PMR

**Review** (40 minutes)

📖 *Review, Monitoring Your Relaxation Level h/o (W/S: G):*  
It is useful to ask clients whether they have used the relaxation tape and the monitoring handout. If not, then 'gentle' challenge can be made, with a reiteration of the 'practice mentality' that is important for success in the group.

Use of: Monitoring Your Relaxation Level h/o (W/S: G)

📖 The following is a suggestion of how to raise the 'success issue' with group members:

- ☞ "Does everybody remember what triple P stands for? It stands for practice, practice and more practice. Remember that in order for these new techniques to become natural and a good habit, you must do them over and over again."

Practise, practice and more practice

📖 *Review, STUNT Diary #2 h/o (W/S: F):*  
It is important that all group participants are addressed, and that the evidence testing portion of the record has been attempted. If a particular group member is encountering difficulties in completing this section, then the help of other group members should be enlisted. If possible, ask for situations which engender the highest level of anxiety.


Use of: STUNT Diary (2) h/o (W/S: F)





### DETAILED CONTENTS

### EQUIPMENT/ACTIVITY

 **Cognitive Therapy** –Reviewed:  
 This section reviews the concept of challenging negative automatic thoughts (stuck thoughts). The task is to review the h/o, Reducing the Impact of our Stuck Thoughts (H/O: 5) which was presented in the previous session. Once again, have the group members read portions of the handout. Inquire into whether there are any questions after the discussion.


#### Review of Evidence Testing

Provide: Reducing the Impact of our Stuck Thoughts h/o (H/O: 5)


**Break Time** (5-10 minutes)

#### Break-Time


**Discussion** (30 minutes):

 **Reality Testing:**  
 (this can be adapted for group members):  
 The focus of the group has been on changing breathing patterns, practicing relaxation exercises and changing unhealthy thinking styles. This is likely to make a difference on the level of comfort which is experienced in social situations. The next step in this programme is *exposure*. This means facing our individual social fears, as opposed to avoiding situations that start off our distressing levels of anxiety.


#### Exposure justification and psychoeducation

 Chances are... group members are experts at avoiding situations which involve them experiencing anxiety related feelings and physiological arousal. Few individuals enjoy feeling frightened and upset. In addition, avoidance additionally involves, not thinking about social situations which are considered difficult.

#### Avoidance

 Exposure is a very powerful technique in the treatment of anxiety disorders. Sometimes group members become frightened at the thought of confronting their fears. This section requires firm yet gentle effort on the part of the therapist.

#### How exposure works:

 **How Does Exposure Work?**  
 (this can be adapted for the group members):  
 These exercises are often presented in grades of difficulties, beginning with the least anxiety provoking. These exercises help individuals learn how to manage anxiety. People with high levels of social anxiety have unrealistic thoughts about the *chance* and *severity* of major social problems occurring. Without coming into contact with the situations which are found

#### Chance and severity of stuck thoughts



### DETAILED CONTENTS

### EQUIPMENT/ACTIVITY

difficult to engage in, it is impossible to prove to oneself that they are able to get through the situations without the terrible things *we believe* will occur.



*Without Exposure*

(a further discussion point):

Without exposure, individuals with social anxiety will continue to believe that they will appear a fool to others', or that they will be criticised or disliked. At first, the anxiety will be uncomfortable. Just like the old saying goes, 'There is no gain without pain'. This is not to say that individuals with social anxiety will have to put up with huge amounts of pain. The exercises need to elicit some degree of anxiety in order to be effective.

**Without exposure**



*Repeated Exposure*

(a further discussion point):

By confronting these situations over and over again, it will allow individuals to become better able to handle being in situations which results in social anxiety. In the initial stages of exposure, there will be relatively high levels of nervousness experienced by individuals. By repeatedly entering into these situations, in a planned way, the individual will respond more calmly. For example, let us think back to a time when a sister, brother or friend would sometimes sneak up on us. At first our heart rate increased, muscles grew tense, and our breathing became rapid and shallow. Yet, if this were to continue time after time, it would be a situation that we became accustomed to, even if it was still a bit annoying. Similarly, social situations can lose their negative power to set off strong anxiety reactions, and it is possible to learn to cope with it in a much better fashion.

**Repeated exposure**



*Session Activity:*

Most of this session focuses on exposure. Therefore, it is essential for group members to have completed the: Situations Where I feel: Shy, Nervous or Embarrassed h/o (W/S: E). If this has not been attempted then complete in group.

**Proper construction of steps**

Use of: Situations Where I feel: Shy, Nervous or Embarrassed h/o (W/S: E)



Provide: Turning Your Goal Into Easier to Handle Steps h/o (H/O: 6)

Provide: Turning Your Goal Into Easier to Handle Steps h/o (H/O: 6)



DETAILED CONTENTS

EQUIPMENT/ACTIVITY

- ☞ Provide: Step Ladder h/o (W/S: I)
- 📖 *Developing the Step Ladder:*  
(this can be adapted for group members):  
**(1)** Once a list of situations has been created by group members, double check that they actually *involve anxiety in social situations*.  
The goals should be specific and vary in SUDS levels, from mild to high. By making the goals specific, it will allow individuals to move forward in the program more effectively. It is useful to remember, that anxiety up to a certain point is useful, so it would not be useful to remove anxiety all together.
- 📖 **(2)** It is important to break each step into smaller steps so it is analogous to climbing a step-ladder in reaching the primary goal. If difficulty is experienced in breaking the goal into smaller steps it is possible to facilitate this by asking oneself: WHO, WHAT, WHEN, WHERE, FOR HOW LONG (DURATION).
- ☞ It may be useful to provide an example of breaking a goal into smaller steps.
- ☞ *Example of goal broken into smaller steps*  
**GOAL:** "Eat meal in local restaurant"  
  - 1 Have soft drink at restaurant early in morning
  - 2 Have soft drink at lunchtime
  - 3 Cup of coffee and sandwich early in morning
  - 4 Have cup of coffee and sandwich at lunchtime
  - 5 Have full meal and stay for 20 minutes
  - 6 Have full meal and stay until it is all eaten
- 📖 **(3)** Rate each of the steps on the step ladder on the SUDS scale. Each step approaching the top goal, has a higher SUDS rating. The number of steps in the step ladder, depends on how difficult the major step was to achieve in the first place. Complex goals may require several more steps, such that the anxiety is broken down into easier to manage chunks.
- 📖 It may be useful to use the white board for simplifying the following exercise:  
Provide the following acronym which stipulates guidelines necessary for accurate goal setting:  
'PRAMS', Personal, Realistic, Achievable, Measurable and Specific.
- 📖 In order for group members to better understand the concept of a hierarchy (step

Provide: Step Ladder h/o (W/S: I)

**Steps necessary for accurate hierarchy**

**Steps involve anxiety in social situations**

**Breaking down goal into steps**

**Example of breaking goal into steps**

**SUDS rating of each step**

**Personal, realistic, achievable, measurable and specific**



## DETAILED CONTENTS

## EQUIPMENT/ACTIVITY

ladder) construction, it is suggested that one be constructed for each group member, within the group.

- ☞ Construct Step Ladder and designate as homework greater than one hierarchy step as homework

**Step ladder construction**

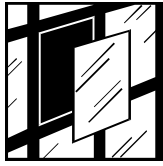
### Goal Setting for Week (5 minutes)

- STUNT Diary #2 h/o (W/S: F)
- Monitor relaxation practice
- Work on construction of hierarchy, using:  
Turning Your Goal Into Easier to Handle Steps h/o (H/O: 6) and, the Step Ladder h/o (W/S: I)
- Set one goal as homework

- ☞ Complete, My Journal - Session 5 (5 minutes)  
At this point group members complete their list of homework assignments. Then allow them five minutes to jot down notes which relate to 'Some important points I learned today'.

- ☞ End group with 'Check-Out SUDS Rating'

**SUDS Rating**



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# Handouts & Worksheets

## Reducing the Impact of our 'Stuck' Thoughts

People who tend to be very shy and anxious are likely to believe and 'tune' in to information that supports that the object/situation/event is threatening. By tuning into this information, their anxiety holds on and won't let go easily. The secret to overcoming anxiety is to change what you tune in to.

*How do I tune into things that are not threatening?* The key to reducing our anxiety, lies in what is called **Evidence Testing**.

**Evidence Testing** is all about trying to be **sure** about our thoughts. It is about trying to see if we are tuning out valuable information that may make us feel less anxious. Evidence testing is about asking yourself questions that will help you look for other information around you and make an informed decision about your thoughts instead of just accepting them.

### Four Main Types of Evidence (and the questions to ask yourself):

1. Past Experience  
*"How much has this happened before"?*
2. General Rules:  
*"Is this something that generally happens"?*
3. Alternative Explanations:  
*"What other explanations are there"?*
4. Role Reversal:  
*"How would you feel if you were to 'step' into the other person's shoes"?*

# The Self-Talk Steps for Becoming Less Anxious

## **Step 1: Recognise the feelings**

- Label the feeling and see how strong it is on the 0-100 scale

## **Step 2: Find out what your thinking**

- Go through automatic thought discovery questions
  - "What am I embarrassed/nervous or shy about?"
  - "What do I think is going to happen?"

