Religious Cognitive Behavioral Therapy
(Buddhist Version)

10-Session Treatment Manual for Depression
in Clients with Chronic Physical Illness

Joseph W. Ciarrocchi, Ph.D.
Debbie Schechter
Michelle J. Pearce, Ph.D
Harold G. Koenig, M.D.
Jean Kristeller, Ph.D.

Buddhist Version by Jean Kristeller, Ph.D.

With contributions by Rebecca Propst, Ph.D.

This workbook is a variant of the treatment protocol
originally designed by A. T. Beck, M.D.

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*Please cite appropriately*

Contact Information:
Jean Kristeller, Ph.D.
Department of Psychology
Indiana State University
Terre Haute, Indiana 47809
Jean.Kristeller@indstate.edu
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1) PART I: THERAPIST TRAINING

Session Length and Time
Each session is 50 minutes long. You may find that you run 5-10 minutes longer on the first session depending on how long it takes to gather the assessment information. I have indicated how long you should spend on each section in the session. If you stay within these guidelines your session should be 50 minutes long. That said, there is a lot of information in the manual and at times, depending on what the client brings to the session, you may find that you are unable to cover all of the material in the allotted time for the session. You can add a few minutes to the session, if necessary, and if you have time, but please do not add more than 10 minutes. The material that is not covered in one session should be covered after the homework review in the following session.

Session Format
Each session follows the same format:
1. Goals of session
2. To do before the session begins
3. Materials needed in client workbook
4. Set the agenda
5. Review of Home Practice Activities
6. Introduction to topic(s) for that session
7. Exercises to be completed in session
8. Home Practice Activities
9. Terminate session

Scheduling Sessions
It will be easiest for the client if you are able to choose the same meeting time each week. Please emphasize in the first session (and throughout treatment, if necessary) how important it is that the client complete all ten sessions. Discuss with the client how he can contact you should he be unable to make one of the sessions. If this happens, please reschedule the session as soon as possible.

Client Information
You can decide on the best way to keep track of the information you collect from your clients. It will be helpful for you to have detailed notes for each session that you can refer back to in later sessions. This is what the Therapist Workbook for each client is for. This way you can track exactly what the client is following and completing. Suggest a separate Therapist Workbook for each client for notes purposes.
Differences from CBT intervention

As early as possible in treatment, the goal is to socialize clients into the treatment model in order to facilitate communication between counselor and client. The framing of each aspect of treatment reinforces both traditional CBT and religiously integrative CBT. To use a metaphor to capture what is intended, think of a two-dimensional drawing of a square placed into a three-dimensional cube. Everything within the square is contained in the cube, yet the cube contains so much more. In the same way, conventional CBT is like the square that fits into religiously integrative CBT. When a client discusses symptoms and reactions to symptoms, counselors will want to frame this material in terms of traditional CBT models. Counselors also listen with a "third ear" for how this material can also be framed within a religiously integrative CBT model. Many examples will be given throughout the manual, the worksheets, and training.

Workbook/Home Practice Activities

Your clients should be given a copy of the Participant Workbook that has been written to complement this manual. Please familiarize yourself with the Therapist Workbook (which is an almost identical copy of the Participant Workbook). For each of the ten sessions, there is a home practice activities instruction page. This is the same as the Home Practice Activities section in your manual. You will review the assignments with your client at the end of each session. Have them follow along in their workbook as you review the assignments for that week. The pages that follow the instruction sheet in the Workbook will be completed by the client during the week. For example, in the earlier sessions, clients will complete a daily thought log. Sometimes you will complete a worksheet, or part of a worksheet, with your client in session. This will be clearly indicated in the manual.

The home practice activities are critical for the effectiveness of the treatment. (Note: we are calling them “home practice activities because that is a more inviting term to clients than is “homework,” although in the manual the word “homework” may be used. Please try to refer to this as “home practice activities” when you are speaking with your client). It is very important that clients understand from day one that they are expected to complete the Home Practice Activities. The more they put into treatment, the more they will get out of it. At the same time, we need to remember that we are working with a depressed population who will also be limited in some degree by their medical illness. Therefore, when clients do not complete their homework, praise them for what they did do (e.g., think about the assignment) so that they do not become discouraged. Focus the conversation on what barriers they faced and problem solve with them so that they will be more likely to complete the homework that week. It is much better for you to take responsibility for the incomplete assignment (i.e., not explaining it well enough or helping the client to anticipate barriers) rather than to let the client feel discouraged about his/her inability to do yet another thing in their life. We don’t want them to feel like they failed!
It is also very important that clients have their completed home practice activities with them when they meet with you (i.e., they need their workbook with them during each session, as do you). Be sure to emphasize this point at the end of each session.

**Adherence to the Manual**

It is important that you closely adhere to the manual throughout treatment. Sessions will vary between clients based on the specific problems, beliefs, and behaviors of the individual clients. However, the information you teach, the order in which you teach it, and the way in which you teach it should be similar across clients.

Suggested counselor dialogue in the Manual is provided in italics throughout. Counselors do not have to use the exact wording given; however, it is important that the same information is conveyed to the client. The manual specifically includes much of the counselor dialogue so as to make the delivery of treatment as easy and efficient as possible for the counselors. If you are using the telephone, you can read the dialogue (without sounding like you are reading!). If you are using Skype, you can have the manual with you and refer to it frequently as you deliver the treatment.

**Handling a crisis**

Patients should be given emergency contact numbers before they begin treatment. If an emergency situation arises, you should take the necessary measures to stabilize the patient and to ensure the safety of those in danger.

**Training**

All therapists should receive initial baseline training. We will be developing this training in days to come depending on financial support that we can raise. We are hoping to develop an online training program for this purpose.

**Background on Buddhist CBT Approach**

Buddhist approaches to understanding and managing emotional distress are surprisingly compatible with cognitive-behavioral therapy perspectives and theory. There is a strong emphasis within Buddhism on the extent to which people create their own suffering and emotional distress through how they conceive of stressors, and how they may over-identify a sense of ‘self’ with difficult situations.

Core to Buddhist beliefs are the Three Jewels, the Four Noble Truths, and the Sacred Eightfold Path. The term ‘jewels’ is used metaphorically to refer to something ‘rock solid’ and beautiful. The Three Jewels are the Buddha, the Dharma (or Dhamma), and the Sangha. One way to conceptualize the Buddha is NOT as a god, which he denied being, but as an enlightened example of how to live life to be free of suffering. The Dharma (the ‘way’) comprises the teachings of both the Buddha and of other enlightened or wise individuals. The Sangha (community) may be a formal religious community or more broadly, a group of like-minded and supportive friends.

The Four Noble Truths are that: 1) Suffering (*dukkha*, often translated as stress, pain,
depression, etc.) exists; 2) There are causes for such suffering; 3) Suffering can end; and 4) There are ways out of suffering. The primary causes of suffering, from a Buddhist perspective, are conditioned attachment and avoidance, and over-attachment to a particular view of the self. This perspective is notably compatible with contemporary psychology, and markedly distinct from the Judeo-Christian-Islamic perspective of such ‘suffering’ arising from sin, from punishment from God, or ‘fate’. In the context of this manual, the suffering is manifested in depression and in whatever struggles are integral to dealing with a serious medical diagnosis, such as cancer.

The Sacred Eightfold Path defines core ways out of suffering. These core practices include conducting oneself appropriately in regard to speech and action; using meditation to cultivate awareness and equanimity; and cultivating ways of viewing and thinking about experience that are wiser and more balanced. Again, these elements are largely compatible with the messages of this treatment manual. Another very important aspect of Buddhism is cultivating compassion and acceptance, both for oneself and others.

Also core to Vipassana or Theravadan Buddhist teachings and of particular relevance to the purposes of this manual are the Four Immeasurables: loving kindness (*metta*); compassion, sympathetic joy, and equanimity. These are to be directed both to oneself and to others, and may be cultivated both within a meditation practice and throughout one’s daily life. This core value placed on compassion is compatible with the value placed on cultivating love for others as being central to spiritual engagement and the intention of God in other religions. The manual draws on the loving kindness practices in particular. Equanimity is core to the process of observing, rather than reacting to, conditioned thoughts.

Another core principle of Buddhism is *karma*, a concept that is sometimes misinterpreted in a fatalistic way, in the sense of pre-destination, but which more appropriately means simply that all things are causally connected. Religious distress for Buddhists can sometimes become related to misinterpretations of this concept, particularly for something like a major medical challenge such as cancer, in that the cancer might be viewed as being caused by unrelated, previous actions in one’s life (or in a former life). This is similar to the belief that a Christian might hold that he or she has developed cancer due to sins that have been committed. A Buddhist might also possibly hold that he or she is responsible for their depression because they have not been practicing Buddhism or meditation well enough.

Two other concepts, reincarnation (drawn from the Hindu influences on Buddhism) and *nirvana*, may have very different meaning for more traditional Asian Buddhists and for American Buddhists. In general, only quite traditional Buddhists will believe in reincarnation, the release from which is achieved by reaching the highest level of enlightenment, or *nirvana*. For other Buddhists, *nirvana* is a state achieved by very few through following the tenets and practices of Buddhism so completely that they might experience enlightenment in this life time. However, it is unlikely that either would be brought up or be of central concern within the context of using this manual.
There are numerous varieties of Buddhism, much as in Christianity. For an Asian client, the type practiced may depend mostly on their country of origin. The primary divisions are Mahayana Buddhism, practiced primarily in China, Japan, and Vietnam. Individuals from countries in southeast Asia are most likely to practice a variation of Theravadan Buddhism. Those of Tibetan descent will practice Vajrayana Buddhism. Yet within each of these, there are separate denominations with considerable variation in practice and belief, much as in Christianity. For example, Zen Buddhism is a type of Mahayana Buddhism, mostly identified with Japan (where there are two Zen traditions, Soto Zen and Rinzai Zen) but also widely associated with Korea. However, Zen Buddhism began in China as Chan Buddhism, and is also practiced in Vietnam (the prominent Vietnamese teacher, Thich Nhat Hanh, is from the Zen tradition). Nicheren Buddhism, beginning in Japan in the 13th century, is sometimes referred to ‘evangelical’ Buddhism, focuses on the repetition of the mantra ‘namu Myoho renge kyo’ and has many followers in the U.S. (particularly in the Sokka Gakkai, a sub-sect with political overtones). Shin, or “True Land”, Buddhism, founded in the 12th century, with many sub-divisions, is the most popular form of Buddhism practiced currently in Japan.

American Buddhists may associate themselves with one of these traditions but often draw from more than one in terms of their personal experience and practice. In the U.S. Zen Buddhist influences have been important since the early 20th Century, increasing following WW II. However, most mindfulness meditation practice being taught today comes out of S.E Asian Theravadan or Vipassana traditions, but mindfulness is also associated with Zen Buddhist practice. Tibetan practices, which began to have influence in the U.S. in the early 1970s, have become increasingly popular due to the teachings of the Dalai Lama.

Buddhism, like other Asian-based religions, intertwines religion, psychology and philosophy. This may make it easier to adapt secular CBT manual materials to a Buddhist framework than to other religions, but also presents the challenge that many people, particularly Americans, may identify as Buddhist but primarily through being engaged in various types of meditation practices. Asian Buddhists may be more familiar with Buddhist texts or chanting sutras (extended verses), sometimes using a string of 108 beads, in a way similar to saying a rosary, but they may be less likely to have a daily meditation practice.

One core element of this CBT program is encouraging individuals to draw more deeply on the expressed wisdom on their religious-spiritual tradition by incorporating memorized verses into daily meditative practice. Unlike Christianity, there is no single volume within Buddhism comparable to the Christian Bible. Furthermore, for lay practitioners, Buddhism is not primarily a textual religion, but one comprised of a set of practices. In contrast, most Christians, even if they have not read the complete bible, will be aware of and familiar with most of the textual material used in the Christian version of the manuals. There simply is no comparable set of materials used in this way in Buddhism.

Most of the verses for memorization and use in contemplation in this version of the
A more meaningful issue is that, using these verses as the focus of meditation practice is not widely done in Buddhism. The most widely used type of meditation by American Buddhists is mindfulness meditation or Vipassana practice. Since this style of meditation is being used in the non-religious CBT condition as a control for religious or spiritually-oriented contemplative practice, it will be important to emphasize to Buddhist participants the value of adding contemplation on the verses provided, perhaps in addition to their usual practice. It is also the case that some Buddhist approaches to practice include repeating meaningful phrases silently to oneself. For example, this is more common in Tibetan practice; the Rinzai school of Zen Buddhism uses koan, or questions, the responses to which transcend logical solution; and loving kindness meditations, increasingly used within mindfulness practice, involve repeating phrases silently to oneself.

For those therapists also using the parallel Christian-oriented CBT manual, a final, and very important, challenge is a fundamental difference in theology between Buddhism and Christianity. As noted above, the Buddha was not considered a manifestation of a transcendent God, nor is a belief in ‘heaven’ nor ‘hell’ core to Buddhism. There is no concept of being ‘saved’ by God, or of intercessory action by a god. At the same time, there are many Buddhist stories that depict Buddha as a god and that refer to miraculous powers, reincarnation, a heavenly-like paradise, a hell populated by demons, such as Mara, and other associations that seem related to a God-like being. Asian Buddhists are more likely to resonate to such images, but they are still unlikely to hold the same parallel meaning as they would to a Christian. Therefore, in relation to the emphasis and purpose of this manual, the focus will be brought back over and over to the core teachings: that the power to heal suffering lies within, and relief from suffering lies in using the teachings of the Buddha in a way that is personally uplifting and powerful.

**Easily read sources on Buddhism include:**


**Also used in this Manual:**


**Glossary**
The following are terms explained above and referred to again elsewhere in the manual.

Dharma: the ‘way’, comprises the teachings of both the Buddha and of other enlightened or wise individuals.

Dukkha: stress, distress, pain, depression, etc.

Karma: all things that are causally connected, but sometimes interpreted in a fatalistic way, in the sense of pre-destination.

Mara: the Buddhist image of the temptress/the devil, but generally used metaphorically.

Sangha: the Buddhist community, which may be a formal religious community, a meditation group, or a group of like-minded and supportive friends.
Part II: Individual Sessions RCBT Manual

SESSION 1: Assessment and Introduction to RCBT

Goals of Session:
There is a lot packed into this session. You will likely need 60 minutes instead of 50 minutes. You need to allow time for subject to respond; this is critical, even if time runs out and the session goes over 60 min (just record how much time it takes in Therapist Workbook). Be careful that this session does not turn into a lecture by the therapist.

1) To introduce clients to the basic format of the program
2) To begin to establish rapport by allowing the client to discuss his/her basic problem, life circumstances and religious beliefs with the therapist
3) To present the basic rationale for the treatment
4) To teach clients how to monitor their activities and mood.

Notes:
- Key sections and suggested counselor dialogue are highlighted in yellow.
- Some of the material in the Manual is repeated in the Patient/Therapist Workbooks. We have highlighted in blue some of this overlap. Note that there may be other sections that are the same in both, including the Home Practice Activities that are not highlighted.
- Suggested counselor dialogue in this Manual will be provided in italics throughout. Counselors can adapt according to their own needs.
- Use the Therapist Workbook to keep track of your client’s responses and comments for each of the ten sessions. It will be helpful for you to have detailed notes for each session that you can refer back to in later sessions.
- The use of he/his and she/her are alternated throughout the Manual.

Materials Needed in Client Workbook
- Homework Assignment Worksheet
- Thinking and Depression Overview
- Activity and Mood Monitor
- You may wish to pencil in specific time goals for each section in order to better track time, depending on ‘start time’: i.e., 2:20; 2:45, etc.
Rapport Building and Introduction of Basic Format (10 mins)

1. Counselors introduce themselves and invite the client to do the same.

**Remind the client that they have been assigned to the CBT treatment group that will utilize their spiritual and religious resources in treatment]

*Before we get into the program itself, I want to take some time for us to get to know each other briefly. I will start by sharing a few things about myself.*

Introduce yourself and provide the client with your professional credentials and perhaps share where you received your training. Also clarify whether you have a personal background in Buddhism, but indicate that regardless, you value and respect the importance of each person’s religious beliefs and experiences:

*Even though I am not a [Buddhist/Shin Buddhist/Zen Buddhist], I believe that one’s spiritual approach can help one to deal with one’s problems. I will help you make use of your beliefs and background in these sessions to deal with your problems as it seems appropriate and you feel comfortable with it. But since I may not have the same perspectives as you do, it will be important for you to let me know if I don’t seem to understand ways in which you believe or make use of your religious and spiritual experiences.*

2. Counselors review with client the purpose of the study, its intentions, and its goals.

*As you know, this treatment is designed to help people who are suffering from depression and who are also dealing with a medical illness or disability. Having a medical illness or disability is challenging and can be very stressful. We also know that your challenges go far beyond just your physical body. Many people facing a medical illness notice changes in their mood, thoughts, and relationships. Some question their identity and the meaning and purpose of their illness. Many struggle with issues related to their faith and spiritual experiences.*

3. Reassure clients again that we will do everything possible to ensure that all information will be confidential. Ask for questions

4. Counselors inquire about the client's expectations and hopes regarding the treatment.

5. Counselors invite clients to ask any questions they have about treatment, and clarify any misunderstandings that may have cropped up when asking about client expectations.

