

Think better,

Learn to change the way you think and you could conquer depression and anxiety without drugs. Barbara Lantin reports on an effective do-it-yourself therapy

Illustrations Brett Ryder

Next time you visit your doctor, take a look around the waiting room. On average, up to a third of the people sitting there will be seeking help for mental health problems, according to figures from the World Health Organisation. One in four of us will suffer from depression at some time in our lives.

Those who visit their GP are likely to be offered antidepressants (in 2005, 27.7 million prescriptions were written at a total cost to the NHS of £338 million) or possibly counselling. But research suggests that many of these people would benefit from a newer kind of therapy.

Cognitive behavioural therapy (CBT) is a treatment that aims to change the way people feel by altering the way they think and behave. It is recommended by the government's health watchdog, the National Institute for Health and Clinical Excellence (NICE)

and, last year, a major report supported by the Royal College of General Practitioners and leading mental health charities called for 10,000 therapists to be trained to deliver CBT to all those who need it.

CBT is based on the idea that it is not events themselves that upset us and disturb our emotional wellbeing, but the meaning that we give these events. For example, a person who suffers from panic attacks may

believe that they are going to have a heart attack and die, while somebody with depression may feel that the future is completely hopeless.

'Some individuals, when faced with a difficult event such as a relationship break-up, can tell themselves that it is natural to feel low, that they must give themselves time to grieve and that these feelings will pass,' says Paul Gilbert, professor of clinical psychology at the University of Derby and author of *Overcoming Depression*.

'Others will feel that they are never going to make proper relationships: their views of themselves, their worth and the future are much more negative. They become locked into a spiral of increasingly negative feelings. If we can interrupt that

cycle, by helping them to learn how to challenge some of the negative meanings they put on things, they may gain more control over their feelings and moods.'

It was an American psychiatrist and psychotherapist

called Aaron T Beck who, in the 1960s, first focused on working directly with people's thoughts as a way to help them with their emotions and moods. He realised that although people were not always aware of the thinking behind their emotion, they could be taught how to identify and change it.

The thinking patterns that underlie depression and anxiety may have arisen from childhood experiences –

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feel better



for example, a child who only received affection when he performed well at school might become an adult who believed that people would reject him unless he was successful. But unlike psychoanalytic psychotherapy, CBT focuses more on the present than the past.

'A lot of psychological problems are due to faulty learning, which can be unlearned,' says Dr Lynne Drummond, a consultant psychiatrist at South West London and St George's mental health NHS trust in London. 'CBT works at solving people's problems in the here and now. Part of it is teaching people to become their own therapist, giving them techniques they can use themselves.'

There is evidence that CBT can help with a wide range of mental health problems including anxiety, addiction, depression, panic, phobias, obsessive compulsive disorder and eating problems. It is also used with personality disorders such as schizophrenia.

At the start of the therapy, the client tells the therapist their reasons for seeking help and the goals they want to work towards. Six to eight sessions may be all that is needed for mild depression, but weekly meetings for up to nine months are common for more serious problems.

According to Professor Gilbert,

CBT 'gently challenges' a client's beliefs. 'It needs to be conducted in a kind and supportive way because facing up to fears and depressions can be very frightening to start with. If a person has panic attacks, we would empathise that panic attacks are horrible, but are much worse if we believe that something terrible will happen. So we work out how they can help themselves see that, as frightening as panic is, it is not dangerous and will pass.'

'People with depression can feel exhausted and want to stay "at the back of the cave"'. Unfortunately, if we do things such as staying in bed and ruminating, we will not get better. Acting against these feelings and making ourselves go out, focusing on our efforts, no matter how small can, with encouragement, gradually help to override the depression.'

'When people come to recognise that they are not the inferior, hopeless people that they thought they were, or that they can cope with fear as a normal emotion without the terror – facing the difficulties of life becomes a lot easier.'

Homework is an essential part of CBT. This might involve noting when incidents provoke feelings of anxiety or depression, recognising the thoughts that come with them, and then trying to find alternative thoughts and ideas.

'CBT helps people to learn skills that they can use throughout their >

Feeling low? Try this at home...

Anybody with serious mental health problems should visit their GP and discuss appropriate treatments. For those who feel a little low from time to time – and who doesn't? – Professor Gilbert offers the following tips.

- Identify your distressing thoughts such as discounting the

- positives and amplifying the negatives, self-blaming or self-attacking. Then consider:

- What you would say to a friend you cared about who was in the same situation as you are.
- What would you like somebody who cared about you to say to you to support and encourage you.

- How you would see things if you were not depressed.

- What other ways there be might of viewing your situation. 'Try to spend time on each of these, really focusing on them and how they feel for you,' advises Professor Gilbert. 'Changing our minds can take time.'