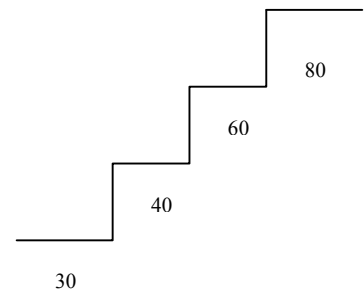
## **Step 3: Examine the evidence for and against the stuck thought**

- Ask yourself the Evidence Testing questions

## **Step 4: Replace the stuck thought with a balanced thought**

- Take the evidence for and against the stuck thought into account

# Turning Your Goal Into Easier to Handle Steps



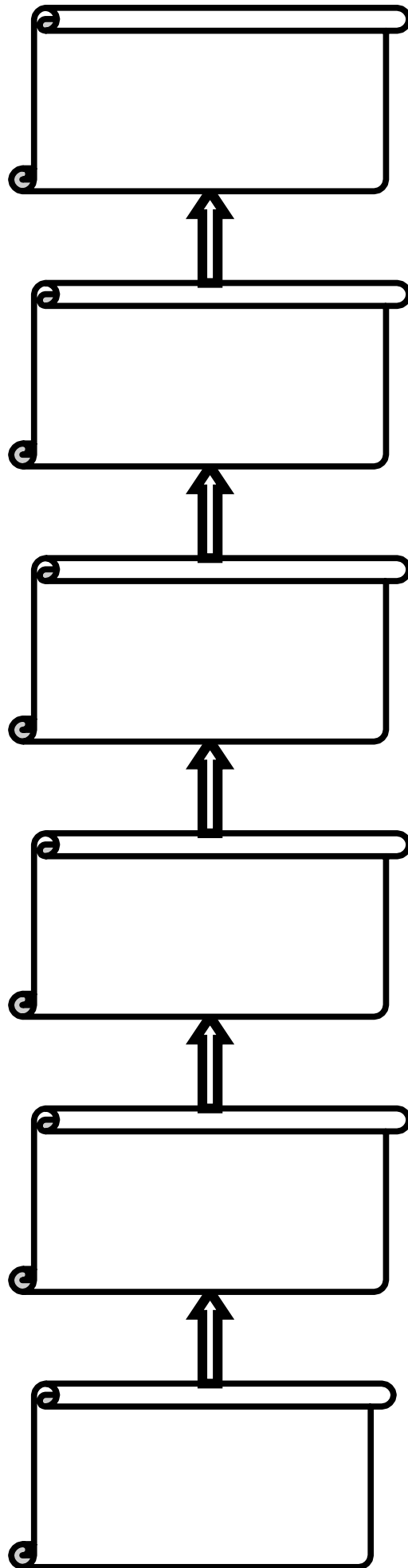
1. Once you have a list of situations that you feel shy, nervous or embarrassed in, make sure they are situations that involve anxiety in social situations.
2. Break each goal into smaller steps so it is like climbing a ladder to get to your goal. If you're having difficulty breaking your goal into smaller steps, you can make steps by changing the **Who, What, When, Where, For How Long** parts of it.
3. Beside each of the steps, rate each one on your SUDS scale. Therefore, as you move up your ladder, each step will have a higher SUDS rating.

## Example:





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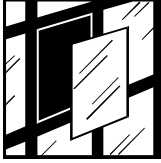




# SESSION 6

## SESSION OBJECTIVES:

- ✎ Introduction to the Mini Relaxation exercise.
- ✎ Discuss group members attempts at constructing the steps for exposure.
- ✎ Review session on exposure.



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# Therapist's Notes



**DETAILED CONTENTS**

**EQUIPMENT/ACTIVITY**

- ☞ Welcome group members.
- ☞ Begin with 'Check-in SUDS Rating', and then move to Calming Technique.

**Welcome**

**SUDS Rating**

**Calming Technique** (20 minutes)

- ☞ Pre and post session, it is important to inquire whether benefits are occurring as a result of doing relaxation within and outside of session.

**Benefits of relaxation?**

📖 The reason behind the following exercise will be explained to group members later in the session. The therapist engages in the Mini Relaxation, in full view of the group participants. This is done without announcing to the group that the therapist is engaging in this exercise. Thus, the group members will at this time, not be aware the therapist is engaging in a relaxation exercise. The point of this activity is that, anxiety management can be carried out inconspicuously.

**Therapist covertly engages in Mini Relaxation exercise**

📖 This is a form of relaxation which allows group members to utilise their relaxation skills outside of therapy in social situations with out other people knowing. It is important to describe to clients that this is a sub-component of PMR. This is to facilitate the cueing of the two relaxation techniques, so that one is not replaced by the other. The handout, Your Mini Relaxation (H/O: 8) is to be read prior to engaging in the exercise.

**The Mini Relaxation exercise**

Provide: Your Mini Relaxation  
h/o (H/O: 8)


- 📖 *Introduction to Mini Relaxation:* (this could be used with the group members):
- ☞ "We are now going to do a slightly different form of relaxation which you will find quite useful. This form of relaxation will enable you to do your relaxation in two additional ways. Firstly, it can be done when you are in a room full of people, when you are out in public or even waiting for the bus. Secondly, it can be done in a very short period of time. As long as you continue doing your relaxation at home using your tape, this mini relaxation will have a similar result . The relaxation you do with your tape is a full relaxation and it relaxes all of your muscle groups. Although, the Mini Relaxation does not take as long as the full relaxation, it reminds your body of the effects of the full relaxation."


**Justification for Mini relaxation**




DETAILED CONTENTS

EQUIPMENT/ACTIVITY

 **Mini Relaxation Exercise**  
 (this is the suggested script for the Mini exercise):


 "Could everyone place your handout on Mini relaxation in front of you. Everyone stand and allow your hands to hang by your sides and relax comfortably. Remember, '**Lips closed, jaw relaxed, breathe slow and low**'. Whilst we are doing the Mini Relaxation, I want you to breathe in for two seconds and out for three seconds. Whilst you are breathing out, I want you to say the word '**relax**' to yourself. It is important that you are breathing from your stomach, more so than from your chest. I now want you to cross one leg over the other, keeping your feet close together and firmly on the floor.... Now, place both arms behind your back and grasp your hands together. Lightly twist your wrists as much as you comfortably can, such that the palms of your hands go from facing directly behind you to now facing the ground beneath you. Move your hands and arms away from your back... keeping your hands clasped and arms straight... such that you can feel tension in your forearms, wrists and shoulders. You should also now be feeling tension in your legs muscles, back, neck and chest. Remember that whilst you are doing this, it is important to continue to concentrate on your breathing. Now uncross your legs and return your arms to a resting position at your sides. Notice the difference between this sense of relaxation as compared to the previous feelings of tension. Now focus on your breathing for the next 30 seconds. Take two seconds on the breathe in, and three seconds on the breathe out. Remembering to say the word '**relax**' on the breathe out. Now repeat these steps at least three times."

**Mini relaxation**

 Inquire whether group participants realised this exercise was being undertaken by the therapist prior to practising it together.

**Anyone notice (covert) Mini Relaxation, conducted by therapist?**

**Review** (20 minutes)


 **Review, Monitoring Your Relaxation Levels h/o (W/S: G)**  
 Firstly ask clients whether they have used the relaxation tape. If not, then gentle challenge should be made, with a reiteration of the 'practice mentality' that is important for success in treatment.

Use of: Monitoring Your Relaxation Levels h/o (W/S: G)




### DETAILED CONTENTS

### EQUIPMENT/ACTIVITY

 **Review, STUNT Diary #2 h/o (W/S: F):**  
Prior to this component, write the STUNT Diary #2 template on the white board. Ensure members who were not addressed in last session are addressed in this session.

Use of: STUNT Diary #2 h/o (W/S: F)


 **Review, Step Ladder h/o (W/S: I):**  
It is useful to spend time ensuring accuracy of each step, with other group members providing feedback. Break into groups, with the therapist circulating to provide guidelines and feedback. It is important that adequate time is allocated for this component.

**Review of hierarchy construction**

**Break Time** (5-10 minutes)


**Break Time**

**Review (continued):** (20 minutes)


 **Review of Graded Exposure:**  
Provide, Facing the Things That You Avoid h/o (H/O: 9).  
This handout reviews the previous sessions discussion on exposure and the construction of fear hierarchies (step ladders). Have group members read portions of the handout and complete sections.


**Review of graded exposure**

Provide: Facing the Things That You Avoid h/o (H/O: 9)

 **Overcoming Social Phobia Video:**  
The video's use is to reinforce the treatment techniques and therapy messages in a further medium, and provide real examples of other individuals with social phobia and their experiences in treatment. Prior to beginning the video, it should be mentioned that if a client wishes to ask a question, the video can be stopped. This will allow for key points to be made about the video in relation to their difficulties and to respond to any questions group members have. Following the video, a closing discussion ensues.

**Graded exposure portion of video**

 View: Graded Exposure portion of "I think, they think..."

 **Summary of Video:**  
(this can be adapted for group members):

- Graded exposure involves the acknowledgment that treatment success involves doing the things you have hated to do up until now.
- You progress at your own rate.
- Confront situations you fear in a step wise fashion.

**Video summary**



## DETAILED CONTENTS

## EQUIPMENT/ACTIVITY

*Some important points for the hierarchy:*

- Do frequently/repeatedly and at close intervals.
- Do continuously until comfortable.
- Stay in situation until anxiety decreases. Wait until anxiety drops.
- Don't 'bail out', despite bad day...e.g. deliberately getting lost on way to feared situation.
- Don't use drugs (illicit substances) to lessen anxiety.
- Confront situation anxious in and manage it.
- Admit to your successes and don't change 'goal posts'. Take pride in your achievements.

### Goal Setting for Week (5 minutes)

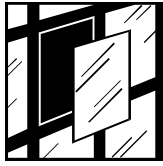
- STUNT Diary #2 h/o (W/S: F):
- Monitor relaxation practice PMR tape and Mini Relaxation with Monitoring Your Relaxation Level h/o (W/S: G)
- Begin working on hierarchy (no exposure diary). Designed to determine level of commitment and motivation in terms of confronting items on hierarchy.

☞ Complete, My Journal - Session 6 (5 minutes)  
At this point group members first complete list of homework assignments. Then allow five minutes to jot down notes that relate to 'Some important points I learned today'.

☞ Upon completion of summary of session 6, have each group member read their summary from session 2 through 6.