6. The completion of *all* ten sessions is very important. Clients should be informed that each of the ten sessions offers different information. They should also be told that while the treatment is effective for depression it can only help them if they make an active commitment to participate fully in therapy. Emphasize that this is a partnership. If they cannot make a session, they should contact you, the therapist, as soon as they know that they will not be able to make the session and schedule an alternative time for that session.
Introduce Mood Rating Scale (2 mins)

**This should be BRIEF each week. Only allot 2-3 minutes at the most each week for this check in.

Each week we will ask you before we begin to rate what your mood was during the week. Using a scale ranging from 0 to 10, where 0 is the worst that you’ve ever felt in your life and 10 is the best you’ve ever felt, what was your mood like on average this week?

*Note: At times you may then ask what made their week negative or positive. This is not necessary this week because you will be assessing the reasons for their participation in treatment in a few minutes.

Initial Assessment Questions in Spiritual/Religious Domains (10 mins)

The questions below (partially taken from Ciarrocchi, 2002) provide one way to explore clients’ spiritual and religious experience. They should be used flexibly and do not necessarily have to be asked in this order, although there is a certain logic in the way they are currently arranged. Regardless of where you are personally coming from, be very accepting of the client's expression of their faith and spirituality.

1. What role, would you say, spirituality or religion plays in your life?

2. Do you attend religious services, a meditation group, or a sangha? What type? How frequently?

3. Do you pray or meditate? How often? In what way?

4. Do you enjoy reading religious or spiritual literature? Can you tell me what you like to read?

5. Is there anything else you’d like to tell me about your religious or spiritual practices? For example, how long you’ve practiced Buddhism, or the type of Buddhism you practice?

6. What effect, if any, does . . . [the issue that brings the person into treatment] have on your spirituality?

The reason for gathering this information is to obtain a solid understanding of the clients’ faith tradition, religious beliefs, language and sacred symbols used to express their beliefs, so that this can be integrated into therapy in a client-centered way. Of critical importance is that therapists begin where clients are in terms of their spirituality, utilizing whatever spiritual resources clients may have. Therapists should avoid arguing with patients about spiritual or religious matters, and instead go with wherever patients feels comfortable with (at least to start), while gently
introducing more explicitly religious material to them over time as they are able to receive it.

**Assessment of Problems (5 mins)**

After the initial introductions, **ask the client what problems led them to decide to participate in the current treatment program.** It will be helpful for you to have already read through the client’s assessment materials so that you are somewhat familiar with the reason he is seeking treatment and his medical issue(s). Ask the client to state the three to four reasons they are seeing treatment. Or, ask them to say in a sentence or two why they are seeking treatment. These prompts will help to keep this section brief. Paraphrase back to the client to make sure that you understand him. **Do not spend more than 5 minutes on this assessment.**

Try to **empathize** at least once with each problem that is presented. For example, *"It sounds like you are feeling ___________________?"

To gain rapport with the client, summarize through reflective listening the major struggles you have heard and any personal or environmental strengths/resources you have noticed.

It is also not too early to ask the client to identify which aspects of their emotional distress and environmental problems they might like to work on during the treatment:

> Of all the different things you’ve mentioned, which ones stand out for you as creating the most difficulty, and which you want to work on together during the sessions?

**Presentation of Rationale for Treatment (8 mins)**

As early as possible in treatment, the goal is to socialize clients into the treatment model in order to facilitate communication between counselor and client. In general, socialization is a dance between conventional cognitive behavior therapy (CBT) and religiously integrative cognitive behavior therapy (RCBT). The framing of each aspect of treatment reinforces both traditional CBT and religiously integrative CBT. As noted earlier think of a two-dimensional drawing of a square placed into a three-dimensional cube. Everything within the square is contained in the cube, yet the cube contains so much more. In the same way conventional CBT is like the square that fits into religiously integrative CBT. When a client discusses symptoms and reactions to symptoms, counselors will want to frame this material in terms of traditional CBT models. Counselors also listen with a "third ear" for how this material can also be framed within a religiously integrative CBT model. Many examples will be given throughout the manual, the worksheets, and training.
CBT Model Overview

Our goal is to provide the most up-to-date treatment available to help you with your difficulties with depression and your medical condition. Recent research has identified a number of treatments that are called "evidence-based". This means that a sufficient amount of research has determined that a specific treatment is effective in reducing certain symptoms. We have selected one of the most well researched evidence-based treatments for depression known as cognitive behavior therapy (or CBT). This treatment is based on the idea that emotional distress is in many ways associated with how we view a situation, and that we can obtain emotional relief by changing our views about the events in our life.

The most effective way of employing the model is to use material the client has given you from this early assessment. Ideally, pick some emotional reaction that appears connected to how the client is viewing the situation. Potentially good examples include getting angry at those who do not anticipate their needs, getting depressed because they imagine people are viewing them in certain negative ways, giving up on activities because they don't believe they have sufficient support or the proper skills, etc. The idea here is not to prove anything to the client, but simply show how things tend to go together. Never argue with the client. Remember the adage, "Win an argument and lose a client".

If you do not get any material from the client you can share a commonly used example:

Let me share an example from the workbook that can help illustrate my point. Please feel free to follow along with me. It says: “Imagine that you have a flat tire on a deserted highway and do not have anything to change the tire with, including a car jack. As you are standing there stranded, your next-door neighbor drives by and looks up briefly but keeps going. How would you feel about the fact that your neighbor kept driving? What would you most likely be telling yourself about the situation?”

Now let's imagine, further, that you see your neighbor the next day and he comes over to you and apologizes for driving by you. "I'm so sorry I couldn't stop; my son fell and was bleeding from his head and I was rushing him to the emergency room." How might you be feeling now? What changed? What are you now telling yourself about the situation that is different from when you were standing on the road?

NOTE: If the patient was provided the Workbook ahead of the first session, it would be helpful to find out whether the patient has already read the material. If the sections have already been read, the therapist or patient can summarize and discuss the illustration. This might also apply to future sessions. If the section hasn’t been read, a helpful alternative may be to ask the patient to read the section and share reflections.

Having some discussion around this idea will get across what you will be looking for in treatment. (You can have the patient turn to page 2 in the Workbook: “Thinking and Depression” for a description and pictorial model),
The main point is how we view a situation and interpret it often drives how we end up feeling and what we do. Research has shown that the perceptions and interpretations of depressed individuals are usually not accurate. They have a greater tendency to jump to conclusions and see only the negative side of an issue. The way you look at a situation in turn will influence your behaviors, and thus a vicious cycle is set up. Together you and I will attempt to identify the ways of looking at situations that make negative emotions worse, with the idea of changing the situation or the way it is being interpreted.

Again at this point it is important to pause so as to ascertain the extent to which the client has understood and agrees with these points. At this point, complete agreement with this framework by the client is not necessary. However, this process should have been initiated. Ask for questions.

Also underline the fact that these points will be emphasized again and again in the remaining therapy sessions. In addition, an explanation and diagram of this model is provided for clients in their workbook. You can tell clients about this resource and have them read it on their own this week. In other words, if this session feels like a lot of information at once, it is! As such, a summary of this information in the session is provided in the workbook so that they can refer back to it during the week.

Religiously Integrative CBT Model Overview. (10 mins)
Extend and emphasize the rationale by giving a religious/spiritual basis for it. If the client asks about the specifics of your own beliefs or faith, you can return the focus to the client by reminding her that the purpose of the treatment is to integrate her faith/beliefs/spiritual practices into treatment. As such, you will want to learn about what she believes and practices, as this is what is important for the success of treatment and helping her to feel better. The following can be included. Please use prompts and questions about clarity of the material to break up lengthy therapist dialogue as you see fit, both here and throughout the entire manual. Note that one change in the Buddhist version is generally avoiding the word ‘faith’, as it does not carry the same meaning as in Christianity. 'Faith in God' is not really a core element, especially for American Buddhists. This is also true for the word/practice of ‘prayer’. However, in Japanese Shin Buddhism, prayers are used, and in this group, and some related Buddhist traditions, there is a stronger belief that one can pray to a manifestation of the Buddha, much as one might pray to the Christian God.

What is innovative about this treatment is that we want to use as many of the important resources available to people to combat their depression and to make their lives more effective. As we discussed earlier, one of the most overlooked resources people have is their religious beliefs and spiritual practices.

Call attention, as appropriate, to your referencing of the following workbook material:

The idea that our thoughts and assumptions play an important role in influencing our emotions and our behaviors is a very common idea in Buddhism. Indeed, for Buddhists
The cognitive behavior model is 2500 years old! Let me give you some examples from the Buddha’s teachings:

The very first verses of the Dhammapada, one of the oldest collections of Buddha’s teachings, state:

“Our life is shaped by our mind; we become what we think. Suffering follows a corrupted thought as the wheels of a cart follow the oxen that draw it. Joy follows a pure thought like a shadow that never leaves.” The Buddha, Dhammapada, 1-2.

The Dhammapada’s perspective on ‘thought’ (Ch. 3) also speaks to this basic principle. According to the Buddha, we don’t need any heaven or afterlife to look for the devil. The mind itself – quick, fickle, and exceedingly difficult to focus – is the realm of Mara (the Buddhist image of the temptress/the devil). In the mind’s depths lie untapped sources of great power: desires and drives of such magnitude that the mind is rarely under any real control; it simply moves about as it likes. And the method for training the mind is meditation. One might consider the material of the unconscious as clay, and the shapes the clay has taken as strong desires, fears, attitudes, and aspirations that determine a person’s behavior. Meditation allows access to that clay, softens it, and returns it to the potter’s wheel. (adapted from Easwaren, pp. 83-84)

The Buddha taught:

“Hard it is to train the mind, which goes where it lies and does what it wants. But a trained mind brings health and happiness. The wise can direct their thoughts, subtle and elusive, wherever they choose. ... Those who can direct thoughts, which are unsubstantial and wander so aimlessly, are freed from the bonds of Mara.” (Dhammapada, 35-37).

I’ll be providing many more examples from the Buddha as we go through this treatment together – and I’ll invite you to look for other examples in any material or readings that you have as you may be more familiar with some aspects of Buddhism than I am.

Introduction to role of behavior to change mood

One of the ways we can change our thinking is by changing what we are doing. Some activities or behaviors give us a sense of reward, satisfaction, or pleasure. These positive activities produce positive or good moods. For example, if you talk to a friend or did a job well, you will feel good. However, if you failed at something or got a parking ticket, you will tend to feel in a bad mood. Therefore, in this treatment we will focus not only upon changing our thoughts and perspectives but also upon changing some of our behaviors and activities so that we will feel better about that aspect of our lives as well.

Introduce Concept of Renewing Your Mind (5 mins)

*It is very important that you spend adequate time on this section and provide a thorough explanation for why memory verses will be given each week. This section provides the “buy-in” for the client for this critical part of treatment.

One of the ways we will begin is to explore our thoughts and perspectives from a Buddhist perspective. This may happen in three ways: by accepting that side of ourselves...
that has these thoughts; by realizing that such thoughts are only one perspective on reality and that they might be replaced with other thoughts; and by replacing them with reflections on the teachings of the Buddha. The Buddha meant these teachings to be useful regardless of who we are and where and when we live. As we meditate on these words, they can become alive in us and change us from the inside out. Think about what happens when you plant a seed. The kind of crop you grow depends on the kind of seed you put in the ground. If you plant a tomato seed, don’t expect to grow cucumbers! The same is true for the “seeds” you plant in your heart. If you plant positive seeds of truth in your heart, Buddha’s words and wisdom, you will begin to think in the way that the Buddha thought and will reap the good and wise things he said about our lives.

[Note to therapist: if the person has identified that they already have a breath-awareness and/or mantra-based meditation practice, it is important to acknowledge this – and that you understand how valuable that can be. But then point out that there are also Buddhist traditions that include repeating longer verses as a meaningful part of meditation practice. Doing so may also be particularly helpful for coping with frequent negative and unhelpful thoughts, in that memorizing such material keeps the wisdom of the Buddha more easily available to the mind. IF the person resists the idea of modifying their meditation practice in this way, ask them if they would be willing to try it for a few weeks.]

[elicit feedback from client]

Each week I will give you a short verse or reading that is relevant to the topic we are studying. Part of your homework assignment each week will be to memorize these words. The more of Buddha’s wisdom you have hidden in your heart and mind, the easier it will be to challenge and let go of your negative thinking, a skill we will learn in a few weeks. At the beginning of next session, I will ask you to say these words that you have memorized to me, as a way to review what we learned in our previous session. If you are not already familiar with meditative practice, I’ll also teach you an effective way of meditating on these words of wisdom, called contemplative/meditative practice, that will help you remember and apply Buddha’s way of thinking in your life. Do you have any questions about this part of the treatment?

Home Practice Assignments (10 mins)

Please open your Workbook to Session 1, page 1.

We are just about out of time for today. The last thing we will do in each session is go over your homework assignments, which are found in your workbook. Each session after this one will begin by reviewing your homework assignments. It’s very important that you complete all of your assignments. This treatment will only be effective if you are spending the week putting what you learned in your session into practice. I only have you for 50-60 minutes each week. Therefore, most of the change you will experience in your life will
occur outside of these sessions. The more you put into this treatment over the next ten weeks, the more you will get out of it!

1. **Memory Verse**

   **This week your memory verse is the following:**

   *Light the lamp within; strive hard to attain wisdom. Become pure and innocent, and live in the world of light.* (Dhammapada 236)

   **[Note to Therapist]**: You should ask the person if he or she is familiar with the Dhammapada. If not, explain that the Dhammapada is a collection of several hundred short wise sayings or verses that are attributed to the Buddha, and that the program will be drawing on these and on other material. If someone inquires as to which translation of the Dhammapada is being used, you can share that most are taken from the edition translated by Eknath Easwaren. Note that there are many translations, and that this version was chosen because the language is the most colloquial, but that if they prefer, they are free to use the equivalent verse, with the same or equivalent number, from another version of the Dhammapada if they prefer.

   Write the verse down and post it somewhere you will see it often, perhaps on a sticky note placed on your mirror or fridge. You may want to make several copies and post them in places you will see it throughout the day.

   Make sure clients understand why they are being given this assignment and the importance of taking the time to commit the verse to memory.

2. **Activity and Mood Monitor**

   Explain to the client that part of the active nature of the treatment is to try out different approaches between sessions to see what works best.

   The goal of the first session's homework assignment is begin developing skills in self-monitoring negative emotions. The goal at this stage is not to change any regular habits. Rather, clients are merely to complete the self-monitoring log as follows:

   **The second part of your first home practice assignment will be to record your daily activities and mood. Please turn to page 4 in your Workbook. The self-monitoring logs in your workbook have a place to record your activities and mood every two hours. Please complete this log daily. It may be easiest to fill out the activity log twice during the day. For example, you could record all of your morning activities when you eat lunch and all of your afternoon and evening activities just before you go to bed. I would like you to do this until our next appointment.**
This record will give us some information as to which activities may lead to better moods and which activities may lead to worsened moods. I will show you how to do it by helping you fill in the spaces for the present time period. For example, right now the time is ____________. What types of activities have you been doing the last two hours, especially the last half hour or so? ________________________ Finally, what is your mood right now? ________________________ Generally, you should record your mood and activity as they exist at the end of the time period.

[Or, you can have the client fill in her activities and mood so far that day, rather than just the last two hours.]

The following principles should be communicated to the client regarding self-monitoring. These instructions are included in the client’s workbook. [Ask the client to turn to the first page of her workbook and have her follow along with you as you review these principles.]

a. *Keep the self-monitoring log with you throughout the day and record your activities as close as possible to the end of the time periods.*

b. *Record the activity in a very few words. For example, you could record "went out to dinner" or "washed my clothes" or "read a book" or even "watched TV."*

c. *Immediately after recording your activities, record your mood.*

d. *Purchase a notebook to put the logs in, so that you will have a record of your activities. We will make use of them later.*

e. *Make sure you have your logs with you during each session. They are necessary for the rest of the program.*

f. *Be sure and include even trivial events on your chart, such as missed the bus or read the newspaper.*

3. Solicit feedback on how the session went today.

**Terminate the Session**

1. End the session by making sure you are both clear on your next meeting time, as well as the homework assignments.
2. Be sure that the client understands that he needs to have his completed homework assignment worksheets readily accessible next week so you can review them together.
3. Thank the client again for the courage he has demonstrated through his willingness to work on these difficult issues.
SESSION 2: Behavioral Activation: Walking in the Light of Buddha

Goals of Session:
1) To reinforce the client's basic understanding of the treatment rationale;
2) To further refine the client's ability to self-monitor mood and activities;
3) To contract with the client to add more positive activities to their daily schedule.

Materials Needed in Client Workbook
- Homework Assignment Worksheet
- Pleasant Activities to Consider
- Planning Pleasant Activities Instructions
- Planning Pleasant Activities Worksheet
- Unhelpful Thinking Styles and Buddhist Reflections

Set the Agenda

Our session today is called “Behavioral Activation: Walking in the Light of Buddha.” We will be examining how our behavior directly impacts our mood and ways we can engage in more positive behaviors to improve our moods. At the end, I will give you a homework assignment based on what we sent over today and another verse to memorize.

[elicit feedback from client at this point]

Before we begin, I’d like to review your mood this week and home practice assignments.

Complete Mood Rating Scale (2 mins)

a. Using a scale ranging from 0 to 10, where 0 is the worst that you’ve ever felt in your life and 10 is the best you’ve ever felt, what was your mood like on average this week?

To keep this section brief, you may find it best to only ask what the client’s mood was like on average, but not why. You can then cover the ‘why’ aspect as you review the thought logs.

b. Indicate that today you will be discussing alternative ways of coping that may be more effective.
Review of Home Practices Activities (10 mins)
It is important to begin each session with a review of the previous week’s homework assignments, as this reinforces their efforts and feeds their motivation to complete future assignments. It also represents an ongoing socialization of the CBT model.

1. **Memory Verse Review:** Ask the client to say last week’s verse to you from memory. If they can’t remember the verse, have her read it out loud from her Workbook (follow this protocol each week). Ask the client to tell you how this verse ties in with the topic of the first session last week.

   *Light the lamp within; strive hard to attain wisdom. Become pure and innocent, and live in the world of light.* (Dhammapada 236)

2. **Inquire about the client’s use of contemplative/meditative practice,** if this is part of their regular practice.

3. **Go over the home practice activities log** with the client, correcting any errors and suggesting that she either write more or less when describing activities, if necessary. Be brief!

4. It is important to **give the client positive reinforcement** for completing the homework at least two or three times during the discussion.

5. **Review with the client any negative emotional experience,** which they tracked by writing it down, or, if they didn’t write it down, what they can recall from memory.

**Tips and Problem-Shooting**
Remember for some depressed individuals it is often difficult to do any activity. If the client collected no data at all, complete the log for one or two events with them.

Clients frequently do not get the hang of this the first time, so it is useful to praise anything that they accomplished and fix things that were not completed correctly in a nonjudgmental manner. The main point of the exercise is to see if they understand the mood-behavior-sequence or saw a pattern emerging.

The counselor uses information from the client’s experiences during the week to further socialize the client into the CBT model. The counselor points out how our beliefs, expectations, or thoughts are closely connected to the way we end up feeling and to what we end up doing.

**Practice: Alternative Ways to View Situations from the Week**
Briefly, you can invite clients to consider alternative ways they could have viewed one situation. Clients are then invited to consider other ways they may have ended up feeling and what other behaviors they might have tried had they viewed the situation in this different way. When client and counselor together work their way through one simple
example, the counselor can point out that, in essence, this is the heart of what they will be attempting to do over the course of treatment. Even though they will need to develop skills in doing this "on the spot" so-to-speak, the main point of the therapy is really not more complicated than what they have just accomplished.

Incorporate Religious Beliefs and Spiritual Practice in Developing Alternative Viewpoint
As they develop the alternative viewpoint counselors can now ask the following:

When you look at your original belief, expectation, or your way of thinking about the situation, are there any approaches or wisdom from your Buddhist beliefs that strike you as helping to generate an alternative viewpoint?

Behavioral Activation: Positive Activities and Walking in the Light of Buddha (15 mins)
Point out from the client’s chart how it is indeed that certain activities lead him to have a more negative mood (this may be a reiteration of above). Indicate also, if this is the case, (which it usually is) that there do not seem to be too many positive activities in his daily schedule. As such, one of the first things we want to do is change that. Introduce the exercises with the following rationale. You can break up this lengthy dialogue by asking questions or providing other prompts.

Our main idea today is quite simple: one of the most effective ways to change our mood is to engage in pleasant activities. One of the first steps in changing our perceptions and negative thoughts is to begin to see and appreciate the good things in our environment and to make some of them a part of our daily activity. This does not mean to become attached to the positive activities or to cultivate cravings, but it does mean to practice receiving more joy from positive sides of life.

A good example is how we might relate to choosing food to nourish ourselves. It is entirely acceptable, from a Buddhist perspective, to take pleasure in savoring food we eat, recognizing the need for nourishment and appreciating the many hands and the world of nature that contributed to our meal. This is quite different from feeling addicted to certain foods, eating mindlessly, or overeating unhealthy foods. Similarly, we can choose ways to experience pleasure in our lives that is balanced and healthy. Again, this is different from over attachment, whether to foods or to other pleasures. As Thich Nhat Hanh, the Buddhist monk, writes:

“Start nurturing yourself by identifying an activity that will help you refuel your enthusiasm and life force daily. Do things that will capture your spirit and bring you joy, watering your positive seeds in your consciousness. It can be something very simple, such as listening to your favorite song, watching the birds feeding, enjoying a beautiful flower, or chatting with a friend. Don’t just sit there and wait for your negative feelings to pass. Change your thinking, and you can let go of limitations you imposed on yourself. Explore, and be proactive.”

In the same way, there are things that we may need to do for our own good, but we may not feel like doing. We must take courage and act in a certain way or engage in a certain behavior with intention, regardless of our feelings or desire. If it reflects our wiser self, feeling good will follow the decision we make with that intention. We have to trust that our wiser self will support our attention and our actions.

Our wiser selves can lead us to reach even higher levels of joy by following the precepts of Buddhism, even if we sometimes may not feel like doing so. Rather than seeing the precepts as constraints on our choices, or impossible to attain, one can observe them as paths to a higher level of joy and well-being, as framed in the following:

With deeds of loving kindness, I purify my body.
With open-handed generosity, I purify my body.
With stillness, simplicity and contentment, I purify my body.
With truthful communication, I purify my speech.
With mindfulness, clear and radiant, I purify my mind.


We cannot always remove the source of the negative events -- in your case, for example, your medical condition -- but things can be improved by engaging with and appreciating positive events in our life and in being aware of how we may be responding automatically in negative ways to other events in our lives.

Can you recall any time that you have been feeling badly but forced yourself to attend to a more pleasant aspect of the social or physical event and it picked up your mood? This is the power of letting yourself be open to experience, rather than constantly judging yourself or others, or giving into the anticipated painfulness of a situation (“Oh, I can’t go to that party, because .... (I’ll get in the way...; I’ll be in too much pain to enjoy myself....; There’s no point in meeting new people in my condition...).)

[Review with the client any examples given and analyze in detail what precisely the client did, what was going on at the time, and how, in the client's opinion, this picked up his or her mood].

Later we will see how inactivity is often a form of avoidance. Avoidance has a snowball effect. We’re tired and don’t go out. By staying home it seems like we get even more tired, and now we want to go out even less. So on and so on until we barely can do anything to help ourselves.

To break this vicious cycle we need to ---
- Identify the link between doing nothing and bad moods and feelings.
- Identify activities that are likely to pick us up.
- Plan which activities can happen at what time in our schedule.
- Identify and obtain commitments from others who will be part of these plans.
Choose Pleasant Activities for Homework Assignment (10 mins)

Ask the client to turn to page 10 in the Workbook (“Planning Pleasant Activities Instructions”) to follow along as you describe this next activity. Assist the client in identifying both mundane events (doing dishes, making beds, cleaning the garage, driving a child to school, a special project at work, etc.), as well as less common ones that might be considered recreational (taking visitors out to dinner, a visit to a museum, going to the movies, etc.). Turn to page 9 in the Workbook: “Pleasant Activities List” for a list of potential activities.

Ask her to decide on two activities that she would like to do between now and the next appointment. Stress that the activities need only be small activities and often it is the small things that make a difference in their lives. These activities should be ones that take more than 10 to 15 minutes to perform yet that can be accomplished in one day.

After she has made a decision on two activities, refer her to the Planning Pleasant Activities Worksheet* on Pages 11 and 12 and complete *both* pages (items #1 to #3) with her. The following rules are important:

1. The activity should be specified exactly. For example, if it is to browse in a bookstore, have her specify the bookstore that they will visit. Likewise if she is to visit some setting she should exactly specify that and how she will get there. This is important to ensure that the activity will be carried out.

2. All information regarding date and time should also be noted.

3. The chart should be completed before the end of the session. Indicate she can note on the chart when she has completed the activity.

She should also be careful to note on her logs when the activity is carried out, also being careful to note her mood.

**Note: Both activities should be planned and written down before the end of the session.**
The Power of People for Improving Mood (5 mins)

For most people, associating with others gives our reward and pleasure centers a big boost. When considering Pleasant Activities* keep in mind activities that involve being with others. People are usually great distractions from our own troubles. Similarly, people will generally be empathic about our struggles and we naturally shift topics to more pleasant conversation over time.

A great way to engage in more than one pleasant event at once is to identify supportive persons from your spiritual or Buddhist community. Such people not only can be there for you as others are, but even without speaking about religious topics there is a deep bonding that takes place because of your common beliefs or spiritual perspectives. It also helps to choose someone who is suffering, too. That way you can get your mind off of your problems by listening to and caring for them, and it helps you to be grateful for what is going well in your life.

Therefore, we can use today and the coming week to try to identify such persons if they already exist, and if not, figure out how we might discover them in your community. Once this is accomplished the next task is to make contact with them and find out whether they could be ongoing contact persons and supportive resources in the future. Are there such persons in your life now? How often are you able to be with them?

*Note: The person needs to be local and ideally not a family member. If they do not belong to a Buddhist or meditation (a sangha) community, you can help them think of someone else in their community.

This leads to a problem solving discussion of how to identify and make contact with such persons. The homework assignment will be to at least identify several possible companions who share their Buddhism or spiritual practices, and to begin to make contact, if not during the week, after discussion with you after the next session.

Homework Assignment (8 mins)

Ask the client to turn to page 7 in her Workbook to follow along with you as you describe her Home Practice Activities.

1. Memory Verse

If you do what is good, keep repeating it and take pleasure in making it a habit. A good habit will cause nothing but joy. (Dhammapada 118).

As you did last week, write the verse down and put it in a place, or ideally more than one place, where you will see it many times a day. The more you meditate on these verses the more your mind is renewed and the greater improvement you will begin to see in your mood.
2. **Plan Pleasant Events**

- **Keep track of your accomplishments** (mastery) and pleasant events on the record sheet. This will provide us a lot of information to help plot the future in terms of activities for improving your mood.
- **Select two pleasant events to accomplish** between now and next session. Fill out a Planning Pleasant Activities Worksheet for both activities. Remember to complete the worksheet after you finish the activities.

3. **Identify and Contact a Member of the Buddhist Community**

**Note to Therapist:** In introducing the following, keep in mind that many Buddhists do not belong to faith communities or associate with specific Buddhist temples. However, others may belong to such groups, such as the Buddhist Churches of America, if they are Asian Buddhists, or to sanghas or meditation groups if they are non-Asian/non-immigrant Buddhists. Therefore, it is important to first have an understanding of this aspect of someone’s religious/practice situation, and to frame this suggestion accordingly. However, even if someone is not a member of such a group, the idea of drawing of such support can be suggested, with the recognition that carrying through on it may be more challenging than it is generally is for those of other faith backgrounds.

> When you reach out to people, especially those who are in a worse situation than yourself, it helps to get your mind off of your problems, helps you realize that things could be worse, and helps you to feel grateful for what you do have. It also gives you a sense of purpose and meaning that is exemplified by the Buddha’s teachings on being compassionate to others by caring for another.

> This week, if you can, identify several possible people who are also Buddhist and make contact with at least one of them. Or at least consider how you might do this. You might say something like this to the person you reach out to: “I’m having a pretty difficult time now and I’m wondering if you would agree to talk with me about how I might draw more on Buddhism to help me during this period. Or perhaps come with me to this week’s meditation session, and perhaps go out for tea or coffee afterwards.”

4. **Reading**

*Emphasize:* Please read the pages in your workbook titled, “The Categories of Unhelpful Thinking” to prepare for next week’s session (pp 13-19). This is somewhat lengthy and to make the most of the limited time in session it very important that you have already reviewed this material.
*There are seven pages in this reading; you can suggest that she read one page a day to make it seem less overwhelming.*
Review with the client any questions about the assignments, and brainstorm any potential problems that could get in the way of carrying them out: e.g., the client is going on vacation this week.

5. Solicit feedback on how the session went today.

**Terminate Session**
Terminate the session, following the instructions listed in Session 1.
SESSION 3: Identifying Unhelpful Thoughts: The Battlefield of the Mind

Goals for Session:
1. Introduce cognitive processing: Teach client to identify mood and thoughts accompanying changes in mood
2. Introduce categories of unhelpful thinking
3. Present reasons from a religious and/or spiritual perspective for why these types of thinking are unhelpful and not consistent with Buddhist wisdom
4. Introduce Contemplative Meditation/Prayer

Materials Needed in Client Workbook
- Homework Assignment Worksheet
- Unhelpful Thinking Styles
- Contemplative Meditation/Prayer: Using Buddha’s Wisdom
- ABC Method for Exploring Beliefs Leading to Negative Emotions
- Planning Pleasant Events

Set the Agenda

*Our session today is called “Identifying unhelpful thoughts: The battlefield of the mind.” We will learn how to identify the thoughts you have that lead to negative emotions. We’ll examine a number of unhelpful thinking styles and reasons from the perspective of Buddhism for why these types of thinking styles are unhelpful. We will also discuss contemplative/meditative practice. As always, at the end, I will give you a home practice assignment based on what we discuss today and another verse to memorize.*

[elicit feedback from client at this point]

Before we begin, I’d like to review your homework assignments and mood this week.

Review Homework Assignments (10 mins)

1. **Review Memory Verse:** Ask the client to say the verse from memory. If she is not able to do so, have her read the verse from the Workbook instead.

   *If you do what is good, keep repeating it and take pleasure in making it a habit. A good habit will cause nothing but joy.* (Dhammapada 118)

2. **Inquire again about the client’s use of contemplative/meditative practice** for 20 minutes/day.
3. **Review with the client the Weekly Mood Scale** to get an overall sense of the level of depression recently.
   a. *Using a scale ranging from 0 to 10, where 0 is the worst that you’ve ever felt in your life and 10 is the best you’ve ever felt, what was your mood like on average this week?*
   b. Empathize with her response and state that you will review why this was the case as you go through the session.

4. **Review the client’s success in making contact (or planning how to make contact) with a person from the Buddhist or meditation community**

5. **Review the client’s** two Scheduled Pleasant Activities. Discuss with the client any difficulties he may have had with the assignment. Do not spend too much time attending to the problems and complaints.
   - Praise the client for his efforts in carrying out the assignment, specifying what he did well, even if the assignment was not completed.
   - Note very carefully whether there was any change in mood while the activities were being done.
   - Reflect on whether or not this exercise brought home the idea that he might not be paying attention to how ordinary aspects of daily living give him some sense of control and pleasure.
     - Did the sheets help him plan for more activities that bring him feelings of control and pleasure?
     - What immediate and long-term effects did planning and carrying out these activities have on his mood?
     - What assignment does he want to give himself for next session?