☞ End group with 'Check-Out SUDS Rating'

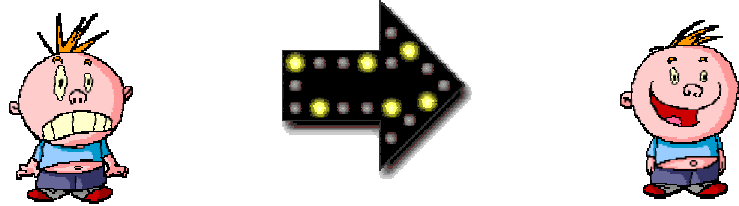
**SUDS Rating**



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# Handouts & Worksheets





## Your Mini-Relaxation (you can do it anywhere)

- This relaxation exercise does not take as long to do as your *taped* relaxation exercises you do at home.
- Just because you know how to use a shorter relaxation tool, don't stop using your taped relaxation exercises. This is because, the Mini-relaxation tool reminds you of the full benefit of doing the *taped* relaxation exercise. If you stop doing the *taped* relaxation exercise, then your body will forget how much tension you can release AND the mini-relaxation tool will not be as effective!!

### STEPS for Mini Relaxation:

1. Remember...*Lips closed, jaw relaxed, breathe slow and low.*
2. Breathe in for 2 seconds and out for 3 seconds. Be aware of your breathing during **all** of the Mini-relaxation.
3. Cross one of your legs over the other leg...keeping your feet firmly planted on the ground. Try to place your feet even with each other.
4. Put both hands behind your back and grasp your hands. Now twist your hands so that your palms are now facing the floor.
5. Keeping your hands together and your arms straight, gently raise your arms toward your head.
6. Notice the increase in tension in **all** of your different muscles. Hold all of this for a count of 5.
7. Now...uncross your legs and return your arms to your sides. Take two or three breaths to let go of all the tension. Deepen the relaxation you have achieved, with 20-30 seconds of controlled breathing.
8. Repeat steps '2' to '7' until you feel relaxed.

## Facing the Things That You Avoid

We have been working on changing your breathing patterns, practising relaxation exercises and changing your stuck to unstuck thoughts, so that you can be more comfortable in social situations.

The next step involved is... ***Real Situation Testing (exposure)***. This means facing your fears, as opposed to avoiding situations that start off your distressing levels of anxiety. So instead of only thinking through a situation in your head and doing evidence testing, you can actually experience the situation. Chances are, you are all *experts* at avoiding situations that start off anxious feelings in your body. This is because it is unlikely that you enjoy feeling scared and upset...so we just avoid it.

*What sort of situations do you avoid, but would like to better handle dealing with?*

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

Avoidance not only means staying away from places or situations, but also trying not to think of something that causes you to feel anxious.

*Remember that...trying not to think of something, actually makes it worse and you think more about what you are trying not to think of!!*

*What sort of things do you do your best not to think of which involve social situations?*

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

### **How does *real situation testing* work?**

It helps you learn that certain actions don't lead to people thinking poorly of you, or if it does occur it's not a catastrophe. *Remember...*people with anxiety in social situations tend to think the **likelihood** of a social disaster happening is very high, and they think that the social disaster will be quite **severe**.

If you don't face situations that you tend to avoid, you cannot prove to yourself that you can get through these situation without the terrible consequence you think will happen. Without facing these situations, you will continue to think that you'll look like a fool, or that you'll be criticised or disliked.

After taking the exposure step, you will learn the situation you have been dreading for so long is not so bad. *Yes...*at first the anxiety will be uncomfortable, yet learning to cope with the anxiety means you have to experience it.




By repeatedly exposing yourself to situations which you were previously fearful, embarrassed or felt tense in, you will become used to them. By entering into these situations, in a planned and proper way, your body will react more calmly. After a while these situations will lose their *power* to bring on as much anxiety as they did before you did *real situation testing* exercises.

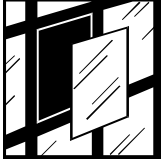
If you plan these steps properly, you will build up on your confidence and this will allow you to make further steps forward. With increased confidence, you are more likely to face what you call your '*fears*'...**NOW!!**



# SESSION 7

## SESSION OBJECTIVES:

-  Provide successful outside-group exposure information.
-  Introduction to use of imagery for accurate exposure step perception.
-  Introduction to within-group role play.



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# Therapist's Notes



## DETAILED CONTENTS

- ☞ Welcome group members.
- ☞ Begin with 'Check-in SUDS Rating', and then move to Calming Technique.

### Calming Technique (10 minutes)

- 📖 *Mini-Relaxation:*  
Review the effects of doing the relaxation exercises within and outside sessions. Remind group participants of the rationale for this exercise.
- ☞ Engage in Mini-Relaxation exercise
- 📖 *Mini-Relaxation Script* (repeated for your convenience):
- 👁️ "Everyone stand and allow your hands to hang by your sides and relax comfortably. Remember, '*Lips closed, jaw relaxed, breathe slow and low*'. Whilst we are doing the Mini Relaxation, I want you to breathe in for two seconds and out for three seconds. Whilst you are breathing out, I want you to say the word '*relax*' to yourself. It is important that you are breathing from your stomach more so than from your chest. I now want you to cross one leg over the other, keeping your feet close together and firmly on the floor.... Now, place both arms behind your back and grasp your hands together. Lightly twist your wrists as much as you comfortably can, such that the palms of your hands go from facing directly behind you to now facing the ground beneath you. Move your hands and arms away from your back... keeping your hands clasped and arms straight.... such that you can feel tension in your, forearms, wrists and shoulders. You should also now be feeling tension in your legs muscles, back, neck and chest. Remember that whilst you are doing this it is important to continue to concentrate on your breathing. Now uncross your legs and return your arms to a resting position at your sides. Notice the difference between this sense of relaxation as compared to the previous feelings of tension. Focus on your breathing...for the next 30 seconds. Take two seconds on the breathe in, and three seconds on the breathe out. Remembering to say the word '*relax*' on the breathe out. (Now repeat these steps (at least three times)."

## EQUIPMENT/ACTIVITY

**Welcome**

**SUDS Rating**

**Benefits of relaxation?**






**Mini Relaxation exercise**



**DETAILED CONTENTS**

**EQUIPMENT/ACTIVITY**

**Review** (20 minutes)

-  **Step Ladder** h/o (W/S: I):  
Review and provide feedback about the completed by group participants.
-  Have clients break into dyads and circulate to ensure goals are adequately broken into steps.
-  Write: **STUNT Diary #2** (W/S: F): template on white board
-  **STUNT DIARY #2** h/o (W/S: F):  
Review examples of STUNT Diaries, encouraging group participation and in this way developing a sense of group cohesion. Include some of the quieter members of the group.
-  **Use of Mini Relaxation & Taped PMR at Home:**  
Review use of relaxation tape and gently challenge those who are having difficulties. Remember practice, practice and more practice makes perfect.

Review: **Step Ladder** h/o (W/S: I) completion


**Template on board**

Use: **STUNT DIARY #2** h/o (W/S: F)

**MINI relaxation and taped PMR**

Use: **Monitoring Your Relaxation Level** h/o (W/S: G)

**Discussion**

-  **Confronting Real Situations:** (20 minutes)  
(May be adapted for group participants):  
The previous two sessions have included discussions about hierarchy development and in-vivo exposure. This is referred to as confronting real situations. As mentioned previously, this involves confronting personal fears, as opposed to avoiding situations which play a part in starting off distressing levels of anxiety. In addition to examining and disputing our stuck thoughts and engaging in evidence testing, it is necessary to confront the situation which is contributing to the high levels of anxiety being experienced. Share the following points with group members:
- 1 **Not leaps...rather steps.** Encourage group members to persevere...‘keep on keeping on’, because change occurs in steps not leaps.
  - 2 **Stay put, until anxiety goes down.** Whilst in a situation, if an individual escapes just as the level of anxiety experiences reaches its highest point, it may be more difficult to accomplish the same step the next time it is attempted.
  - 3 **Over and over again:** It is important to continually enter situations, since if you only repeat it once, then you may convince yourself

**Points to remember for reality testing**

**Not leaps...rather steps**

**Stay put, until anxiety goes down**

**Over and over again**



**DETAILED CONTENTS**

**EQUIPMENT/ACTIVITY**

that it was luck or that it was a different day than most. If you don't continue to enter situations until you become more comfortable, it can actually become more difficult with a long 'break' in between."

- 4 **Good to bad days:** We all have our up and down days. It is unreasonable to expect that each time an exposure exercise is attempted, it will definitely become easier. Thus, there are a variety of reasons that play a part in how much anxiety is experienced. Difficulties one day may necessitate increased focus and attention the following day.
- 5 **Avoidance can be a problem:** Avoidance occurs in a number of ways, and remember individuals with social anxiety are experts at using avoidance to make their anxiety less distressing. They may exhibit direct avoidance. For example, they could be invited out for a boat trip and decide not to go, using an excuse such as, being too busy to go. Another example of avoidance is called subtle avoidance. For the above example they might go on the boat trip, but not talk to anyone. Both forms of avoidance are self-defeating in the long term.

**Good to bad days**

**Avoidance can be a problem**

**Direct & subtle avoidance**

☞ Present a summary of the following points (this could be used with group members):

☞ "Okay here's something you should remember. You're going to start at the bottom of the step ladder (pointing at step ladder), and you will be doing something that's a little difficult. This is shown by your SUDS rating you have attached to this step and the other steps that are above it. You will become more comfortable on this step before trying the next step on your ladder, and so on. Remember, before you try the final step, you will have become much more comfortable than you are feeling right now with the steps just below it. How does that sound? When you start thinking about the final goal, why not remind yourself of your step ladder, especially of the step you're now on and how you're going to go up the staircase one step at a time. If you think like this, and believe in it, do you think this will help bring down the anxiety you are experiencing?"

**Putting everything together**

**Break Time** (5-10 minutes)

**Break-Time**





### DETAILED CONTENTS

### EQUIPMENT/ACTIVITY

- ✍ Provide: *Step Ladder Diary* h/o (W/S: K) with provision of instructions (contained on handout).
- 📖 **Role Play of Hierarchy Goals:** (40 minutes)  
Role plays within group settings have many uses. They may be used to bring out negative automatic thoughts (stuck thoughts). The use of role playing can be instigated through homework assignments, that guide the patient in practicing and attending to new cognitive responses in problematic social encounters. An additional use of role play is to rehearse new behaviours.
- 📖 The use of role plays is sensitive to situational factors. Therefore, think up activities across a range of domains for each of the group members.  
The role play exercise is designed to facilitate the group members abilities in engaging in their hierarchal exposure steps. You might first begin with imaginal exercises. Upon completing this exercise, provide group members with time to reflect on the results of the exercise.
- 📖 Before each role play, help the group member develop a rich tapestry of the experience they are to rehearse. Such information as; 'who was in the situation?', 'what was happening then?', 'time of the day', 'where was it occurring', 'how were they feeling' and 'what sort of thoughts were they having', may set up the role plays.
- 📖 **Imagery Activity :**  
Before doing the actual exercise, help each group member develop an imaginal scenario. Begin the practice with a non-anxiety eliciting exercise. This is usually done with eyes closed and the group member indicating they have a clear picture by raising a finger. For example, if the client is imagining a tree, then check they are visualising the object by asking questions such as, 'Can you see the leaves on the tree?', 'What colour are they?', 'Are they moist or dry?' , etc, etc...
- 📖 **Imagery and Role Play**  
(can be adapted for group members):  
The remainder of this session involves engaging in role-play exercises. These will include social situations in which an individual has experienced high levels of anxiety. This will enable group members to better prepare themselves for situations outside of the group.

Provide: *Step Ladder Diary* h/o (W/S: K)

#### Role Play

#### Importance of imaginal exercises

#### Imagery prior to role play

#### Non-anxiety provoking exercise



### DETAILED CONTENTS

### EQUIPMENT/ACTIVITY

☞ Have group members imagine they are back in a situation in which the anxiety experienced was very uncomfortable. Once they have a clear image, ask them to briefly describe the image. Split group into two separate groups and have both therapists guide these separate groups.

**Imagine uncomfortable situation**

☞ **Guide Group Members Through Imagery** (suggested format follows):

☞ "Now, slowly run the image forward, noticing all the time what is happening, how you are feeling, and what's going through your mind. What do you see now? At the moment your anxiety increases, what was going through your mind?"

☞ Provide: **Role Play Recording Sheet** h/o (W/S: J):  
Upon obtaining a detailed description of what has occurred in the social interaction situation, the therapist role-plays the other person, whilst the group members play 'them-selves'. This exercise is then used constructively by the therapist to help the group individual. It is a good idea to shape up the other group members to provide constructive feedback. The therapist could use this opportunity to discuss strategies the client uses during their in-vivo exposure.

Provide: **Role Play Recording Sheet** h/o (W/S: J)

**Role-play**

#### Goal Setting for Week (5 minutes)

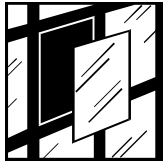
- **STUNT Diary #2** (W/S: F):
- Monitor Mini relaxation practice
- Monitor PMR relaxation with **Monitoring Your Relaxation Level** h/o (W/S: G):
- Engage and complete hierarchy steps with use of **Step Ladder Diary** h/o (W/S: K)
- Group members to think of which steps on their step ladder to use for role play

☞ Complete, '**My Journal - Session 7**' (5 minutes)  
At this point, group members complete their list of homework assignments. Then allow them five minutes to jot down notes which relate to 'Some important points I learned today'.

☞ Upon completion of writing down summary of session 7, have each group member read their summary from 2 through to 7.

☞ End group with, '**Check-Out SUDS Rating**'

**SUDS Rating**



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# Handouts & Worksheets

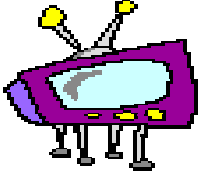

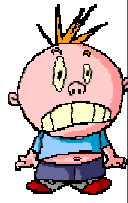



# Step Ladder Diary

W/S: K

This sheet is to be used to record your progress on your step ladders. Please use it to describe: what you did, when you did it (including how long it took), and how nervous you both *expected* to be and *actually* were. The last column asks you to jot down any comments about the experience. If you were able to stay in the situation for a reasonable amount of time, what tools did you use. If you experienced a great deal of difficulty, what were some of the reasons for this.

The number scale *below* can be used to help you record how nervous and anxious you expected to be and how you actually were.

0	10	20	30	40	50	60	70	80	90	100
None		Mild		Moderate			High			Extreme

 Situation / Event	 <u>Expected</u> Anxiety (0-100)	 <u>Actual</u> Anxiety (0-100)	 How long in event/ situation	  Describe what you did (evidence testing, relaxation exercises, breathing, etc.) to stay in situation <input type="checkbox"/> OR what made it difficult to do this .

# Role Play Recording Sheet



Name:

Date:

Session #:

Description of role play:

Other people involved:

Your Goal in Role Play:

Evidence testing used in role play:



SUDS Record:

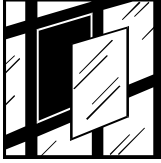
Time	SUDS rating
Initial .....	
1 minute .....	
2 minutes .....	
3 minutes .....	
4 minutes .....	
5 minutes .....	
6 minutes .....	
7 minutes .....	
8 minutes .....	
9 minutes .....	
10 minutes .....	



# SESSION 8

## SESSION OBJECTIVES:

-  Watch and discuss exposure step video.
-  Further elaboration of role play.



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# Therapist's Notes



### DETAILED CONTENTS

### EQUIPMENT/ACTIVITY

- ☞ Welcome group members.
- ☞ Begin with 'Check-in SUDS Rating', and then move on to Calming Technique.

**Welcome**

**SUDS Rating**

#### Calming Technique (10 minutes)

- 📖 **Mini relaxation:**  
Reiterate the importance of continuing the PMR taped exercise at home in combination with frequent Mini Relaxation practice.
- ☞ Engage in Mini Relaxation practice.

**PMR and Mini Relaxation**

#### Review (20 minutes)

- 📖 Have clients form dyads and facilitate discussion of their progress with the step ladder exercises. Therapist provides positive reinforcement and inquire about difficulties that may be encountered.
- ☞ Examine use of Step Ladder Diary h/o (W/S: K)

**Individual group review of hierarchy**

- 📖 STUNT Diary #2 h/o (W/S: F) completion (can be adapted for group members):  
The focus of this exercise is to have individual group members present a recent and typical example from their STUNT Diary #2's h/o (W/S: F). During the individual presentations of these examples, group members will have a role in asking questions and providing feedback. This feedback exercise in itself is therapeutic for group members. The therapist role is to shape up constructive feedback in the group.
- ☞ Have each group member use the white board, go through the steps they have taken in dealing with their stuck thoughts.

Use of: STUNT Diary #2 h/o (W/S: F)

- 📖 **Step Ladder Review:**  
With the use of the handout, Points to Remember When Using Your Stepladder (H/O: 10): , review the Real Situation Testing portion of last weeks session. Have each group member read a portion of the hand out and answer any questions which arise at the end of this segment.

Provide: Points to Remember When Using Your Stepladder h/o (H/O: 10), and review

#### Break Time (5-10 minutes)

**Break time**

#### Discussion (40 minutes)

- 📖 **Role Play of Hierarchy Goals:**  
Remember, the form of the role play would involve: (1) cognitive preparation, and (2)

**Combine cognitive restructuring and exposure for role play**





DETAILED CONTENTS

EQUIPMENT/ACTIVITY

behavioural preparation.

☞ Do thought preparation (STUNT Diary #2) (W/S: F) prior to role play enactment.

☞ Examine the Step Ladder Diary h/o (W/S: K), such that behavioural and cognitive strategies are incorporated.

📖 **Role Plays:**  
The therapist and group members are assigned role plays. Prior to each role play, participants run through a brief cognitive restructuring activity using the STUNT Diary #2 h/o (W/S: F), by first imagining themselves in the role play, identifying potential 'stuck thoughts', using the evidence testing (unstuck) questions for questioning the stuck thoughts.

📖 During the actual role plays, participants are asked to give a SUDS rating at one minute intervals whilst recording this on the accompanying handout. They are additionally encouraged to use cognitive restructuring when stuck thoughts occur. Each participant is praised for their effort and achievement for completion of the role play.

**Goal Setting for Week** (5 minutes)

- STUNT Diary #2 h/o (W/S: F)
- Monitor Mini relaxation practice with Monitoring Your Relaxation Level h/o (W/S: G)
- Complete hierarchy steps with use of Step Ladder Diary h/o (W/S: K)

☞ Complete, 'My Journal - Session 8' (5 minutes)  
At this point group members complete their list of homework assignments. Then allow them five minutes to jot down notes which relate to 'Some important points I learned today'.

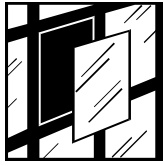
☞ Upon completion of writing down summary of session 8, have each group member read their summaries from 2 through to 8.

☞ End group with, 'Check- Out SUDS rating '.

Review: Step Ladder Diary h/o (W/S: K)

Provide: Role Play Recording Sheet h/o (W/S: K)

**SUDS Rating**



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# Handouts & Worksheets



## Points To Remember When Using Your Stepladder

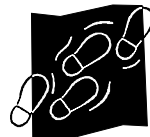
Okay here's something you should remember. You're going to start at the bottom of the step ladder, and you will be doing something which is a little difficult. This is shown by your SUDS rating you have attached to the first step you are taking, and the other steps that are above it.

You will become more comfortable on each step before trying the next step on your step ladder, and so on. Remember, before you try the final step, you will more than likely have become more comfortable than you are feeling right now with the steps just below it.