**Didactic: Identify Thoughts Accompanying Changes in Mood**

**If Mood Changed Following Activity:**
If the individual's mood was improved, the Therapist should reinforce the rationale, pointing out:

> *Indeed, as had been discussed, changing one's activities, leads to a change in mood. This is because one is led to pay more attention to the positive aspects of one's environment and perhaps see more readily some of the positive things in our lives that were there all the time.*

**If Mood Did Not Change Following Activity:**
If the individual's mood did not improve because of the increased positive activities, he will most likely be puzzled and a bit discouraged. This puzzlement will present the perfect opportunity to present him again with the cognitive model.
If changing your activities did not result in a more positive mood, it probably is because you were not paying attention to the positive aspects of the situation and instead were saying something negative to yourself about the situation. However, since I did not ask you to monitor your thoughts, you do not know what those thoughts were. In a few moments we will do that, but first I want to say a few things about the examination of our thoughts.

**Thought Monitoring Rationale (5 mins)**

As I said before, our thoughts are closely related to our emotions and the behaviors we do. A decrease in a certain activity may result, for example, because we have told ourselves that ‘I won't be able to do it,’ or ‘if I do this I will only feel worse.’ Likewise, if an individual tells herself that, ‘I am stupid,’ she is not likely to feel very good. These thoughts, however, are not something that we are readily aware of. Often the depressed individual has become so used to saying negative things to herself, that she is completely unaware of them. The purpose of the program then is to teach you to become aware of what you are saying to yourself. This will take some time and effort on your part. Patterns that have become so deeply engrained over the years are hard to become aware of and remove. For example, if you drive a car, you have ceased to become aware of all the behaviors you do while driving a car. The same is true of thoughts. However, I will work with you to make you aware of them.

[Here it might be good to ask the client what he / she thinks about this, before proceeding]

Being aware of our thoughts is, again, a very important part of the Buddha’s teachings. As you proceed through these exercises, you may find it helpful to stop and reflect or be mindful of how different types of thoughts are constantly going through your mind. Sometimes, of course, these thoughts are helpful and necessary to conducting our lives in a meaningful and healthy manner. But often they are automatic interpretations of what we are experiencing, shaped by our past, taught by others, or created to help us make sense of our lives. Often they involve judgments, either positive or negative, that lead to emotional reactions such as anxiety, depression or fear. Often they are also almost hidden from our conscious awareness, they come so quickly, yet are powerful enough to form our sense of ourselves and direct our behaviors and shape our experiences. Thoughts may be either negative – or may be positive – but negative thoughts are often at the core of depressed feelings and experiences. Recognizing such thoughts, exploring them, and looking for alternatives, is one important path out of depression. Reflect on the following words of wisdom from the Buddha, as mentioned earlier:

“Our life is shaped by our mind; we become what we think. Suffering follows a corrupted thought as the wheels of a cart follow the oxen that draw it. Joy follows a pure thought like a shadow that never leaves.” The Buddha, Dhammapada, 1-2.

Do you have any questions about this?
ABC Method of Identifying Thoughts (15 mins)

*This is the meat of the cognitive component of the intervention. Be sure the client has a good understanding of this by the end of the session. We will continue this in Session 4, adding the next steps for exploring their thoughts.

Now I’d like to teach you the ABC method to identify your thoughts. This method will help you see how your thoughts, feelings, and behaviors are all linked. You will learn to be like a scientist, examining your thoughts carefully and objectively, before automatically accepting them as truth. You may already be well aware of the power of doing this, as part of mindfulness meditation practice, but part of this program is providing more assistance and structure for doing so. This process represents an important and natural link between Buddhism and modern psychology.

The first step, “A,” stand for the Activating Event. When you notice that you are feeling a negative emotion, I would like you to stop and ask yourself, what just happened? What did I do? What did others do? This step is used to describe the situation. It can be helpful to use the ‘who, what, where, when’ questions to complete Step A.

The second step, “B,” stands for Beliefs. You are going to identify the thoughts that went through your mind as a result of the activating event. You will ask yourself questions such as, What do I believe about the activating event? What just went through my mind? What am I telling myself about this situation? What is my interpretation of what just happened?

The third step, “C,” stands for Consequences. There are two kinds of consequences I want you to identify. The first is the emotional consequences. You will ask yourself, what am I feeling right now as a result of the automatic thoughts I identified in Step B? (e.g., anger, depression, frustration, self-pity, etc.). You will then rate how intense those feelings were using a scale from ‘0’ indicating the worst you have ever felt to ‘10’ indicating the best you have ever felt.

[Here it might be good to ask the client what he / she thinks about this, before proceeding]

The second consequence is behavioral. You will ask yourself, What am I doing as a result of believing these thoughts and having this interpretation of the activation event? Am I behaving in a way that is unhelpful or destructive? (e.g., drinking, attacking, moping, avoiding, etc.).

Note that usually the best way to know that we have just had some sort of negative thought or interpretation is the negative emotion we are feeling. So, although emotional consequence isn’t recorded until step 3 (Step C), you may find yourself using your negative emotions as the first clue that you have been thinking negative or unhelpful thoughts.
Does this ABC method for identifying your thoughts and their consequences make sense to you? Do you have any questions?

[Encourage feedback here]

Next week will add another two steps to this method, but for this week we are going to practice these first three steps.

Put Steps into Practice

Let’s try this method together using the ABC Worksheet* in your workbook. Let’s choose an example from this week and work through it together. I’d like you to write down your answers on the worksheet as we go. This way you will have an example to refer back to this week when you are completing this on your own this week.

*Work with the client to come up with a suitable situation to work through together. It may be something that came up earlier in the session or in previous session.

What is Step A, our activating event? What are we doing right now? Have the client write this down on the worksheet.

What will you write down for Step B? What are you thinking about or have you been thinking about as I’ve been explaining how to identify your thoughts? Allow the client to answer and then sum up the answer with the following:

“It sounds like you are telling yourself ___________________” (Have the client record this on their worksheet in the appropriate row.)

Step C is the emotional and behavioral consequences. How depressed are you right now? Now rate how intense those feelings were using a scale from ‘0’ indicating the worst you have ever felt to ‘10’ indicating the best you have ever felt.

Provide feedback for the client about how they used the ABC method and be sure to praise their efforts.

Introduce Categories of Unhelpful Thinking and their Relation to Buddhist Wisdom (10 mins)

Last week I asked you to read over the pages in your workbook on the Categories of Unhelpful Thinking. Did you have a chance to do that to prepare for this week’s session?

Whether or not the client has read these sheets, review each category of thought with them by sharing with them 1) the name of the category, 2) the definition, and 3) the
example. You can skip the section on why these thoughts are unhelpful.

After you have provided the client with these three pieces of information, have her read the Buddhist perspective to herself. One at a time, go through all ten categories in this manner.

If she did not read these sheets last week, ask her to do so this week. You can have her read one page a day, as there are seven pages (pp 13-19 in Workbook), to make the task seem less overwhelming.

We all have our “favorite” categories of unhelpful thinking, myself included. As you read through all of the different types, which kinds of unhelpful thinking categories do you find yourself using often?

After briefly discussing her “favorite” categories, ask the client if she has any questions or thoughts about the connections made to Buddhism. It is important to highlight this aspect as you want them to draw upon their faith and understanding of Buddhist wisdom to challenge their unhelpful and negative thoughts. The Buddhist reflections ground this exercise in their beliefs, which is different from secular CBT, and, we think, more effective. It also helps them to see the wise perspective of the Buddha and others within the Buddhist traditions and shows them that this is more than just thinking positive thoughts. It is about focusing their minds on Higher Wisdom. Be sure to emphasize these points in this session.

**Complete ABC Thought Log**

Now, return to the ABC log you filled out together earlier in this session and ask him to categorize his beliefs, indicating the appropriate abbreviation on the log. Ask him why he thinks each thought thus categorized belongs in the chosen category. This way, not only are you applying the information, but you can also be teaching it as you go through each thought on the thought log.

**Note:** The following are included for the therapist’s convenience. They are also provided in the client and therapist workbook.

1. **All-or-Nothing Thinking (AN):**

You see things in black-and-white categories. If your performance falls short of perfect, you see yourself as a total failure.

**Example:** An example would be a straight-A student who received a B on an exam and concluded, "Now I’m a total failure."

A. *Why is this thinking incorrect?*

This type of thinking causes one to fear any mistake or imperfection because that is taken as an indication of being worthless. This way of evaluating things is unrealistic because
life is rarely completely either one way or the other. For example, no one is absolutely brilliant or totally stupid. Nothing on earth is totally one way or the other. Rarely, does everyone always like us, or rarely do we always find the perfect solution.

B. Buddhist reflection
The idea that nothing on earth will ever be perfect, including people and their activities is certainly a common theme in Buddhism. That is reality of existence, and accepting such reality as consistent with the nature of life can be tremendously freeing. Holding oneself – or others up to such harsh judgment is part of dukkha. A way out of this is the Buddha’s teachings on acceptance and loving kindness, both towards ourselves and others. As noted in the Dhammapada (#96), “Wisdom has stilled their minds, and their thoughts, words and deeds are filled with peace.”

2. Overgeneralization (OG):

You see a single negative event as a never-ending pattern of defeat.

Example: An example of this type of thinking would occur when a shy young man, who is self-conscious of his artificial leg, mustered up his courage to ask a woman for a date. When she politely declined because of a previous engagement, he said to himself, "I'm never going to get a date. No one wants to date a guy with only one leg." He believed that all women will turn him down just because one declined his offer. And, he erroneously assumed it was because of his artificial leg. The pain of rejection is generated almost entirely from overgeneralization.

A. Why is this thinking incorrect?
It is logically incorrect to conclude that one thing that happened to you once will occur over and over again. It is also incorrect to assume that all situations are similar; or that all individuals are similar.

B. Buddhist Reflection
Overgeneralization is similar to all-or-nothing thinking, but can be applied to any circumstances. Again, the path out is to recognize the tendency of the mind to oversimplify. Instead the wise mind opens up to the possibilities that may occur, letting go of the self-defeating attitudes with a sense of openness. The Buddha initially followed the path of the aesthetic, almost starving to death, before he realized that accepting food as nourishing and even enjoyable, did not mean that he was spiritually weak or at risk. This is one aspect of the middle way.

3. Mental Filter (MF):

You pick out a single negative detail and dwell on it exclusively so that your vision of all reality becomes darkened, like a drop of ink that discolors an entire beaker of water.
Example: A woman with severe arthritis failed to complete one task that she had hoped to complete. She became more depressed and angry at herself for not completing that task. She overlooked the fact that there had been many tasks that she had, in fact, completed.

A. Why is this thinking incorrect?
It is more sensible to clearly view one's environment and be aware of the positive things one has done in addition to negative occurrences. It is not adaptive to filter out anything positive. It is irrational to say, “I should preoccupy myself with dangerous or negative ideas.” Nothing is gained by dwelling on them.

B. Buddhist Reflection
The Buddhist scriptures usually emphasize that one should reflect on the positive rather than the negative. One should certainly reflect on what is true, and that includes seeing the positive things you have accomplished. The Dalai Lama is so admired these days partly because he maintains his ability to be positive and loving, despite the continued struggle of the Tibetan people. This happiness, emerging from within, is the focus of his book (with psychiatrist Howard Cutler), The Art of Happiness: A Handbook for Living, originally published in 1998, and now in its tenth edition.

4. Disqualifying the Positive (DP):

You disqualify positive experiences by insisting they "don't count" for some reason or other. In this way you can maintain a negative belief that is contradicted by your everyday experiences. You don't just ignore positive experiences as in the Mental Filter, but you clearly and swiftly turn them into their very opposite.

Example: An example would occur when someone praises your appearance or your work and you automatically tell yourself, "They're just being nice."

A. Why is this thinking incorrect?
Again, it is maladaptive not to pay attention to feedback you get from your environment. We should take that feedback at face value and incorporate it into our understanding of ourselves. If we disbelieved everything everyone told us, we might still believe the world was flat. An adjusted person is one who pays attention to everything in their environment.

B. Buddhist Reflection
The critical mind can over focus on what is wrong in a situation, in ourselves, or in others. Acknowledging that part of something is negative does not mean that one cannot also acknowledge what is positive. Doing so does not mean that one has an inflated sense of self. More importantly, from a Buddhist perspective, dukkha (suffering) arises from becoming overly attached to any particular perspective, whether positive or negative. Acknowledging the positive, and experiencing pleasure from that, is not the same as being becoming attached or overly prideful to it. Joy may particularly come from appreciating the larger meaning of an experience, an appreciation which may be cut off if one immediately discounts it.
In the words of the Buddha: “Let us live most happily, possessing nothing; let us feed on joy, like the radiant gods.” Dhammapda 200.

5. Jumping to Conclusions (JC):

You make a negative interpretation even though there are no definite facts that convincingly support your conclusions. There are two areas in which depressed individuals jump to conclusions.

Mind Reading (MR):

This is one area in which depressed individuals jump to conclusions. You arbitrarily conclude that someone is reacting negatively to you, and you do not bother to check this out.

Example: Suppose a friend says she does not have time to have a conversation with you on the telephone at a certain point. The depressed individual may conclude, “She is ignoring me and does not want to talk with me, because she does not like me anymore.”

A. Why is this thinking incorrect?

One should never make an assumption about what someone is thinking without asking them because it is usually impossible to know what another person is thinking, no matter how sure we are we know. Jumping to conclusions about what the other is thinking is also maladaptive because our negative reactions to their imagined thoughts may set up a self-fulfilling prophecy. That is, we may react negatively to them when we suspect they do not like us, when in fact they do. However, our negative reactions will soon turn them off.

B. Buddhist Reflection

The nature of our minds is to impose interpretations on our observations of the world around us. Again, from the perspective of Buddhism, “thoughts are just thoughts”: our interpretations of situations may have powerful effects on our experience, and particularly on our emotions. But it is important to always be willing to question the reality behind our thoughts, and to tolerate ambiguity. Mindfulness meditation is particularly powerful in training us to take a moment to step back and observe that first interpretation of a situation as simply that – just the tendency of the mind to create meaning. And if we are dealing with depression, then the mind may be in the habit of creating a negative interpretation.

“We are what we think. All that we are arises with our own thoughts. With our thoughts we make the world.”

--The Buddha.
The Fortune Telling Error (FT):

The second way in which depressed individuals jump to conclusions is they anticipate that things will turn out badly. They feel convinced that their predictions are an already established fact.

Example: Depressed individuals will tell themselves that they are never going to recover, "I will feel miserable forever."

A. Why is this thinking incorrect?
No one has ever successfully predicted the future; there are so many factors that could have an impact upon the future. Furthermore, our predictions are likely to be even more off base if we predict only negative events because probability suggests that both positive and negative events will occur.

B. Buddhist Reflection
It is natural and normal to at times feel discouraged, but projecting that into the future is not the message of the Buddha. Instead, he encouraged us to always be flexible and not to become overly invested in one particular way of being or feeling. Living more in the present does not mean ignoring information or concerns that we have about something. However, considering what to do with such information can be done better if we are not projecting certain outcomes, and then feeling overwhelmed by a sense of dread. Such fear or anxiety will often get in the way of a higher sense of power and courage.

6. Magnification (Catastrophizing) or Minimization (MM):

You exaggerate the importance of things (such as your goof-up or someone else's achievement), or you inappropriately shrink things until they appear tiny (your own desirable qualities or the other fellow's imperfections). This is also called the "binocular trick".

Example: A depressed individual accidentally misfiled some papers while working at his job. He concluded, "I made a mistake. How horrible! Everyone will think I am incompetent." An example of minimization would occur when the same employee was told by one of his or her colleagues that he had done a good job on a report. His reaction was to think, "Oh well, doing the report was very simple and anyone could do a good job on it."

A. Why is this thinking incorrect?
It is important to have an accurate perception of ourselves and our performance. It is also important to realize that everyone makes mistakes and that they are to be expected. It is impossible for anyone to be perfect.
B. Buddhist Reflection
Every individual is unique and no one can possibly be perfect. So understanding and accepting one’s own strengths and weaknesses is as important as understanding and accepting those of others. This is another opportunity to extend a spirit of loving kindness to yourself. Similarly, if someone truly disappoints you, it is natural to feel some amount of distress, without turning that into either overly harsh judgment of that person – or of yourself for having those feelings.

7. Emotional Reasoning (ER):

You assume that your negative emotions necessarily reflect the way things really are: “I feel it, therefore, it must be true.”

Example: A depressed individual may tell himself, “I feel overwhelmed and hopeless, therefore, my problems must be impossible to solve, or I'll feel inadequate, therefore, I must be a worthless person.

A. Why is this thinking incorrect?
One cannot assume that one’s emotions are a reflection of the true state of things. Our emotions are a reflection of our thoughts and beliefs, which as we have seen are a product of our past and may be distorted. Emotions may also be a reflection of our physiology and how tired we are, but they are not necessarily a reflection of the true state of affairs.

B. Buddhist Reflection
Emotions are often reflections of highly conditioned aversions or cravings, which may go back to childhood experiences of trauma, the real need to be loved, or other experiences. Very deep emotions, such as feeling overwhelmed or depressed, can feel all encompassing, as if they define who we are. But the Buddha strongly emphasized that such a narrow sense of self is always an illusion. There is no single ‘self’ in Buddhism to be found; identifying the real ‘self’ in a narrow way virtually always leads to a sense of dukkha or suffering. Expanding past these feelings by noticing them, acknowledging them, but not giving them the weight of reality, is the Buddhist path to a greater sense of equanimity. At the same time, struggling with the pain of emotions, and acknowledging them, may be a powerful door to greater awareness and appreciation for life. Feelings of longing or desolation may actually be positive in that they imply a growth process we are willing to go through.

8. Should Statements (SS):

You try to motivate yourself with shoulds and shouldn’ts, as if you had to be whipped and punished before you could be expected to do anything. "Musts" and "oughts" are also offenders. The emotional consequence is guilt. When you direct should statements towards others, you feel anger, frustration, and resentment.
Example: One example is the depressed housewife who says to herself, "I should keep my house cleaner, and I shouldn't complain," or, "I should be able to get my work done during the day."

A. Why is this thinking incorrect?
"Should" statements generate a lot of unnecessary emotional turmoil in your daily life, and, paradoxically, usually do not motivate you to change your behavior. Usually, you resent the source of the "shoulds." Saying, "I should do this," or "I must do this," usually causes one to feel pressured and resentful.

B. Buddhist Reflection
Often "shoulds" and "shouldn’ts" have at their core an attempt to "police" ourselves and meet what we perceive are others’ expectations for our behavior. These "shoulds" or "shouldn’ts" may go back even to childhood, and to what we perceived were our parents expectations of ourselves. Or they may be of more recent origin. When we use the word ‘should’, there is generally little room for self-acceptance or flexibility. The Buddha taught that guidelines for our own behavior can be important, but that these need to come from a place of caring and love for others, and from a place of higher wisdom and caring for ourselves. Such wisdom may reflect the recognition that situations are often complex and that a single mode of action or behavior is not even desirable or useful.

9. Labeling and Mislabeled (L or ML):

This is an extreme form of overgeneralization. Instead of describing your error, you attach a negative label to yourself: “I’m a loser.” When someone else's behavior rubs you the wrong way, you attach a negative label to him or her: “You are an idiot.” Mislabling involves describing an event with language that is highly colored and emotionally loaded.

Example: An individual fails to get a job which they applied for and they call themselves a "failure."

A. Why is this thinking incorrect?
We are not our behavior. Labeling yourself is not only self-defeating, it is irrational. You cannot be equated with any one thing you do. Your life is made up of many events, thoughts, actions, and emotions. For example, you do not call yourself a "Breather" just because you breathe. Likewise, you do not call yourself a “failure” because you made a mistake.

B. Buddhist Reflection
We are so much more than a single action, thought or feeling. Attachment to any single aspect of who we are or what we experience is one of the surest paths to dukkha. Furthermore, it represents a spiritually limited perspective in that it immediately discounts all other ways of being or experiencing the wonders of life.
10. Personalization (P):

You see yourself as the cause of some negative external event for which you were not primarily responsible.

Example: One example is the child who misbehaves or is rude. The depressed mother says, “I am a failure or a bad mother,” (as if she could control everything her child did).

A. Why is this thinking incorrect?
Essentially, the person with this problem has confused influence with control. While we obviously have some influence over people, especially our children, we cannot control everything they do. What another individual does is ultimately their responsibility and decision, not yours. We are not omnipotent.

B. Buddhist Reflection
When negative events happen that reflect on us, we may feel guilty or blamed, and helpless in the face of these experiences, as if we were ourselves their cause. Again, cultivating a sense of empathic understanding, both for ourselves and for others can create a sense of caring and compassion, without the burden of guilt, self-blame, or anger that may otherwise occur. Another aspect of Buddhism that is pertinent here is our tendency to identify who we are with only one aspect of our self. That which we call the ‘self’ actually has many, many facets, all of which are constantly changing and in flux. In Buddhist terms, there is no single ‘self’; realizing this can be tremendously freeing. Attaching ‘ego’ to one aspect of this complex person is an invitation to suffering.

[end of categories]

There Is a Higher Wisdom
*More helpful information to continue to increase clients’ understanding of the treatment rationale and their “buy-in.” Don’t underestimate how important explanations of assignments and benefits can be to clients in terms of their motivation and adherence to treatment.

As we have gone through these categories of unhelpful thinking, we have examined why they are unhelpful from a Buddhist perspective. The Dhammapada, a collection of Buddha’s wise words says: “Wisdom has stilled their minds, and their thoughts, words, and deeds are filled with peace.” (96). This is another reason why it is important for us to continually fill our mind with the words of the Buddha; we want our minds to be full of these “wiser levels of understanding.” His thoughts lead to feelings of joy, peace, and well-being for now and the future, the kind of emotions we would rather feel than depression and hopelessness.

[Get feedback from client on this]
Contemplative/meditative Practice (10 mins)

Note: The section in blue highlight is provided in the Workbook. You can ask the client to follow along with you in the Workbook as you explain Contemplative Practice.

Contemplative practice is a way to meditate on the words of the Buddha and his disciples and leads to a more profound experience of the sacred. In meditation or contemplation, we experience the higher wisdom within and throughout the universe. Meditation or contemplation is a gift to ourselves and to those we love. Meditation is also a discipline, undertaken as one would undertake to learn to play the piano. Practice is the key.

There are many forms of Buddhist meditation and contemplative practice. One way to engage in contemplative practice is to take a verse from the Buddhist scriptures and meditate on it. In other words, you spend some quiet time reflecting on the verse, repeating it to yourself, and saying it as a prayer to Buddha or as a way to more deeply take in his wisdom. It’s like letting yourself be saturated in his wise words. Some forms of meditation have you focus your attention on your breath. When you notice yourself thinking about something else, you are to bring your attention back to your breath. Contemplative/meditative practice is different in that instead of focusing on your breath you focus on these wise words. This also leads to a contemplative state.

It’s normal to find that your mind has wandered to thinking about something else. When you notice that this has happened, don’t get upset with yourself. When you become quiet in meditation the first thing you are likely to notice is the how busy the mind remains. This is normal, though unnoticed in everyday life. Some find the interior noise overwhelming at first. Don't panic. Think of your thoughts as boats sailing along a deep river. Boats will sail into view, and they will sail past. Let them sail on; you do not need to be concerned with them. The quality of your meditation time is not measured by the quality or intensity of your thoughts or by how often your attention is captured by them. Simply bring your attention back to the verse.

[Get client’s feedback]

It might be helpful to have the verse written on a piece of paper in front of you so that you can more easily keep your attention on the words.

The Method
Practice this for a few minutes with the client using this week’s memory verse. Make sure she understands how to use this tool (i.e., contemplative practice) before ending the session. Inform the client that these instructions and steps are included in the workbook on page 21.

1. Choose a verse. Begin with your memory verse for the week.
2. Sit comfortably, but not too comfortably, back straight, chest open so the breath is free and open.
3. Read the passage slowly. Savor each phrase. What word phrase or idea speaks to you?
4. Read the passage again. Where does this passage touch your life? What do you see, hear, touch, or remember?
5. Read the passage a third time. Listen quietly.
6. Note insights, reflections, and personal response to the reading in your journal, or leave this for the end of the practice session.
7. Follow the steps in order or go back and forth between them as you feel moved.
8. Finish by waiting for a few moments in silence.

**Homework Assignments (5 mins)**

Ask the client to turn to page 20 in the Workbook to follow along with you.

1. **Memory Verse**

   *Meditation brings wisdom; lack of meditation leaves ignorance. Know well what leads you forward and what holds you back, and choose the path that leads to wisdom*  
   *(Dhammapada 282)*

2. **Contemplative/meditative Practice**

   **Spend 20 minutes a day in contemplative practice or meditation.** Begin by using the memory verse for this week, and continue practicing in whatever way you find most satisfying. If you already have a silent meditation practice using breath awareness, or open mindfulness, try to do this in addition to your usual practice, and perhaps use a focus on the verse for at least part of each practice. If you are using open or breath awareness practice, then also follow the instructions in the Thought Log to become more aware of the types of unhelpful thoughts that might arise during this practice.

3. **Thought Log**

   **Please write down your thoughts once a day using the ABC method.** Be sure to fill out all of the sections and categorize each thought into one of the unhelpful thought categories. If you have more than one stream of ideas in one time period, you can indicate several categories. There are seven thought logs included in the manual this week so that you can fill one out each day.

   Remember that this is a learning experience; you should not worry about completing the logs perfectly.

4. **Positive Activity**

   **Add another positive activity to your week.** Follow the same procedure for scheduling this activity as we used in Session 2.
5. Contact Member of Buddhist Community or local meditation group/sangha.

Be sure to contact someone from your Buddhist community or sangha and ask them to partner with you during this period or agree to partner with them in their difficult situation. If you are having trouble doing this, be sure you bring it up when the therapist asks about this.

6. Solicit feedback on how the session went today.

Terminate the Session
Follow the instructions listed in Session 1.
SESSION 4: Exploring Unhelpful Thoughts: Bringing All Thoughts into Awareness

Goals of Session

1) To reinforce and refine the client’s ability to monitor her thoughts, and to clarify her understanding of the thought distortion categories
2) Introduce how one’s interpretation leads to change in mood
3) Develop alternative ways of responding to negative automatic thoughts, beliefs, and expectations in light of the client's personal value system and goals;
   i. Religious beliefs can help clients pay attention to more effective ways of looking at the situation
   ii. Religious/spiritual practices can be used as behavioral experiments to generate coping responses to negative or unpleasant events which are forms of direct coping rather than avoidance

Materials Needed in Client Workbook

- Homework Assignment Worksheet
- Disengaging Questions
- ABCDE Method for Exploring Beliefs Leading to Negative Emotions

Set Agenda

Our session today is called “Exploring unhelpful thoughts: Bringing all thoughts into awareness.” We will explore how one’s interpretation of situations leads to changes in one’s mood. I will also give you tools to respond differently to your automatic thoughts. We will explore how your spiritual beliefs can help you look at situations in more positive manner. We will also look at how religious and spiritual practices can be used as coping resources for negative or unpleasant events. As always, at the end, I will give you a homework assignment based on what we discuss today and another verse to memorize.

[Note to Therapist: The term ‘exploring’ is being used, rather than ‘challenging’ because a core principle in Buddhism is the value of simple observation as a way to reduce the power of a habit, whether a pattern of thought or a way of acting. This is not inherently in conflict with considering alternatives that ‘challenge’ the primary habitual pattern, but cultivating such non-judgmental awareness is considered an important first step. Therefore, becoming aware of thoughts and feelings is a core aspect of Buddhist practice, particularly in the mindfulness traditions. While it is possible that someone who identifies as Buddhist has not been making mindfulness meditation part of their practice, others may be well aware of the importance of this, but will value encouragement to return to doing so, or doing it more often. This is somewhat parallel to the process of prayer in Christianity. All Christians are likely to be familiar with the concept and general structure of prayer practice, but may not be engaging in it regularly.]

[elicit feedback from client at this point]

Before we begin, I’d like to review your homework assignments and mood this week.
Review Homework Assignment (10 mins)

1. **Review Memory Verse**: Ask the client to say the verse from memory, or read it from the Workbook:
   
   \[
   \text{Meditation brings wisdom; lack of meditation leaves ignorance. Know well what leads you forward and what holds you back, and choose the path that leads to wisdom. (Dhammapada 282)}
   \]

2. **Review Mood Scale**
   
   a. Using a scale ranging from 0 to 10, where 0 is the worst that you’ve ever felt in your life and 10 is the best you’ve ever felt, what was your mood like on average this week?
   
   b. Empathize with response and say that you hope to learn why as you review the thought log.

3. **Contemplative Practice/Meditation**: Did the client spend 20 minutes a day in contemplative practice or meditation? Did she use her memory verse? How did she do this? How was it? If problems exist, be very supportive – but encourage trying it again, in addition to posting.

4. **ABC Thought Log or Worksheet**: Review the client’s efforts at thought monitoring. Ask them if she had any particular difficulties. Attempt to clarify her understanding. Examine thought rows to ensure that actual thoughts were recorded.

   Ask about the thoughts recorded to ensure that actual thoughts, not feelings, were recorded. Also check for relative specificity of thoughts. That is, does the client list each thought separately, or does she blend a number of thoughts together?

   Correct at least one entry, if necessary. Be careful to praise the client for her efforts. Remember that while you are hoping to correct them, it is important to keep the relative amount of praise and reinforcement greater than the amount of focus on problems and complaints.

5. **Review unhelpful thought categories with the client**: Ask her if there are any she does not understand. Ask the client why she placed a particular thought in a particular unhelpful thought category. Do this with 2-3 thoughts. Positively reinforce them for their answers.

   If you suspect that one is improperly labeled, ask the client to explain why she placed the thought in that category. If the explanation is sufficient, suggest why you think it may belong in an alternative category. This is to be offered only as a suggestion, however, as clients are usually the best judge of their thoughts.

6. **Review whether or not the client added a positive activity.**
Didactic: Interpretation of Events leads to Emotion (8 mins)

Many people believe that the events in our lives cause us to feel certain ways. For example, if you had plans to go for a walk outside and it starts to rain, some people would then feel disappointed or angry that they can no longer go for a walk. They think the rain caused them to feel this way. But other people who saw that it was raining would feel happy instead of feeling upset because they like the rain and think the walk will be even more fun in the rain. Others might have a neutral emotional response, shrug their shoulders, and simply take an umbrella on their walk.

The point is that it was not the rain that caused each of these individuals to feel a certain way. We know that because the situation was the same for all, but each had a different emotional response. Rather than the event (in this case the rain), it is our interpretation of the events that happen in our lives that determine how we feel and how we then behave (e.g., either going for a walk in the rain or staying inside feeling glum). This is important to remember when you are dealing with a physical illness. We need to remember that our quality of life doesn’t just depend on current health status, but largely on attitude we have towards the illness and the meaning we give to it. Two people can have the exact same diagnosis, but one is content and the other is miserable.

Religious/Spiritual Application

As noted earlier, the teachings of the Buddha include many examples of how we are to explore our thoughts and behave in ways that may not seem consistent with the negative circumstances we find ourselves in. Not only did he speak of avoiding pain or dukkha based on the letting go of the conditioning of our thoughts and our mind, but that when this is done, we are opening ourselves to experiences of true joy. Easwaran reviews this perspective thus: “The path to joy lies not in depending on external conditions, but in undoing the conditioning of pleasure and pain which excites the mind to search for satisfaction in the world outside.”

We, too, can use the teachings of the Buddha and the purpose we derive from our higher wisdom to give meaning to the negative events in our lives. Like the Buddha we can learn to feel joy no matter what the circumstance. Let’s keep this in mind as we learn the next step in changing our thoughts.

Ask the client if she has any thoughts or questions about these ideas.
The ABCDE Method of Identifying and Disengaging Thoughts (8 mins)

Last week we learned how our emotions are directly linked to what we are thinking and to how we behave. We used the ABC method (Activating event, Beliefs, Consequences) to examine these relationships. We also learned about a number of categories of unhelpful thoughts. This week we are going to take the ABC model a little further; we’re going to add steps D and E.

D stands for Disengaging. This is the step we use to challenge getting caught up in our unhelpful and negative thinking. We will ask ourselves a number of questions to disengage from the power of our original belief, such as “What evidence do we have that this belief is true? What evidence do I have that the opposite is true?” Sometimes the situation can’t change. In this case, we need to look for evidence that you can manage it. Evidence can be found in such things as your talents, your past experience, your support persons, and resources. The answers we derive from these questions, such as about evidence, will result in step E: Empowering new belief and new Emotional and behavioral consequences.