How does that sound? When you start thinking about the final goal, why not remind yourself of your step ladder. Especially... of the step you're now on and how you're going to go up the step ladder one step at a time. If you think like this, and believe in it, do you think this will help bring down the anxiety you are experiencing?!

So the important points to remember when you are moving from one step to the next and finally to your goal at the top of the step ladder are:

1. Not one leap, but manageable steps→ You begin with the least difficult step and gradually work your way up the step ladder. As you climb higher up the ladder, your SUDS rating becomes higher.



2. Stay 'put'... don't leave situation in a hurry→ If you are in a situation, and you leave just as your anxiety reaches it's highest point, it will be more difficult to accomplish this same step the next time you attempt it. Stay in the situation and do evidence testing (unstuck thinking)



3. Over and Over again→ It's important to continually enter situations, since if you only do it once, then you may convince yourself that it was luck or that it was a different day than most.

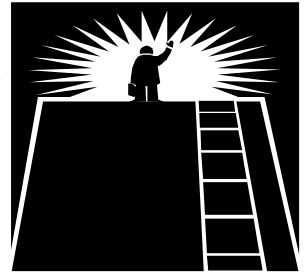
**1....2.....3.....4...etc...**

4. Days ranging from good to bad→ We all have our up and down days. Don't expect that each time you repeat the same step, it will definitely become easier. Actually, you may be feeling down that day for a variety of reasons and this will play a part in how much anxiety you are experiencing.



5. 'Staying away' can be a problem→ You are an expert at avoiding situations to make your anxiety less for you, but this is one expert skill you don't need. Staying away from a situation is not the only part of avoidance. You may be embarrassed of going to social gatherings, so instead of simply not going, you go...but you sit far away from others' so that you don't have to talk to anyone. This would still be 'staying away' from the problem.





## Points To Remember When Using Your Stepladder

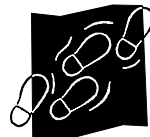
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How does that sound? When you start thinking about the final goal, why not remind yourself of your step ladder. Especially... of the step you're now on and how you're going to go up the step ladder one step at a time. If you think like this, and believe in it, do you think this will help bring down the anxiety you are experiencing?!

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**1....2.....3.....4...etc...**

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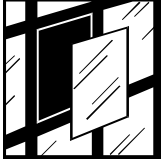




# SESSION 9

## SESSION OBJECTIVES:

- ✎ Introduction of coping cards, so as to facilitate thought diary completion.
- ✎ Further role play of hierarchy steps.



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# Therapist's Notes





**DETAILED CONTENTS**

**EQUIPMENT/ACTIVITY**

- ☞ Welcome group members.
- ☞ Begin with 'Check-in SUDS Rating', and then move to Calming Technique.

**SUDS Rating**

**Calming Technique** (10 minutes)

- ☞ *Mini relaxation:*  
Reiterate the importance of continuing the PMR taped exercises at home in combination with frequent Mini relaxation practice.

**Mini relaxation**

**Review** (20 minutes)

- 📖 *Review of, Step Ladder Diary h/o (W/S: K):*  
Look at the progress of group members in moving through the steps in their hierarchy, and whether the h/o, is being used.
- 📖 It may be advantageous to have clients break into dyads. Additionally, inquire into whether difficulties are being experienced.
- 📖 *Review of, STUNT Diary #2 h/o (W/S: F):*  
For this session have each member contribute an example of how they handled situation in which high anxiety was experienced. Remind the group to write down examples on their STUNT Diary (W/S: F) h/o. These will be used in the future.

**Progress through hierarchy**

Use of: Step Ladder Diary h/o (W/S: K)

Use of: STUNT Diary #2 h/o (W/S: F)

**Discussion**

- 📖 *Coping Cards:* (30 minutes)  
Coping Cards provide the individual with a quick and comprehensive means of challenging stuck thoughts. They can be used to prompt and motivate group members to construct additional Step Ladders for anxiety eliciting situations.
- 📖 *Introduction to Coping Cards :*  
(this can be adapted for group members)  
Until now, group members have spent time using the STUNT Diary. Hopefully, group members are finding it useful, and are challenging stuck thoughts with evidence testing questions in a variety of social situations. It is most likely that the specific social fears experienced by individuals are long standing in nature. It is analogous to an old shoe that it is possibly not the most comfortable, yet it has been around for such a long time that it is difficult to throw it away. In the case of some

**Coping Card introduction**



### DETAILED CONTENTS

### EQUIPMENT/ACTIVITY

stuck thoughts, group members may experience difficulty 'letting go'.

- 📖 Coping Cards are a useful way to lessen the negative influence of these stuck thoughts. Ask the individual to jot down the most commonly occurring stuck thought on one side, and the 'unsticking' evidence testing answers on the other side. Encourage the individual to read the card often to increase the likelihood of breaking the bad thinking habits.

- ☞ Break into manageable sub-groups. Have clients write down stuck thoughts experienced repeatedly in the past, and evidence testing answers obtained from STUNT Diary # 2 h/o .

- 📖 Circulate amongst groups to ensure members are discussing and appropriately recording their stuck thoughts and evidence testing responses.

- ☞ Once each group member has completed this task, spend the remaining time before the break recording their stuck thought on one side of the card, and the coping (evidence testing) statements on the other side of the card.

#### Break Time (5-10 minutes)

- ☞ **Role Play of Hierarchy Goals:** (45 minutes)  
Provide: Role Play Recording Sheet h/o (W/S: J)  
Spend remainder of session engaging in role play exercises. This is a repeat of last week, and will continue for sessions 10 and 11. It is important that new situations are covered in each.

#### Goal Setting for Week (5 minutes)

- STUNT Diary #2 h/o (W/S: F)
- Monitor Mini relaxation practice with Monitoring Your Relaxation Level h/o (W/S: G)
- Complete hierarchy steps with use of Step Ladder Diary h/o (W/S: K)

- ☞ Complete, 'My Journal - Session 9' (5 minutes)  
At this point group members complete their list of homework assignments. Then allow them five minutes to jot down notes which relate to 'Some important points I learned today'.

- ☞ Upon completion of writing down summary of session 9, have each group member read their summary from session 2 through 9.

- ☞ End session with, 'Check- out SUDS' rating.

#### Rationale for coping card

#### Use of Coping Card

Provide: 3' X 5' Coping Cards

Therapist to circulate from group to group

#### Recording on Coping Card

#### Break Time

#### Role Play

Provide: Role Play Recording Sheet h/o (W/S: J)

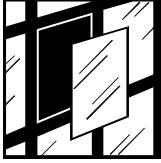
#### SUDS rating



# SESSION 10

## SESSION OBJECTIVES:

- ✎ Discuss relapse prevention.
- ✎ Early warning signs, and means of remedying minor setbacks are discussed.
- ✎ Further role play.



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# Therapist's Notes

**DETAILED CONTENTS****EQUIPMENT/ACTIVITY**

- ☞ Welcome group members.
- ☞ Begin with, 'Check-in SUDS Rating', and then move to Calming Technique.

**Welcome****SUDS Rating****Calming Technique** (10 minutes)

- 📖 Reiterate the importance of continuing the PMR taped exercises at home in combination with frequent Mini relaxation practice.
- ☞ Engage in Mini Relaxation practice.

**Mini relaxation****Review** (20 minutes)

- 📖 ***Moving Through Hierarchy:***  
Provide feedback and review progress of group members in moving through the steps in their hierarchies, and whether the ***Step Ladder Diary*** h/o (W/S: K), is being used. Additionally, inquire as to whether difficulties are being encountered.
- ☞ May be advantageous to have clients form dyads.

**Progress through hierarchy**

- 📖 ***STUNT Diary #2*** h/o (W/S: F):  
For this session have each member contribute an example of how they handled a situation in which high anxiety was experienced. Remind the group to jot down examples on their ***STUNT Diary #2*** h/o (W/S: F). These will be used in the future.

Use of: ***STUNT Diary #2*** h/o (W/S: F)

- 📖 ***Coping Cards:***  
Review progress of group members using ***Coping Cards***, to determine whether they are being used.

**Coping Cards**

- 📖 ***Coping Card Summary:***  
Coping cards were completed in the previous session, therefore it is unnecessary for the provision of a review sheet on this topic (the following may be adapted for group members):

**Summary**

- ✓ All group members have been challenging stuck thoughts using the ***STUNT Diary*** h/o (W/S: F) and the associated evidence testing questions.
- ✓ Some stuck thoughts are similar to an old shoe in that it is sometimes difficult to throw out the stuck thought due to it becoming a bad habit.
- ✓ The use of the ***Coping Cards*** assists in reminding group members how to successfully challenge stuck thoughts which have occurred repeatedly




### DETAILED CONTENTS


### EQUIPMENT/ACTIVITY


in the past.

- ✓ These **Coping Cards** incorporate the stuck thought on one side of the card and the unsticking evidence testing answers on the other side.
- ✓ When a group member encounters times in which they are thinking of a similar stuck thought entering their mind, as contained on the **Coping Card**, it can be used as a more sensible and productive approach to dealing with the stuck thought.

#### Discussion:

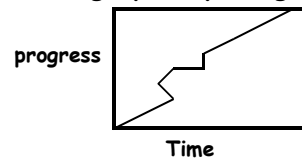
 **Relapse Prevention:** (30 minutes)  
 The potential for relapse of schizophrenia symptomatology holds primary precedence over social anxiety symptoms. Nevertheless, the following treatment component is designed to help group members retain the skills and strategies learned within this programme (the following may be modified for group members):

 **Introduction:**  
 (this can be adapted for the group members):  
 Throughout this group, the focus has been on change. An important point to be aware of is that change does not typically continue uninterrupted. It is similar to the saying: *“Two steps forward, one step backward from time to time”*. When examining the progress group members report and describe, it is important to understand that taking a step backward is not disastrous. In fact, it may actually signify that these individuals are better able to handle difficulties in the future.