[Note to Therapist: As noted above in regard to using the word ‘exploring’ instead of or in addition to, ‘challenging’, in Buddhism, there is a substantial focus on mindful awareness and acceptance of experience. Certainly thoughts can be identified as more or less helpful, or more or less accurate, but the emphasis is on letting go of the power that the thought might have, rather than immediately ‘disputing’ or substituting a different thought. Nevertheless, the word ‘challenging’ can still be used in the context of questioning whether a particular interpretation of a situation is correct or not – and then considering an alternative. ]

[elicit some feedback from the client here]

As Buddhists, we are not just exploring and recognizing unhelpful thoughts and replacing them with more useful thoughts. We also have the added power of being able to replace our negative thoughts with higher wisdom, which our memory verses from last week said comes from meditation. Meditation practice can help cultivate a capacity for mindfulness that allows us to observe our thoughts and our emotions during the rest of the day in a quiet and accepting way. Doing so then opens the door to other alternatives of thinking or feeling about a situation. When we keep these words of truth in our minds we can change the way we think and as a result how we feel, no matter what the situation.

Therefore, part of step D is examining how the wisdom of Buddhism might help you disengage from your automatic negative thought. For example, you can look to your understanding of the teachings of the Buddha, the way you believe the world works from a Buddhist viewpoint, the Sutras and Buddhist teachings, spiritual wisdom, and other sources for evidence to explore your automatic negative beliefs and your beliefs that you can’t cope with the situation.

[elicit some feedback from the client here]
Let's practice steps D and E using the examples from your thought log this past week. As we do this, we are going to think about how higher wisdom and teachings from the Buddha can help us come up with more helpful ways of thinking. We can also use the Disengaging Questions* worksheet on page 32 of the Workbook to help us challenge our beliefs.

Using the Client’s Practices/Beliefs to Explore Dysfunctional Thoughts (15 mins)

Go through several examples from last week’s thought log with the client to practice observing and then disengaging from their negative thoughts and coming up with effective new perspectives. Be sure to discuss the new emotional and behavioral consequences of these new perspectives. Have her write her answers down on the ABCDE Worksheet*. Continue practicing until the client can complete steps D and E without your assistance. The thought log is included below for your convenience.

Therapist Information:
**The following are a few things for therapists to keep in mind as they proceed with steps D and E with the client. There is more emphasis on practice than in faith or beliefs in Buddhism, so this wording has been changed somewhat.

Religious Practices and Beliefs
In addition to material generated from your general conversation with the client, you have available other sources of information that pertain to the client's religious and spiritual beliefs, such as the Religious Assessment Questionnaire administered in the first session. Using all this information, choose any that seems most relevant to the topic at hand. For example, if the client has mentioned loving kindness meditations as an important value or as a healing aspect of their Buddhist practices, explore with the client how such practices could have been used in any of the situations the two of you have examined together.

Imagine the client had underestimated their ability to cope with the situation. An appropriate exploration would be around the degree to which directing more acceptance or loving kindness toward himself might affect the degree to which he believed that he could cope with the situation, or to which his mood improved. The idea here would be to have him attend to how religious/spiritual practices are an additional resource he could have called on in that situation.

Similarly, if the client revealed that considerable avoidance occurred prior to the situation, examine with the client how engaging loving kindness or more acceptance toward themselves might have led to different outcomes. Once again, the religious viewpoint may have provided him with a resource that could have helped, but for which his emotional distress at the time created a kind of tunnel vision that left this potentially valuable resource unexplored or under-utilized.

When examining these practices, bear in mind that it is not only practices that could be an effective resource, but specific religious beliefs may also directly change the situation.
For example, it is one thing to know that effectively using a specific practice experience might have made the person feel more courageous in managing the situation, but having this skill to use that practice might require accessing some type of religious belief, such as reviewing the Four Noble truths, or the Eight-fold path.

*[Note to Therapist: The Noble Eight Fold path is summarized in the Session 5 materials. If the client does not have at hand a print version of these materials, they can be easily accessed on the web. There are, however, many translations, and the client might be encouraged to look for a translation that he or she is most comfortable with.]*

What has proceeded is the heart and soul of religiously integrative CBT. Accessing individualized sources of support informed by a person’s religious resources is a matter of practice. The counselor's main goal is to support clients in discovering creative ways of reminding themselves about these religious and spiritual resources. Assignments in-between sessions should focus client attention on this goal. Asking the client to monitor negative emotional experiences, while at the same time using religious practices and beliefs to challenge negative automatic thoughts, is the most appropriate way to reinforce such skill building.

*[Note to Therapist: In Buddhism, practice experience is more important than particular ‘beliefs’; therefore, use of the term ‘thoughts’ may be more acceptable than ‘beliefs’. At the same time, it is a core Buddhist belief that over-identifying with any particular way of reacting to a difficult situation is a primary source of suffering, or dukkha, and one of the most powerful triggers for negative emotions such as depression, anger, or any other type of mental suffering.]*

| Activating Event: Describe the situation around the time the negative emotion(s) began. |
| Beliefs/Thoughts: What negative beliefs, thoughts, or expectations automatically went through you mind when you were in that situation? |
| Consequent Feelings and Behavior: What painful feelings did these beliefs or expectations lead to? Rate each feeling using a scale of 1-10, where 10 is very painful. What behavior did these beliefs, thoughts, and feelings lead to? |
| Disengage the Beliefs/Thoughts and Deal with the Situation: Is there any evidence that those beliefs, thoughts, or expectations are not totally accurate or true? Describe the contrary evidence. Specify the unhelpful thought category that best describes the error in the belief. Even if the situation can’t change, what evidence do you have that you could manage it (based on your talents, past experience, support persons, and/or resources)? |
| Religious Beliefs and Resources: How can your Buddhist worldview, religious or spiritual writings, spiritual wisdom, and other sources provide evidence that challenge your automatic negative beliefs and beliefs that you can’t cope? |
| Effective New Beliefs and Consequences: What are different ways to now look at the |
situation? How did your feelings change after you looked at the situation differently? Rate each feeling using a scale of 1-10, where 10 is very painful.

**Homework Assignments (5 mins)**

Ask the client to turn to page 30 in the Workbook to follow along with you.

1. **Memory Verse**

   *As an irrigator guides water to his fields, as an archer aims an arrow, as a carpenter carves wood, the wise shape their lives.* Dhammapada 145.

2. **Contemplative/meditative Practice**

   *Spend 20 minutes a day in contemplative practice/meditation.* Begin by using the memory verse for this week, and then try with previous weeks’ memory verses if you wish or other meditative practice that you use.

3. **Thought Log Monitor**

   *Complete the ABCDE thought monitor at least once a day.*

   Be on the outlook for automatic negative thoughts that trigger emotional upset and negative behaviors such as avoidance. The goal is to improve on the ability to spot these negative patterns at the time they occur, and to attempt to develop alternative ways of responding through the use of more effective beliefs and expectations.

   Remember to draw on your religious and spiritual beliefs and practices, as well as Buddhist readings, to help let go of unhelpful and negative beliefs and thoughts.

4. **Elicit feedback from the client about how the session went today**

   **Terminate the Session**

   Ensure that telephone session is recorded.
SESSION 5: Dealing with Loss

Goals of Session:
1. Identify losses in client’s life as a result of illness
2. Identify sacred or spiritual losses
3. Teach tools for dealing with loss
4. Explain control versus active surrender
5. Emphasize the use of religious/spiritual resources to understand and make meaning of losses
6. Introducing/reinforcing the use of loving kindness practice as a way to extend caring to oneself in the face of loss and struggle

Materials Needed in Client Workbook
- Homework Assignment Worksheet
- ABCDE Method for Exploring Beliefs/Thoughts Leading to Negative Emotions
- Active Surrender Exercise

Set Agenda

Our session today is called “Dealing with loss.” We will identify the losses you have suffered as a result of your illness, including something we refer to as sacred or spiritual losses. I will then provide you with some tools to help you deal with your losses. In particular, we will examine how the use of religious/spiritual resources can help you better understand your losses and deal with them in healthy ways. As always, at the end, I will give you a home practice assignment based on what we discuss today and another verse to memorize.

[elicit feedback from client at this point]

Before we begin, I’d like to review your homework assignments and mood this week.

Review Homework Assignments (10 mins)

1. Review Memory Verse:
   As an irrigator guides water to his fields, as an archer aims an arrow, as a carpenter carves wood, the wise shape their lives. Dhammapada 145

2. Ask the client whether or not she used contemplative meditation, with the memory verse this week and, if so, what the experience was like.

3. Review a few of the client’s ABCDE Thought Logs.
   The goal of this review is to determine whether clients understand the full model and, in particular, if they understand how to gather evidence to disengage negative beliefs and to use this to derive alternative beliefs and expectations (Steps D and E).
Make sure clients understand how to complete these steps correctly since this is at the heart of cognitive processing. Pay special attention to how they went about integrating religious/spiritual beliefs and practices as a method for discovering alternative ways to handle thoughts and as a method for generating behavioral experiments.

4. **Examine Weekly Mood Rating:**

   *Using a scale ranging from 0 to 10, where 0 is the worst that you’ve ever felt in your life and 10 is the best you’ve ever felt, what was your mood like on average this week?*

Discuss any significant events relating to the client’s depression and medical illness. Encourage discussion around how using religious and spiritually integrative CBT strategies helped in any way to interrupt the negative feelings. Also, examine any situations that resulted in significant depressive feelings with discussion focused on what he might have done differently or how he could use this event as a learning experience in case it re-occurs in the future.

Once again the purpose is to determine if the client understands how to implement religious/spiritually integrative cognitive processing or religious/spiritually integrative behavioral experiments either to combat worldviews which are depression-inducing, or self defeating ways of behaving that keep the person stuck in a downward depressive spiral.

**Issues Pertaining to Loss in the Client's Life (5-8 mins)**

**How to Introduce this Theme.**

We see essentially three issues related to loss: 1) loss of identity, 2) loss of capacities, and 3) loss of relationships. Many more certainly could be chosen and counselors are free to take the theme in any direction relevant to the client's existential situation. We will discuss sacred losses in the next section, although you may find that material becomes interwoven in this section.

Counselors should review all the assessment material gathered to this point and identify whatever relates to the themes of loss in the three areas noted here (or other areas). Counselors may begin in any way that seems suitable to introduce the topic. The following is one example:

*Dealing with chronic medical illness is in many ways similar to dealing with grief. Grief results from significant losses in our life whether it is the death of a loved one, loss of friendships or other significant relationships, loss of a job that was meaningful, loss of an environment or routine that one had gotten used to, or loss of the sense of who one is as a person outside of the medical illness. From our discussion, I have noticed some areas that possibly could be seen as losses to you and wanted to check that out to see how significant these losses are to you in terms of living a satisfied life.*

[Invite client to review topics the counselor has noticed up to this point related to loss].
I also have a few questions about your current losses to help fill in the picture regarding how bothersome they are to you.

As a result of your illness or depression have you experienced any of the following? [For each positive response the counselor asks as a follow-up, “On a scale of zero to 10 with zero being no problem at all and 10 being about as bad as it could get, where would you place that loss?”]

1. Have you lost one or more important or meaningful relationships?
2. Have you had to reduce the amount of time you spend with friends and family?
3. Have you lost any capacity for recreation or fun that you miss?
4. Has your work capacity been reduced in a way that is bothersome?
5. Has your illness led you to question who you are as a person or whether or not you will be able to reach the goals that make for a satisfying life?
6. Has your illness led to not being able to participate in social activities that you once enjoyed?  What are they, if any?
7. What is the most important thing you have had to give up as a result of your illness?

Sacred Losses (10 mins)
Note that these may have already been covered in the section above. If not, introduce the concept now and discuss the questions listed below.

Some of the losses we suffer as a result of illness are sacred losses. Or, in other words, losses that are related to our sense of spiritual well-being, questioning or losing touch with our spiritual practices, and weakening of our relationship to our own sense of the dharma or sources of spiritual well-being. Some examples of sacred losses include the loss of relationships with members of your faith community or sangha, feeling inadequate in your practices, and perhaps the loss of specific beliefs (e.g., I’ve tried to maintain my practice but it just doesn’t help; I went on retreat but I just felt worse; I know I’m just not trying hard enough).

[Note to Therapist: IF the BCOPE (the Buddhist version of the RCOPE) has been administered, any elevation at all on Items 11-13, which reflect religious struggle, suggest the possible existence of ‘sacred’ distress or loss. This measure can be accessed online at http://www.spiritualityandhealth.duke.edu/index.php/religious-ebt-study/therapy-manuals.

1. Have you suffered any sacred losses?
2. How have you dealt with these sacred losses?
3. Have they been harder to deal with or caused more suffering than the other losses you have had because of your illness?

[elicit client feedback]
The core teachings of Buddhism are contained in the Four Noble Truths and the Noble Eightfold Path. The Four Noble Truths are: 1) that all of us will suffer at times, sometimes in small ways, and sometimes in extremely painful or profound ways; 2) that our automatic response to such suffering is to try to avoid it, feel angry, overwhelmed, or wish that it would cease; 3) that the way to the end of suffering is engaging our own wisdom to let go of unrealistic expectations; 4) that experiencing and working with such suffering, by following the Noble Eightfold Path, is the true door into fundamental freedom and inner peace. Therefore, suffering can actually help open the door to a path to a higher level of being, even if the path may be difficult and challenging. This path is smoothed out by understanding the compassion with which the Buddha taught these lessons, and then by engaging a sense of compassion for yourself and for others. One way that this can be done within Buddhist practice is through loving kindness meditation.

Ask the client for his thoughts about the ideas shared above. Has he experienced the wisdom, comfort or compassion of the Buddha? Has he ever practiced loving kindness meditation? (If yes, then ask if he has done this recently or in relation to dealing with the losses that he’s been sharing. If not used, either at all or recently, then note that this is something you’ll be reviewing a little later.)

[Note to Therapist: Loving kindness meditations may or may not be familiar to the client, but are increasingly a core part of Western Buddhist practice, as influenced by Theravadan/Vipassana traditions. This practice is outlined below and included in the Participant Workbook on p. [31] and also in the Therapist Workbook on p. [31], and they will be asked to practice this as part of their homework for this week. Doing so will prepare them for the more powerful – and less frequently used – version introduced in Session 6, that addresses dealing with anger.]

[Note to Therapist: If the client asks to be reminded of the elements of the Noble Eightfold Path, respond that this is an important piece that will be drawn on in later sessions. If the person persists, you can note that the eight elements are: Right View, Right Thought/Intention, Right Speech, Right Action, Right Livelihood, Right Effort, Right Mindfulness, and Right Concentration. You might mention that the parts of the Eightfold Path which are most involved in this program are ‘Right View’, ‘Right Thought/Intention’, ‘Right Action’, and ‘Right Mindfulness’, and that their willingness to participate in the treatment program represents ‘Right Effort’.]

Identification of Specific Losses to Target (5-8 mins)

Now return to the information you gathered about all the losses the client has suffered, secular and sacred, and using reflective listening flesh out in more detail which aspects of the loss(es) are most troublesome.
When this has been completed, counselor and client collaboratively target one or two areas of loss that will be the focus of the treatment in this session and the next one.

The assignment should be quite concrete, and the counselor brainstorms with the client any potential barriers that may interfere with attempting these strategies.

Counselors should assess which of the loss topics are more amenable to cognitive restructuring and/or to becoming more aware of thoughts and feelings, and which are more amenable to behavioral experiments. A rough rule of thumb to use is that losses which seem related to clients’ views of themselves can proceed initially with cognitive restructuring (i.e., thought log using ABCED method) until it is determined that changing what the client actually does behaviorally (i.e., behavioral activation, behavior experiments) will have more impact. Active surrender is another tool that the client can use, which will be explained in the next section. In Buddhist terms, ‘surrender’ is not surrendering the ‘will’ to God, but rather surrendering or letting go of identity with the core of the ego, or the identification of the self with a source of pain or a source of desire.

For example, if the client's social life is quite weak and appears to be related to seeing oneself as unattractive or having nothing to offer in a relationship, cognitive restructuring would probably be a useful place to start. In particular, in Buddhist terms, one might explore how holding such beliefs is investing in a particular view of ‘self’ that in reality fluctuates and can be adapted to the situation. However, if the medical illness has depleted the client's environment of fun things to do, then working on behavioral activation of pleasant events would seem to be more fruitful.