 **First Signs**  
 (this can be adapted for the group members):  
 One of the first signs indicating that a set-back is being experienced (sometimes referred to as a hiccup), is a change in an individuals behaviour. It is not necessarily an increase in fear that an individual notices. For example, someone may have in the past confronted situations by entering them. Then, begun to notice themselves not going into similar situations as frequently or at all in the future. This would be considered a set back.

#### **Relapse Prevention**

#### **Draw graph depicting setbacks**




#### **Indications for Set-backs**




### DETAILED CONTENTS


### EQUIPMENT/ACTIVITY

 *Reasons for Set-backs*  
 (this can be adapted for the group members):  
 There are several reasons for setbacks occurring.  
 (1) There may be an increase in physical or mental stress. (2) Additionally, when we are physically unwell, we are likely to not have as much mental or physical energy to unstuck stuck thoughts using evidence testing questions. (3) Also, the weather may be changing such that the temperature is quite uncomfortable. This would leave someone with less energy to accomplish things we know and realise would be beneficial to be done (e.g attempting the steps on your step ladder or evidence testing). In other words we may just be having a bad day. Just as we sometimes report having bad 'hair days' for no reason we can put our 'finger on', a similar event happens with life in general. Sometimes things are just not going the way they usually happen.


**Reasons for set backs**

 *All of a Sudden*  
 (this can be adapted for group members):  
 Individuals with social anxiety may consider themselves to be doing quite well in terms of their goals, and all of a sudden a set back occurs. In attempting to determine the reason for this set back, we 'rack' our brain attempting to explain this turn of events. A common strategy is to constantly ask oneself questions which usually begin with "Why". Setbacks during these good times typically occur due to solely thinking of our progress and forgetting about the 'nuts and bolts' work. That is, what it is that actually enabled an this person to achieve progress in the first place.

**Unusual occurrence of set backs**

 *Maintaining Gains*  
 (this can be adapted for group members):  
 Thoughts which typically occur include: "well the group is over and I'm doing well, so I don't need to work on this stuff as much any more" or "I think I will relax and leave this social phobia stuff for a little while". This does not mean not recognising the multiple successes which have occurred throughout the programme. Rather it is important to maintain gains by continuing to confront social fears and practice the skills which have been learned. It is important to remember, that it takes hard work to achieve ones present position in the programme.

**Maintaining your gains**

 *Preventing Set-backs*

**DETAILED CONTENTS****EQUIPMENT/ACTIVITY**

(this can be adapted for group members):  
It is suggested, to not be overly concerned about set backs. In effect, group members will continue to pull from their 'skills tool bag' the techniques and strategies which have been learned within the programme. If a large number of setbacks are experienced, this may indicate a potential relapse. A full blown relapse can be prevented by attending to the following points:

- 1 **Identify early warning signs:** The first step is to look at what are early warning signs for each individual. Some common examples are:
  - ✓ Spending increased time worrying about what others think about us.
  - ✓ An increase in the amount of time avoiding social situations.
  - ✓ More stuck thoughts = more anxiety.
  - ✓ When in situations which were previously avoided and feared, there is an increase in physical symptoms of anxiety (palpitations, sweaty hands, etc.)

📖 *If 'trembling' is mentioned this may be a side effect of neuroleptic medication (referred to as akathisia).*

- 2 **Which tools have been forgotten about:** It is important to think of all the tools and strategies which have been learned (proper breathing techniques, relaxation – PMR and Mini relaxation), STUNT Diaries, step ladder). An important question to ask oneself is, "*which of these tools have been shown to be effective in reducing the anxiety which is experienced*"? Then think of whether practice with these tools has been stopped. An important point which applies to this group programme in general is the three P's: (Practice, Practice and more Practice).

- 3 **Develop a relapse prevention plan:** This is jotting down a summary of the early warning signs which are known to be the first signs of a set back occurring. The next step involves writing down the strategies and tools required to deal with early warning signs.

☞ *Complete Relapse Prevention Plan:*  
Form dyads. Therapist to circulate, to ensure appropriateness and accuracy of responses on

**Preventing Setbacks****Identify warning signs****Tools stopped practising?****Develop prevention plan**

Provide: *Self Management Plan*






**DETAILED CONTENTS**

**EQUIPMENT/ACTIVITY**

the, Self Management Plan h/o (W/S: L)

**Break Time** (5-10 minutes)

**Break Time**


 **Role Play of Hierarchy Goals:** (45 minutes)  
Through the use of the, Role Play Recording Sheet h/o, spend majority of session engaging in role play exercises. This is a repeat of last week, and will continue for session 11. It is important that new situations are covered.


**Role Play**


Provide: Role Play Recording Sheet h/o (W/S: J)

**Goal Setting for Week** (5 minutes)

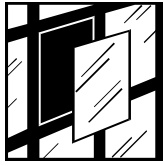
- STUNT Diary #2 h/o (W/S: F)
- Monitor Mini relaxation practice Monitoring Relaxation Your Level h/o (W/S: G)
- Complete hierarchy steps with Step ladder Diary h/o (W/S: K)

 Complete, 'My Journal - Session 10' (5 minutes)  
At this point, group members complete their list of homework assignments. Then allow them five minutes to jot down notes which relate to 'Some important points I learned today'.

 Upon completion of writing down summary of session 10, have each group member read their summary from 2 to 10.

 End session with, 'Check-Out SUDS' rating'.

**SUDS Rating**



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# Handouts & Worksheets

## Self Management Plan

**What are my Early Warning Signs that I am experiencing a set back?**

Eg. Spending more time worrying about what others think **OR** I am spending more time avoiding situations **OR** I have more stuck thoughts than usual.

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**What strategies/techniques have I found most helpful?**

eg. taped relaxation, Mini relaxation, Social Situations Record, step ladder

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**What are my common stuck thoughts?**

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Hint: write these on cards and rehearse them regularly

**What are my future support options?**

GP/Psychiatrist:

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Case Manager: \_\_\_\_\_

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Friends:

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Family:

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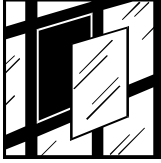
Other ?



# SESSION 11

## SESSION OBJECTIVES:

-  Review group programme.
-  Further role play.



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# Therapist's Notes



## DETAILED CONTENTS

## EQUIPMENT/ACTIVITY

- ☞ Welcome group members.
- ☞ Begin with, 'Check-in SUDS Rating', and then move to Calming Technique.

### SUDS Rating

### Calming Technique (5 minutes)

- 📖 Reiterate the importance of continuing the PMR taped exercises at home in combination with frequent Mini relaxation practice.
- ☞ Engage in Mini Relaxation practice.

### Mini relaxation

### Review (20 minutes)

- 📖 ***Moving Through Hierarchy:***  
Provide feedback and review progress of group members in moving through the steps in their hierarchies, and whether the ***Step Ladder Diary*** h/o (W/S: K), is being used. Additionally, inquire as to whether difficulties are being encountered.

### Progress through hierarchy

- ☞ May be advantageous to have clients form dyads.

- 📖 ***STUNT Diary #2*** h/o (W/S: F):  
For this session have each member contribute an example of how they handled a situation in which high anxiety was experienced. Remind the group to jot down examples on their ***STUNT Diary #2*** h/o (W/S: F). These are used in future.

Use of: ***STUNT Diary (2)*** h/o (W/S: F)

- 📖 ***Coping Cards:***  
If group members have not been using this tool, then reiterate ***Coping Card Summary***, as presented in session 10. Additionally, if there was lack of time in completing ***Coping Cards*** in the previous session, then allocate time for this activity.

Use of ***Coping Cards?***






- 📖 ***Group Content Summary:*** (30 minutes):  
For the review session, it is advantageous to write the individual topic items on the board as an outline. Prior to reviewing the components, ask group members to describe their understanding of the components of the programme. Once it becomes evident that a difficulty in remembering key points is occurring, have other members provide assistance. Secondly, once these two routes have been exhausted, a useful strategy is to provide the remaining summary points for each group component. Then move to next point on outline. Repeat this for each component (the following

Summary of group material



## DETAILED CONTENTS

## EQUIPMENT/ACTIVITY

- points to be addressed are):
-  **SUDS:**  
Zero to 100 scale with greater number indicating greater distress.
  
  -  **STUNT Diary:**  
A record which can be used to monitor an individual's level of anxiety, the situation the anxiety is experienced in, the stuck thoughts, and the answers to the evidence testing questions. When used correctly, it can provide a powerful means of altering the negative impact stuck thoughts have on us and help when combined with confronting feared situations we have/are experiencing.
  
  -  **Breathing:**  
This is being aware of breathing habits and practicing good breathing habits. This involves looking at the stomach as being a good sign of whether breathing is occurring in the best possible manner. Additionally the number of breathes which are taken in, is an important signal of whether we are taking in enough O<sub>2</sub> and releasing enough CO<sub>2</sub>. It is important to remember the phrase, '*Lips closed, jaw relaxed, breath low and slow*' (Have group members say this several times).
  
  -  **Stuck Thoughts:**  
It is important to understand the rule of realistic thinking: '*Our feelings and emotions are not directly caused by the things going on out side of us. Our feelings and emotions are directly caused by our thoughts, attitudes and beliefs-in other words, by what goes on inside our heads.*' Our brains turn over thoughts and ideas all the time, yet we are not consciously aware of most of them, due them occurring quickly. Due to the thoughts occurring so quickly, sometimes the thoughts are poorly formed or completely wrong. This is why we have spent time using the *STUNT Diaries* as a way of slowing down our thinking and some of the stuck thoughts. We then use the evidence testing questions in our goal of unsticking those thoughts.
  