Control Versus Active Surrender (10 mins)

**Note: You may not have time to cover this material in this session. If not, orient the client to page 44 in her Workbook on active surrender. Ask her to read the instructions and carry out the task on her own this week. Answer any questions she may have. This tool may or may not be useful at this time to deal with the losses she has identified as this week’s target(s).**

[If time allows, proceed (if not, then skip to Homework Assignment)]

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Some aspects of life are our under our own personal control, while others are beyond our control. Life becomes more difficult when we try to control the uncontrollable. Some of the things we believe and feel make letting go difficult. Surrendering the need to have things be a certain way helps us begin the process of letting go. It is important to remember that active surrender is different from giving up. Notably, surrender is paradoxical—the Buddha said that much dukkha or stress has to do our need for things to happen in a certain way.

Now I’d like to differentiate the things in your life that you are able to control from the things you are not able to control. When control is lost around some important aspects of
life because of illness, it may be difficult to realize that there are still many other parts of our lives around which we do have control. Buddhism is sometimes misunderstood to suggest that we should just give up the need or desire for control; rather, Right Intention or Right Action means to be discerning in recognizing what things one can still control. We are also going to talk about why letting go of the things we cannot control is difficult. Then we will discuss what it means to let go by surrendering things to a higher level of wisdom.

I’d like you to make a list of the things you have under your control and of the things beyond your control.

Examples of things under personal control include: choosing a doctor, the number of hours one works, eating well, taking medications, exercise, participation in hobbies/activities.

Examples of things beyond personal control include: course of illness, final outcome of treatment, how family copes with illness/death.

1. How do you cope with issues under your control? With issues beyond your control?

2. What happens when you try to control aspects that you don’t have control over?

Although it may be our nature to want to take control of every aspect of our lives, sometimes it makes more sense to let go of control. This is a core aspect of Buddhism, and is sometimes referred to as “active surrender”. Active surrender involves a conscious decision to release or let go of those things in your life that you do not have the power to change. Active surrender is one resource that may help you better manage those aspects of life that are beyond your control.

Remember that surrendering to the voice of higher wisdom is different than surrendering to an enemy, which implies defeat. Instead you are cultivating loving kindness toward yourself. When you surrender in this way you have faith that things will resolve themselves as well as possible. The wisdom that the Buddha conveyed is that people often report feeling more in control after surrendering in this way.

Is there anything or any worries that you would like to let go of or feel you need to surrender in this way?

How do you think this might help you cope with your illness and your losses better?
Homework Assignment (5 mins)

Ask the client to turn to page 40 in the Workbook to follow along with you.

1. Memory Verse

"Take refuge in the Buddha, the dharma, and the sangha, and you will grasp the Four Noble Truths: suffering, the cause of suffering, the end of suffering, and the Noble Eightfold Path that takes you beyond suffering." Dhammapada 190-191.

2. Contemplative/meditative Practice

Spend 20 minutes a day in contemplative practice/meditation. Begin by using the memory verse for this week, and then try with previous weeks’ memory verses or other meditative practice. If need be, again encourage use of the memory verse as part of meditation practice. Also, refer the person to the outline of Loving Kindness meditation in their Workbook. Encourage them to use this at least three times during the week, either as part of their daily meditation practice using the memory verse or in addition. Note that adding the loving kindness reflection is often done near the end of a practice, but can also be brought to mind at any point during the day. If the person has indicated that they are not familiar with this practice or have not used it recently, take a few minutes and lead them through it, as outlined below.

Note to therapist: Because practicing the loving kindness meditation this week will help prepare the participant for the Repentance and Forgiveness practices in the following week, it is VERY important to review this practice with the patient.

Loving Kindness Meditation (To be used if the person expresses a lack of familiarity with this practice).

1) Direct the person to close their eyes, take a few slow mindful breaths, and come to a quiet centered place.

2) Then, ask the person to silently repeat to themselves: “May I be happy. May I be peaceful. May I be free from suffering.” Say these words slowly and in a quiet, reflective tone of voice, allowing a few moments for the person to engage and experience these feelings. Repeat the words one more time.

3) Then ask the person to bring to mind someone they know and have warm feelings toward. Again, ask them to repeat to themselves: “May you be happy. May you be peaceful. May you be free from suffering.” Repeat the words one more time.

4) Then gently direct the person to bring their awareness back to their breath, and to open their eyes when ready. Pause for a moment before continuing.
3. **Thought Log or Behavioral Experiment**

   Use the ABCDE thought log and/or behavioral experiment to actively address one or two losses you have experienced as a result of your illness. You and your therapist should have come up with a concrete plan to do so in session. Remember that integrating your religious/spiritual beliefs and practices into the use of each of these tools makes them even more effective.

4. **Active Surrender**

   Reflect on the things in your life that you want to surrender or let go of. Use the worksheet provided to make a list. Then, as part of your meditation practice this week, notice any related thoughts or feelings that arise, and practice being aware of them, and then letting them go. This is another effective tool to address the losses you have experienced as a result of your illness.

5. **Elicit feedback from the client about how today’s session went.**

   Terminate the Session
SESSION 6: Coping with Negative Emotions and Spiritual Distress

Goals of Session
1. Discussion of negative emotions and spiritual distress
2. Explore core experiences that may have contributed to any changes in client’s sense of being able to draw on his or her spiritual wisdom
3. Discussion of forgiveness, both receiving and giving and imagery exercise
4. Extending loving kindness meditation to help with anger and forgiveness

Materials Needed in Client Workbook
- Homework Assignment Worksheet
- ABCDE Method for Exploring and Challenging Beliefs Leading to Negative Emotions
- Forgiveness Exercise

Set Agenda
Our session today is called “Dealing with negative emotions and Spiritual Distress.” We will identify the spiritual struggles or distress and negative emotions that you may have experienced as a result of your illness, including core experiences that may have contributed to any changes in your feelings about your relationship to Buddhism or drawing less on it as a source of strength than you might. We will discuss the meaning of receiving and giving forgiveness/loving kindness and other spiritual resources you have available to you. As always, at the end, I will give you a homework assignment based on what we discuss today and another verse to memorize.

Before we begin, I’d like to review your homework assignments and mood this week.

Homework Assignment Review (10 mins)

1. Review Memory Verse:
   "Take refuge in the Buddha, the dharma, and the sangha, and you will grasp the Four Noble Truths: suffering, the cause of suffering, the end of suffering, and the Noble Eightfold Path that takes you beyond suffering.” Dhammapada 190-191.

2. Inquire about the client’s use of contemplative/meditative practice, including use of the memory verse and Loving Kindness practice. (Note: You may need to remind the client about engaging in contemplative practices, using the verse, in addition to or instead of, whatever meditation practice they already have during each session. Then inquire about problems he is running into if he fails to follow through).
3. Examine Weekly Mood Rating

- Using a scale ranging from 0 to 10, where 0 is the worst that you’ve ever felt in your life and 10 is the best you’ve ever felt, what was your mood like on average this week?

4. Review client’s Thought Log or Behavioral Experiment that she used to address one or two of the losses in her life.

5. Assess integration and use of their religious and/or spiritual beliefs/practices/resources.

6. Inquire about the client’s use of Active Surrender or letting go of any preoccupation with losses related to their health condition. Did she make a list of things she wanted to let go of? What was on the list? Was her meditation or mindfulness practice helpful at all in doing so? What was the outcome?

Note about the use of Cognitive versus Behavioral Strategies

The basic point of the assignment review is to consolidate the clients' strategies that seem to be having the most impact on their depression at this point. We want to ensure that the client is using the strategies properly and suggest additional strategies from the repertoire provided in this manual. Normally clients resonate with one or two strategies that they find work for them. Counselors should note whether the strategies are more along the lines of shifting perspective or taking action, as that may be the pathway for encapsulating the major thrust of what works for them.

This is a good time to review with clients the distinction between changing perspective and changing behavior. Both are able to combat depression, but people seem to have preferences for one or the other. Clients should be made aware that they do not have to choose between one or the other and can choose both depending on the current problem. That being the case, when a client uses a strategy successfully counselors should point out what seemed to have made a strategy work. That is, was it a change of perspective that encouraged them to change their behavior, or a change of behavior that altered their perception of the situation?

In this way clients are introduced to what we technically refer to as reciprocal determinism -- the idea that thinking, behaving, and the environment often influence each other and that one is not more causal than the other.

[Note to Therapists: With Buddhist clients, you may need to address concerns that it’s not appropriate to try to change thoughts or behaviors, but that rather these should be accepted. You can respond that the CBT approach can incorporate both, in that the first step may be acceptance, but considering alternative thoughts or behaviors is then a useful tool to reflect on alternatives, and is consistent with ‘Right Effort’ and ‘Right Thought’.]

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Introducing Spiritual Distress (10 mins)

“Spiritual distress” is a topic that needs to be assessed for its presence within a given client. It can be thought of as a dimensional quality or experience. That is, not all clients experience this to the same degree; some experience it not at all, some experience it to a mild degree, some experience it but it leaves them, and some continue to experience it intensely. The way spiritual struggles is determined comes from asking several questions, two of which are on the BCOPE that we recommend be administered to the client. These questions focused on whether the client has the feeling that their health problems, or their difficulty dealing with them, comes from past actions (i.e., the law of karma). The distress may also be tied to negative self-judgment that if they were only practicing enough or observant enough, then they would not be depressed or distressed in regard to their health problems.

Remember to emphasize the following during this session and call attention to these points in the workbook:

• It is normal to question yourself in the face of illness.
• It is normal to feel negative emotions, anger and resentment.
• It is natural for us to experience a range of emotions and all of them can be accepted. Having such feelings does not mean you are a ‘bad Buddhist’.
• Freedom from dukkha comes from opening our awareness and higher wisdom to what is really true and honest.

Today we’re going to talk about some challenging questions and feelings that can make it difficult to connect with your spiritual self. In particular, we will be reflecting on times that we have felt overwhelmed by anger or distress, or unable to even experience any sense of inner peace. In the face of illness, tragedies, and suffering, it is normal to have such feelings. We may ask: “Why me? Why is there such suffering? I’m not strong enough to deal with this. I can’t possibly meditate or engage a sense of acceptance. I just become overwhelmed by the thoughts and feelings that arise.”

Sometimes people grow up thinking or learning that they should always, if they try hard enough, be able to connect with some inner sense of wisdom or harmony. But, all our feelings, including negative ones, are part of who we are. We need to be honest with ourselves and with others, when we are truly in emotional pain and distress. It may be hard to talk to or share this with others or acknowledge to ourselves how much we are suffering. It is important to remember that sadness and anger are also part of the pain and suffering we undergo. It can help to express your feelings about this. Honesty can lead to healing and restoring one’s inner sense of peace and resilience, one’s sense of connectedness with others, and with oneself. It can also lead towards growth.

[elicit feedback from client about this]
Discussion:

Here are some questions to guide the discussion. Do not ask all of these questions. Just ask those that are relevant to the type of answers the client provides. Use your clinical judgment. Remember, there is only 10 minutes allotted for this section.

1. Has your relationship with your understanding of Buddhism and your sense of spirituality changed because of your illness or depression?
2. What kinds of questions do you find yourself asking?
3. Modify as needed: I noticed from a questionnaire you answered earlier in our treatment that you had [or, that you did not have] felt powerless or had a feeling that you may have these struggles with your health problems or relationships because of bad karma. I was wondering if that is still the case and how it seems to affect you?

[Note to Therapist: IF the client is a Buddhist who more traditionally believes in karma/reincarnation, then it is possible that there could be beliefs that he or she is being punished by their medical illnesses or life circumstances, and you can adjust your inquiry appropriately. Most American-born/non-Asian Buddhists are unlikely to have such beliefs, but they may occur for more traditional Asian Buddhists.]

OR:

4. Have you ever felt abandoned by your ability to connect with or draw on your spiritual self, finding some practices hard to follow? Describe. How did you cope with this?
5. Have you ever felt angry at having gotten cancer/this disease/[word appropriately]? Or found it hard to connect with any sense of acceptance? Wondered perhaps whether you had gotten it because of some transgression you might have done? It’s okay if you realize that this may not make logical sense – we’re just talking about having such thoughts and feelings. Describe. What did you do to cope?
6. Additional questions about spiritual struggles (e.g., resentments, bitterness, questioning, shame, guilt) as deemed appropriate to this particular client

Clients can answer these questions in an infinite number of ways. Counselors need to use a lot of reflective listening, which permits clients to describe precisely what this religious experience is like for them. Obviously, there will be little difficulty for clients who are not experiencing religious struggles, yet the discussion itself may reveal some interesting things about religious motivations. IF the client denies religiously or spiritually related struggles, particularly as these may be less salient within Buddhism, it would be fine to refocus the session of other sources of negative emotions, and on how drawing on Buddhist perspectives more might be helpful.

Reflective Listening

The basic goal of the reflective listening portion is simply to have clients hear themselves express these often unacceptable feelings out loud. Give the client about 10 minutes to
express her feelings. There is a lot to cover in this session so if you have to cut this part short, reassure the client that you will return to these issues later in the session and in subsequent sessions.

Only after the client has spent about ten minutes or so expressing these negative feelings and understood them in some way from her own perspective should counselors normalize her feelings in some way.

The point here is to keep it simple without getting into a lot of elaborate religious explanations. Most of the time people aren't truly asking "why" questions -- more often they are asking "why me" questions. Simple reflective listening alone often permits clients to sort this out for themselves.

**Resources to Address a Buddhist Perspective on Suffering, Anger, Fear of Death and Spiritual Struggles**

**You can suggest these resources here or elsewhere if you think they might be useful.**

1. Two books by Thich Nhat Hanh, the Vietnamese Zen monk who had to flee Vietnam and relocate to France address Buddhist perspectives on difficult feelings, and on the fear of illness and death:


2. From ‘Anger’ – a poem by Thich Nhat Hanh written after he had heard about the bombing of Ben Tre and the comment made by an American military man, “We had to destroy the town in order to save it.”

   “For Warmth”

   I hold my face in my two hands.
   No, I am not crying.
   I hold my face in my two hands
   To keep the loneliness warm ….
   two hands protecting,
   two hands nourishing,
   two hands preventing
   my soul from leaving me
   in anger.

Chris Germer, a psychologist who draws deeply on Buddhist principles, has written a very powerful book, “The Mindful Path to Self-Compassion: Freeing Yourself from
Destructive Thoughts and Emotions*, that draws on loving kindness practices and other ways to understand and address the challenges of pain and distress.


[Note: If there is an irrational component to be addressed here from the perspective of Buddhism and religiously integrative CBT, it would be those beliefs driving spiritual struggles which are related to feelings of low self-esteem or self-worth. In other words, counselors need to be on the lookout for people having spiritual struggles because they believe that their chronic illness is their fate for some type of past wrong-doing, either in this life or in a former life.]

Forgiveness and Repentance (15 mins)

***This is a critical component not only of this session, but of the entire treatment. Give yourself enough time so that you are not rushing through this section. Allow client time to provide feedback.

Spiritual struggles often involve resentment and unforgiveness. Forgiveness can be a powerful antidote for some spiritual struggles (e.g., resentment, anger, bitterness) and an integral part of the process of healing. Indeed, research has shown strong relationships between emotions such as anger and resentment and physical health problems and compromised immune functioning.

This can be a sensitive topic for some people. And, it has the potential to come across in a self-righteous and inconsiderate manner. We want to avoid this at all costs. One way to introduce this topic is by asking the client about her definition of forgiveness and of repentance before presenting these as resources. This allows you the chance to discuss any misperceptions or concerns about these topics and the reason you would like to discuss them as part of treatment.

Anger, resentment – and feelings of guilt - are highly relevant to our emotional and physical health. Many scientific studies have revealed that strong negative emotions can harm us physically and emotionally. For example, our immune system becomes compromised by continuous feelings of anger and resentment. That means our bodies can’t fight off infections and viruses as effectively as they can when we are experiencing positive emotions. Indeed, every system in our body can be negatively impacted by the stress of negative emotions, such as bitterness and resentment.

[elicit feedback from client]

There are many aspects of Buddhist wisdom that point to a mind-body relationship. The Noble Four Fold path lays out a way to be well, physically, emotionally, and
spiritually. One overwhelming source of dukkha can be anger related to feelings of hurt and suffering received from others. Forgiveness is one of the most powerful means by which this can be released, so that a sense of inner peace and spiritual well being is able to flow more freely. This may be forgiveness toward others or toward ourselves.

Before we discuss what Buddha had to say about repentance and forgiveness, I’m interested in hearing how you define these two concepts.

What does forgiveness mean to you?

How would you define repentance?

Continue this discussion until you feel you have a clear understanding of how the client defines forgiveness and repentance and whether or not this is a difficult and/or sensitive topic for the client.