  -  **Progressive Muscle Relaxation (PMR):**  
This is a method of noticing the difference between tension and relaxation in the muscles.  
*Problems with relaxation:* (1) fear of losing control, (2) unusual body sensations, (3)

**SUDS**

**STUNT Diary**

**Breathing**

**Stuck thoughts**

**PMR**





## DETAILED CONTENTS

## EQUIPMENT/ACTIVITY

wandering mind, (4) limited success in beginning. Although the PMR exercise has been stopped in the group and replaced with the MINI relaxation exercise, it is important to maintain an understanding of what this exercise does with all of the muscle groups. If practice is continued, then when the MINI relaxation exercise is used in a social situation, it will be more effective.



### **Unsticking Evidence Testing:**

Due to automatic thoughts not being consistently accurate and thus called stuck thoughts, it is helpful to examine these thoughts from a realistic stand point. One of the better ways of doing this is to look at these thoughts with the help of the unsticking evidence testing questions and the answers which have been ascertained.

### **Unsticking evidence testing**



### **Confronting Feared Situations:**

Individuals with social anxiety are experts at avoiding situations which are related to high levels of anxiety in the affiliated situations. Without exposure it is not possible to prove that we will not appear a fool, or that an individual will not be criticised or disliked. Points to remember about exposure are: (1) one step at a time, (2) stay in situation, (3) repeat, (4) Up and down days, (5) be aware of avoidance. Major goals were broken down into manageable and specific steps and then fit within a step ladder, with each step higher on the step ladder representing a greater SUDS rating. To break up the goal into steps, the following questions were asked: who, what, where, when & how.

### **Exposure**



### **Mini Relaxation:**

This is another form of relaxation in which an individual learns to relax in front of others' without external realisation. It was much shorter than the taped relaxation which group members used outside of the group.

### **Mini Relaxation**



### **Role Play:**

This is a method of combining all of the group skills learned: relaxation, breathing, evidence testing, and exposure. This involves acting out the difficult situations in front of other members in the group such that when the actual event occurs outside of our group, group members are better prepared to deal with any difficulties.

### **Role play**



**DETAILED CONTENTS**

**EQUIPMENT/ACTIVITY**



**Coping Cards:**

This reminds group members of the thoughts which are most characteristic of the manner they think in difficult to handle social situations and a manner of unsticking those thoughts with evidence testing questions.

**Coping Cards**



**Relapse Prevention:**

This examined the potential of experiencing a set back and what some of the characteristic early warning signs experienced are. It additionally provided group members with a summary of what the tools and strategies learned in the group are. Furthermore, a discussion concerning what might be most helpful in solving these problems. Also, it involved deciding on the potential individuals that could be contacted to help remedy a situation if a group members own efforts were not sufficient in pulling them out of a slump.

**Relapse prevention**

**Break Time** (5-10 minutes)

**Break**

**Discussion:**



**Role Play of Hierarchy Goals:** (45 minutes)

Through the use of the, **Role Play Recording Sheet** h/o (W/S: J) , spend majority of session engaging in role play exercises. This is a repeat of last week, and will continue for session 11. It is important that new situations are covered.

Provide: **Role play Recording Sheet** h/o (W/S: J)

**Goal Setting for Week** (5 minutes)



**STUNT Diary #2** h/o (W/S: F)



Monitor Mini relaxation practice (no sheet provided)



Complete hierarchy steps with use of **Step Ladder Diary** h/o (W/S: K)



Complete, **'My Journal - Session 11'** (5 minutes)

At this point, group members complete their list of homework assignments. Then allow them five minutes to jot down notes which relate to 'Some important points I learned today'.



Upon completion of writing down summary of session 11, have each group member read there summary from 2 through to 11.





End session with, **'Check-Out SUDS Rating'**.

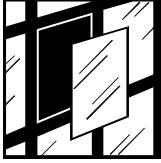
**SUDS Rating**



# SESSION 12

## SESSION OBJECTIVES:

-  Completion of two end of group feedback forms.
-  Celebration of group member progress.



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# Therapist's Notes



**DETAILED CONTENTS**

**EQUIPMENT/ACTIVITY**

- ☞ Welcome group members
- ☞
- ☞ Begin with, 'Check-in SUDS Rating', and then move to Calming Technique.

**Welcome**

**SUDS Rating**

**Calming Technique** (5 minutes)

- 📖 Reiterate the importance of continuing the PMR taped exercises at home in combination with frequent Mini relaxation practice
- ☞ Engage in Mini Relaxation exercise.

**Mini relaxation**

**Review** (20 minutes)

- 📖 ***Moving Through Hierarchy:***  
Provide feedback and review progress of group members in moving through the steps in their hierarchies, and whether the ***Step Ladder Diary*** h/o (W/S: K), is being used. Additionally, inquire as to whether difficulties are being encountered.
- ☞ May be advantageous to have clients form dyads.

**Progress through hierarchy**

Provide: **Your Feedback on the Group** h/o (W/S: M)

Provide: **Helpful Experiences** h/o (W/S: N)

- 📖 ***Assessment of group***
- ☞ Complete: **Your Feedback on the Group** h/o (W/S: M)
- ☞ Complete: **Helpful Experiences** h/o (W/S: N)

**Break Time** (5-10 minutes)

**Break**

- 📖 ***Client Celebration:***  
Organise client celebration of successful completion: In order to establish closure on the group programme, it is essential to have a non-group content related activity. For example, this may involve the provision of a cake or biscuits for the group to share during the last hour of the session. Additionally, they are encouraged to bring a refreshment into the group.

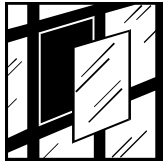
**Client celebration**

- ☞ ***Post Treatment Assessment:***  
A further contact time of approximately 1.5-2 hours, so as to conduct the post-treatment assessment. This should be conducted as soon after the 12th session as is possible.

**Post treatment assessment**

- 📖 Additionally a follow-up session should be scheduled for approximately 1 month post the 12th session of the group.

**Follow-up session scheduling**



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# Handouts & Worksheets

## Group Experiences:

Below are some things that you may or may not have experienced as helpful during the group. Please give each statement a rating from 0 to 4. A '0' being not helpful at all and a '4' being extremely helpful.

	Not helpful at all	A little helpful	Quite helpful	Very helpful	Extremely helpful
1. Helping others' has made me feel good.....	0	1	2	3	4
2. Recognising that life is at times unfair and unjust.....	0	1	2	3	4
3. Learning that things can get better.....	0	1	2	3	4
4. Being listened to by group leaders.....	0	1	2	3	4
5. Learning why I think and feel the way I do.....	0	1	2	3	4
6. Getting things off my chest.....	0	1	2	3	4
7. Group members suggesting or advising something for me to do.....	0	1	2	3	4
8. Improving my skills in getting along with people.....	0	1	2	3	4
9. Teaching me about the type of impression I make on others.....	0	1	2	3	4
10. Learning I'm not the only one with my type of problem.....	0	1	2	3	4
11. Revealing embarrassing things about myself and still being accepted by the group.....	0	1	2	3	4
12. Learning about some of the causes of my problems.....	0	1	2	3	4

	Not helpful at all	A little helpful	Quite helpful	Very helpful	Extremely helpful
13. Learning that I must take responsibility for my actions.....	0	1	2	3	4
14. Having group leaders there to help me.....	0	1	2	3	4
15. Giving part of myself to others.....	0	1	2	3	4
16. Feeling alone no longer.....	0	1	2	3	4
17. Being able to say what was bothering me instead of holding it in.....	0	1	2	3	4
18. Learning that there's hope for my problem.....	0	1	2	3	4
19. Giving me an opportunity to learn to approach others.....	0	1	2	3	4
20. Realising that there are other people out there like me.....	0	1	2	3	4
21. People in the group giving suggestions about problems.....	0	1	2	3	4
22. Learning how I come across to others.....	0	1	2	3	4
23. Learning that at the end of the day it's really up to me to change.....	0	1	2	3	4
24. Learning how to express my feelings.....	0	1	2	3	4
25. Feeling supported by group leaders.....	0	1	2	3	4
26. Belonging to a group of people who understand and accept me.....	0	1	2	3	4
27. Other members honestly telling me what they think of me.....	0	1	2	3	4
28. Helping others and being important in their lives.....	0	1	2	3	4
29. Other people in the group giving me ideas about what to do.....	0	1	2	3	4
30. Learning that I react to some people or situations unrealistically.....	0	1	2	3	4
31. Seeing that others are experiencing similar things.....	0	1	2	3	4
32. Feeling understood by group leaders.....	0	1	2	3	4
33. Feeling more trustful of groups and of other people.....	0	1	2	3	4
34. Seeing that others have solved problems similar to mine.....	0	1	2	3	4



## YOUR FEEDBACK ON THE GROUP

When we first met, you were provided with a handout titled '*Why Change?*'. The second question on the handout, asked: '*If social anxiety was not a difficulty, I could...*' Please write those answers below:

- 1.
- 2.
- 3.

*Please fill out this form thinking about how much you have moved in solving these problems.*

For each of the statements below, please circle one response that best applies to you.

1. **Since I first attended this group I have found my problems become:**

0	1	2	3	4
Much worse	No Change	Better	Much better	Very much better

2. **I have found being in a group to be a good way to deal with my problems.**

0	1	2	3	4
Not at all	Somewhat	Good	Very Good	Extremely good

3. **Since doing the group, I think that my ability to cope with my problems has become:**

0	1	2	3	4
Much worse	No Change	Better	Much better	Very much better

**4. Since I first attended this group I have found my ability to cope with life in general has become:**

0	1	2	3	4
Much worse	No Change	Better	Much better	Very much better

**5. I would be willing to do another group here:**

0	1	2	3	4
Not at all	Possibly	Willing	Very willing	Extremely willing

**6. How useful was receiving feedback at the end of the group?**

0	1	2	3	4
Not at all	Somewhat	Good	Very Good	Extremely good

**7. How likely is it that you would recommend the group to another person who has problems similar to your own?**

0	1	2	3	4
Not at all	Somewhat	Good	Very likely	Extremely likely

**8. In general, how useful was the group?**

0	1	2	3	4
Not at all	Somewhat	Good	Very Good	Extremely good

**9. Thinking of the person(s) that ran your group, what were some of the good things which made attending the group easier? Are there any ways, you think the group leader could have been more helpful?**

**10. Have a look at your goals (difficulties before the group) for this group. Please rate on a scale from 0 to 10 how much of a problem these were a) before the group, and b) now.**

**Difficulty 1:**

Before	1	2	3	4	5	6	7	8	9	10
	No problem at all								one of my biggest problems	
After	1	2	3	4	5	6	7	8	9	10

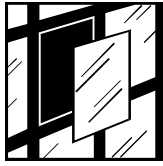
**Difficulty 2:**

Before	1	2	3	4	5	6	7	8	9	10
	No problem at all								one of my biggest problems	
After	1	2	3	4	5	6	7	8	9	10

**Difficulty 3:**

Before	1	2	3	4	5	6	7	8	9	10
	No problem at all								one of my biggest problems	
After	1	2	3	4	5	6	7	8	9	10

**If you have any comments, recommendations or suggestions about the group could you please write them on the back of this page. Thank You!!!**



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# **Appendix A:**

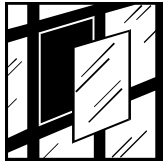
# **Suggested Assessments**



## Assessment Package:

This assessment package may appear lengthy, yet when spread over two sessions it is manageable. In the first assessment session, the MINI is administered for a preliminary determination of comorbid social anxiety. If the client exhibits signs of social anxiety then the Q-LES-Q, BSPS and the FNE are administered. This first session is also useful such that the clinician is able to establish rapport. If the client does not exhibit these symptoms then the MINI is the only tool administered and a subsequent appointment is unnecessary. For clients exhibiting social anxiety, a second appointment is arranged in which the SIAS, CDSS, and the BPRS are administered. The second session may be used to address client concerns concerning attending the course.

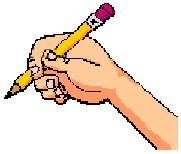
- Mini International Neuropsychiatric Inventory (MINI) [Lecrubier, Weiller, Hergueta, Amorim, Bonora, Lepine, Sheehan, Janavs, Baker, Sheehan, Knapp, Sheehan]
- Brief structured interview for the major Axis I psychiatric disorders in DSM-IV and ICD-10 (clinician administered)
- 20-25 minutes
- Brief Social Phobia Scale (BSPS) [Davidson, Potts, Richichi, Ford, Krishnan, Smith & Wilson, 91] (clinician administered)
- characteristic symptoms of social phobia
- 18 questions (5 minutes)
- Social Interaction Anxiety Scale (SIAS) [Mattick & Clarke, 89]
- Anxiety in social interactions. Rates how characteristic a set of statements are of them. (self administered)
- 19 questions (10 minutes)
- Fear of Negative Evaluation Scale (FNE) [Watson & Friend, 1969]
- The FNE assesses concern about being evaluated negatively by others, a core aspect of social phobia. (self administered)
- 30 questions (10 minutes)
- Calgary Depression Scale for Schizophrenia (CDSS) [Addington, Addington & Schissel, 90]
- assesses depression in schizophrenia (clinician administered)
- 5 minutes
- Quality of Life Enjoyment and Satisfaction Questionnaire (Q-LES-Q) [Endicott, Nee, Harrison & Blumenthal, 93]
- degree of enjoyment and satisfaction in range of various areas. (self administered)
- 68 questions (15 minutes)
- Brief Psychiatric Rating Scale (BPRS) [Overall & Gorham, 62]



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# **Appendix B:**

# **Frequently Used Worksheets**



## Daily Record of Your Breathing Rate

Date ↓	10:00 a.m.		2:00 p.m.		7:00 p.m.	
	Before	After	Before	After	Before	After

### Instructions:

- If you have just done some form of activity (e.g. walking upstairs, etc.) that increases your breathing rate, take your breathing rate about 10 minutes after you have finished the activity.
- Try to be sitting or standing quietly when you count your breathing.
- *Breathing Exercise:* a) put your writing hand on your stomach and the other hand on your chest, b) breathe in through your nose (2 seconds in, and 3 seconds out) Remember...**Lips closed, jaw relaxed, breathe low and slow.** c) Do approximately 30 cycles (*one cycle means, one 2 seconds in and 3 seconds out*) three times per day.
- Remember to: **1)** monitor your breathing rate, **2)** practice the breathing exercise, and **3)** monitor your breathing rate again.

# STUNT Diary (2)

Stuck to Unstuck Thought Diary

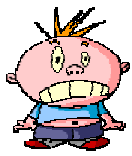
This sheet is to be used to record how you feel each time you are in a social situation. It can be a public place, travelling somewhere, any time you come in contact with other people or you are thinking of a social situation. Please bring this sheet to our next group.

The number scale *below* can be used to help you record how nervous and anxious you felt in that situation.

0	10	20	30	40	50	60	70	80	90	100
None		Mild		Moderate		High				Extreme

1. What am I thinking?
2. What do I expect is going to happen?

1. What past experiences show this stuck thought is not completely true all the time?
2. What generally happens in situations like this?
3. What other explanations are there for my feelings, besides this stuck thought?
4. If someone I cared about had experienced this, what advice would I give them?



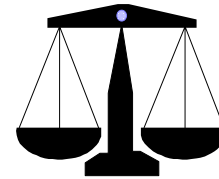
**Level of nerves or anxiety (0-100)**



**Situation or place**



**Thoughts or Worries  
'Stuck Thoughts'**



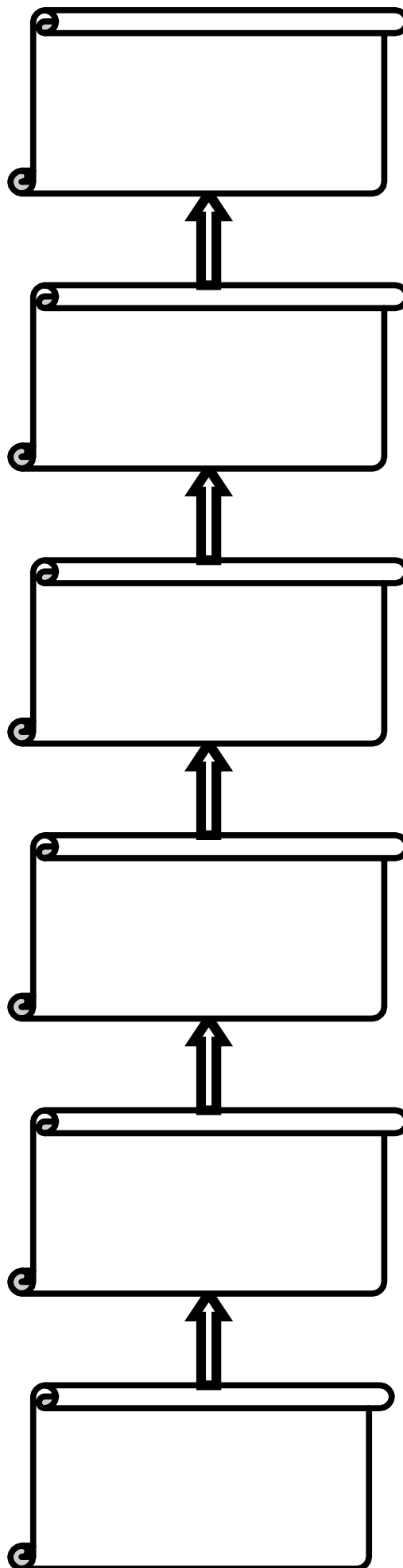
**Evidence Testing  
'Un-sticking'**







S  
T  
E  
P  
  
L  
A  
D  
D  
E  
R



# Role Play Recording Sheet



Name:

Date:

Session #:

Description of role play:

Other people involved:

Your Goal in Role Play:

Evidence testing used in role play:

SUDS Record:

Time	SUDS rating
Initial .....	
1 minute .....	
2 minutes .....	
3 minutes .....	
4 minutes .....	
5 minutes .....	
6 minutes .....	
7 minutes .....	
8 minutes .....	
9 minutes .....	
10 minutes .....	

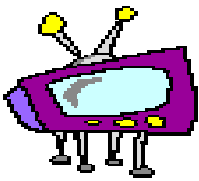
# Step Ladder Diary

W/S: K

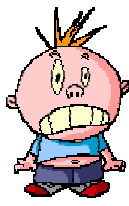
This sheet is to be used to record your progress on your step ladders. Please use it to describe: what you did, when you did it (including how long it took), and how nervous you both *expected* to be and *actually* were. The last column asks you to jot down any comments about the experience. If you were able to stay in the situation for a reasonable amount of time, what tools did you use. If you experienced a great deal of difficulty, what were some of the reasons for this.

The number scale *below* can be used to help you record how nervous and anxious you expected to be and how you actually were.

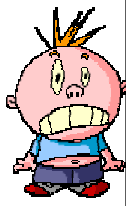
0	10	20	30	40	50	60	70	80	90	100
None		Mild		Moderate			High			Extreme



Situation /  
Event



Expected  
Anxiety  
(0-100)



Actual  
Anxiety  
(0-100)



How long  
in event/  
situation



Describe what you did (evidence testing, relaxation exercises, breathing, etc.) to stay in situation  OR what made it difficult to do this.



# My Journal-Session #

Take some time to record any important thoughts, and homework assignments. The journal page can be used as a reminder of the things you learned in this session, a way of checking your progress and to remind you of your homework.

DATE: \_\_\_\_\_

*Some important points I learned Today: this session:*

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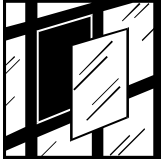
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## HOMEWORK ASSIGNMENTS

## ACHIEVED

Yes      No

_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>



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# Session #