Now I’d like to share with you some of the things that Buddhism teaches us about repentance and forgiveness. If we realize that we have gone against our own moral guidelines for ‘Right Action’ – or we have been the victim of wrong from someone else, that awareness is present and leads to feelings of distress about ourselves or anger at others. Repentence for harm we caused others or forgiving others for harm we have suffered does not mean that those actions were acceptable. It means that we are putting these wrong-doings behind us or are letting go of continuing to carry the feelings associated with them. If it was our own actions, we may need to ask for forgiveness, in addition to forgiving ourselves. If it is anger at others, it may be a process of extending that forgiveness, and letting go of dwelling on the wrong we experienced.

[elicit feedback from client]

The Buddha teaches that we can first acknowledge these feelings – of hurt, anger or guilt – and then work to let them go. That doesn’t mean that what happened to you was right or justified. What forgiving someone does mean is that we let go of holding this action against the person. We let go of feeling resentful, bitter, and angry. When we make a decision with our will to forgive someone, even when we don’t feel like it, we may experience our feelings begin to change – but indeed, our feelings may be the last part to change. That doesn’t mean you haven’t forgiven, it just means your feelings having yet come into alignment with the decision you made with your will to forgive.

What do you think about this definition of repentance and forgiveness?[elicit feedback]

Some of the most common spiritual struggles people face include resentment, anger, and bitterness.

If you have not already discussed these above, ask the client now if she has experienced any of these emotions as a result of her medical illness and/or depression:
Have you experienced any of these emotions as a result of your medical illness and/or depression?

Do you think repentance and forgiveness would be helpful tools for helping you to overcome your feelings of (insert specific feelings here)?

Is there anyone you would like to forgive? That could include others, yourself, and even a higher spirit.

[Note to Therapist: forgiving a ‘higher spirit’ may not make sense to a Buddhist, so only suggest this if you are working with someone who has more internalized views of transcendent God-like beings within Buddhism.]

Is there anything you would like to ask forgiveness for (repent of), either from yourself or from others?

Forgiveness and Repentance List (10 mins)

**Note: You may not have time to generate the list and/or meditate on engaging forgiveness and repentance in this session. There are worksheets for both of these activities in the client workbook. You can direct the client’s attention to these worksheets (Instructions on pages 45-46 and exercise on page 48) and review the instructions so that the client can complete this exercise on her own this week.**

1. If there is time, and if the client answered positively to either or both of these questions, ask the client if she’d like to make a list of those she needs to forgive or the things for which she needs forgiveness.

2. If there is time, you can give her the choice of meditating on engaging forgiveness and/or repentance now or at a later time. If she chooses the latter, come up with a specific plan of how and when she will do this and have her write a reminder note for herself.

Do not push the client to engage in anything she does not wish to do. If there is no one she needs to or wants to forgive, or anything she wants to seek forgiveness for, let her know that this is okay and move on to other spiritual resources that help us with spiritual struggles. Let this didactic be food for thought and leave it at that. It may be that in time the client may want to revisit this topic with you. As you end this section on forgiveness, give her permission to discuss it with you again should she so desire in the future.

Forgiveness Imagery Exercise

Again, if there is time, you can lead the client through her list and ask her to reflect on something like the following for each item on her list. It is important that these reflections be specific and that she does not just offer one blanket expression for all the things listed.
“I choose to forgive ___ (the person) for ___ (the action). I release him/her and cancel their debt to me completely. I will no longer hold any accusation against them. Even now I release them from this injury to me. I also need to forgive myself for the bitterness (or other feelings against this person) that I have stored in my heart. I give upholding all my feelings of ____ and as they arise again, will simply observe and let go of them again.”

You can then lead her in the loving kindness practice, as noted below.

Loving Kindness Practice expanded to include anger and forgiveness.

1) Direct the person to close their eyes, take a few slow mindful breaths, and come to a quiet centered place.
2) Then, ask the person to silently repeat to themselves: “May I be happy. May I be peaceful. May I be free from suffering.” Say these words slowly and in a quiet, reflective tone of voice, allowing a few moments for the person to engage and experience these feelings.
3) Then ask the person to bring to mind someone they know and have warm feelings toward. Again, ask them to repeat to themselves: “May you be happy. May you be peaceful. May you be free from suffering.”
4) Then ask the person to bring to mind the person they feel they need to forgive (this may be the same person as above or a different individual). Again, ask them to repeat to themselves: “May you be happy. May you be peaceful. May you be free from suffering.”
5) Again, ask the person to silently repeat to themselves: “May I be happy. May I be peaceful. May I be free from anger. May I forgive.”

Be sure to process this experience with her.

ABCDE Method and Forgiveness
It is often very helpful for the client to use the ABCDE method to help see the situation from the other’s perspective, causing the development of empathy, and allowing the client’s feelings to come into alignment with their decision to forgive. The ABCDE method used in previous weeks may have already brought some issues to the client’s attention that she would like to attend to through forgiveness. Use your knowledge from previous sessions to guide you in this discussion.
Homework Assignment (10 mins)

Ask the client to turn to page 45 of the Workbook to follow along with you.

1. Memory Verse

   “Be vigilant; guard your mind against negative thoughts. Pull yourself out of bad ways as an elephant raises itself out of the mud.” (Dhammapada 327).

2. Contemplative/meditative Practice

   Spend 20 minutes a day in contemplative/meditative practice, using the memory verse and expanding it to include the Loving Kindness practice with forgiveness. Again, if you also have a regular mindfulness meditation or other type of sitting practice, we suggest continuing to use this, either within the same session or in a different session.

3. Spiritual Struggles

   It is important to remember the following points:
   • It is normal to feel angry in the face of illness.
   • It is normal to experience a range of emotions.
   • It is important to accept that you are not in anyway betraying the wisdom of the Buddha by struggling with these questions and emotions.

   If you identified spiritual resources that would be helpful in addressing any spiritual struggles you have, make a plan to use these resources this week to address that issue. Spiritual resources include, but are not limited to, meditation, journaling, social support from friends, conversations/counseling with spiritual guides, reading the sutras, forgiveness, attending religious or spiritual services, attending support groups like Alcoholics Anonymous, attending activities sponsored by spiritual or religious groups like retreats or discussion groups. Several ABCDE thought logs have also been included in the workbook for this session; this may also be a helpful tool in addressing spiritual struggles this week.

4. Forgiveness

   Is there anyone you would like to forgive? That could include others, or yourself? If yes, and if you did not address these in session, make a list of the people you want to forgive or the things for which you need forgiveness.

   Take some time to reflect about each item on your list. It is important that your reflections be specific and that you do not just offer one blanket expression for all the items listed. You can reflect using the following, or by practicing loving kindness meditations:
“I choose to forgive ___ (the person) for ___ (the action). I release him/her and cancel their debt to me completely. I will no longer hold any accusation against them. Even now I release them from this injury to me. I also need to forgive myself for the bitterness (or other feelings against this person) that I have stored in my heart. I give upholding all my feelings of ____ and as they arise again, will simply observe and let go of them again.”

5. Practice Loving Kindness: Even for individuals who express familiarity with the loving kindness practice, it is a good idea to save enough time to lead them through the following, to encourage use of this within the context of forgiveness. For individuals less familiar with this practice, it is very important to do so.

   a. Close your eyes, take a few slow mindful breaths, and come to a quiet centered place.
   b. Then silently repeat to yourself: “May I be happy. May I be peaceful. May I be free from suffering.”
   c. Then bring to mind someone you know and have warm feelings toward. Repeat to yourself: “May you be happy. May you be peaceful. May you be free from suffering.”
   d. Then bring to mind the person you feel you need to forgive. Again, repeat to yourself: “May you be happy. May you be peaceful. May you be free from suffering.” After allowing a few moments of space, repeat these instructions: “Again, bring this person to mind …. And repeat to yourself: “May you be happy. May you be peaceful. May you be free from suffering.”
   e. Finally, again repeat to yourself: “May I be happy. May I be peaceful. May I be free from anger. May I forgive.”

6. Contact Member of Buddhist Community or local meditation group/sangha.

If you have not already done so, please make contact with a person(s) in your Buddhist community and/or meditation/sangha group and plan a time to get together with them, ideally sometime this week.

7. Solicit feedback on how the session went today.

At this point it would be natural and easy for clients to become overwhelmed with the plethora of religiously integrative CBT strategies introduced. Counselor clinical acumen is necessary for choosing a strategy that seems to resonate best with a client at this point and go with it.

Terminate the Session
SESSION 7: Gratitude

Goals of Session
1. Introduction to gratitude and how this relates to the client’s illness experience
2. Practice cognitive restructuring from a gratitude framework
3. Focus on religious/spiritual gratitude
4. Introduce concept of giving thanks in all situations
5. Grateful behavior directed toward others

Materials Needed in Client Workbook
- Homework Assignment Worksheet
- ABCDE Method for Exploring and Challenging Beliefs Leading to Negative Emotions
- Gratitude Exercise I: Identifying the Positive
- Gratitude Exercise II: Celebrating the Positives

Set Agenda

Our session today is called “Gratitude.” We will discuss what it means to be a grateful person and how your feelings of gratitude may have been impacted by your experience with illness. We will particularly focus on teachings of gratitude from Buddhism and the things in your life for which you are grateful. We will also discuss gratitude toward others, including gratitude for the teachings of the Buddha. As always, at the end, I will give you a homework assignment based on what we discuss today and another verse to memorize.

Before we begin, I’d like to review your homework assignments and mood this week.

Homework Assignment Review (10 mins)

1. Memory Verse Review:
"Be vigilant; guard your mind against negative thoughts. Pull yourself out of bad ways as an elephant raises itself out of the mud." (Dhammapada 327)

2. Ask the client about his experience with contemplative/meditative practice. Again, encourage use of the verse as needed.

   - Using a scale ranging from 0 to 10, where 0 is the worst that you’ve ever felt in your life and 10 is the best you’ve ever felt, what was your mood like on average this week?
4. Inquire whether the client met with a companion from their sangha community and what transpired. Of particular interest is the effect of the interaction on client mood.

5. Process any issues regarding spiritual distress or other negative emotions as discussed in the previous session. It can be difficult to talk about spiritual distress and to express painful feelings or resentment about their illness. Ask the client if he would you like to discuss what it was like to identify and express these feelings and thoughts? If the person had not identified such experiences, then frame the question more broadly to include any negative emotions.

6. Discuss the strategies the client implemented to manage spiritual distress. How did they work? What was effective? What was less effective? Identify whether anything fit into the religiously integrative CBT model for improving depression. Again, because Buddhism speaks extensively to recognizing negative emotions in general and handling such feelings with more acceptance and equanimity, engaging that process is itself part of the religious/spiritual context, even if there is little or no spiritual distress per se.

7. Discuss the forgiveness exercise and using loving kindness to practice forgiveness. Did she complete the list? Did she extend loving kindness practice to herself and/or to others? If so, what was that like for her?

For situations that did not go particularly well, try to make this a win-win situation; that is, how can the client turn what did not work particularly well into a learning experience? At minimum clients can observe that they managed to survive the situation despite its unpleasantness. This information can be used to point out to clients their unacknowledged reserves to become aware of and cultivate acceptance toward difficult environmental situations. In other words, their ability to hang in without being defeated can strengthen their belief in their own self-efficacy to manage and cope with worries and anxiety.

**Introduce Spiritual Gratitude (5 mins)**

Much recent research has indicated a strong association between experiencing gratitude with both subjective well-being and positive mental health. The approach for using gratitude is slightly different from approaches used to this point. Except for increasing the number of pleasant events, most of the emphasis has been on reducing emotional pain rather than increasing positive emotions. With gratitude, however, the results of positive psychology research and our understanding of Buddhist psychology is that some sadness and human discomfort can coexist with strong positive feelings to distract from or directly combat the depression.

It is important that the counselor focus this session on spiritual gratitude, not just on gratitude in general, which is what the CBT intervention will be focusing on (i.e., we
need to differentiate our intervention, RCBT, from the CBT intervention). For example, you can focus on how gratitude is an important part of the Buddhist tradition and involves cultivating a sense of gratitude not only to the things, people, and experiences in our world but to the wisdom of the Buddha, other teachers, and other people who convey them to us.

Gratitude can be a difficult emotion for some people to grasp, especially when currently experiencing pain and suffering. Counselors need to be sensitive to this fact both for gratitude and for the upcoming session on stress-related growth. One way to approach this would be the following:

**Sometimes the best way to limit the power of negative emotions is to find alternative emotions that capture our attention and also improve our mood. It seems that we have difficulty focusing on things that make us feel depressed or nervous when we are feeling grateful about something.**

**The opposite of gratitude is selfish preoccupation with what we receive – a sense of taking it for granted or being owed even more. The Buddha, in the Dhammapada, speaks of selfishness thus: “Selfish enjoyments lead to frustration; selfish enjoyments lead to fear.”(214). Thus cultivating a sense of gratitude or unselfish appreciation for all one has received or is receiving is an antidote to this.**

**One way to be released from suffering is to cultivate appreciation and gratitude for those parts of our life and experiences which have provided emotional and physical nurturance and sustenance. Within the first law of the Dharma, which states that life involves suffering, three of the seven types of suffering identified involve illness and death. These are: 1) that illness occurs for everyone; 2) that the body will begin to fail with age; 3) that death will occur. Again, an antidote to these is holding an attitude of gratefulness toward what has come to one in the past, a sense of joy with what is good in the present, and a sense of service and responsibility to what may still be done in the future.**

**Why do you think being thankful is part of the Buddha’s message for us no matter what we are going through in life?**

This question can lead to a fruitful discussion that ties in with the themes of engaging the positive, not letting our lives be driven by our feelings, and reframing our situations to see things from a position of higher wisdom and equanimity.

**Gratitude List Exercise (10 mins)**

**Our goal is to pay more attention to what we are grateful for instead of what is not going our way in life. This will not only induce positive emotions and help to reduce depression, but it will also help you realize more of your Buddha-nature. A useful way to start this process is simply to make a list of the many different things in life for which you feel grateful. This can include people, places, and things which are either a regular part of...**
Ask the client to turn to page 53 in the Workbook. Take five to ten minutes to guide the client in generating a gratitude list which is fairly comprehensive in terms of people in relationships, past and present experiences and opportunities, along with environmental features, such as one's living conditions, nature, or creation. This can be accomplished using the Gratitude Exercise* worksheet (p. 53). Have the client write the items down on her worksheet.

I see that you have a number of things and people on your list about which you feel grateful. The next step is to put a number from 1 to 10 next to each item to indicate the degree of gratitude you experience from each one, where 10 is very grateful. This step should be completed fairly quickly; it's not necessary to give this part a lot of thought.

Let's take a look at some of the items you ranked as feeling the most grateful about. Could you share a little bit about what it is that generates that feeling in you? What about it that touches you when you think or imagine it?

Counselors take a few minutes allowing clients to explore the meaning of their gratitude. This information should be most useful for placing it within cognitive restructuring and other ways of accessing grateful feelings to shift moods.

Practicing Cognitive Restructuring from a Gratitude Framework. (10 mins)

Now that we have this nice list of experiences for which you feel grateful, let's see if we can make gratitude feelings work for you in a positive direction. The way we can do this is similar to what we have done before when we have used the ABCDE approach to exploring and challenging our thoughts. The only difference this time is that when we come to the part where we challenge our negative beliefs we want to look at your gratitude list to see if any of these experiences are a good challenge or refutation of the negative beliefs and expectations.

Let's begin with any specific concern or depressive thought that you have had recently -- perhaps even today. Let's use our ABCDE Method for Exploring and Challenging Beliefs Worksheet which can be found in your workbook to analyze the experience. (Or, you can work with a completed thought log from a previous week).

Work with the client to complete this worksheet so there is enough data to continue the exercise.
Sample Dialogue for Cognitive Restructuring using Religious/Buddhist-Based Gratitude

**Counselor.** For persons like yourself who mention feeling grateful to the wisdom you have received from the Buddhist teachings and traditions, you may experience an added burst of positive feelings when you think about the Buddha or his teachings in terms of gratitude. You mentioned on your list that one of the things that makes you grateful is the idea that how we view the world right now can be infinitely rich and rewarding. Could you elaborate on that a bit?

**Client.** With my condition I'm grateful that I realize I can be with my friends and family in a richer way, if I open myself to that.

**Counselor.** How do you think that understanding could help you with negative thoughts when they pop up such as resentment or self-pity?

**Client.** It helps to know that there are other ways of understanding the wisdom of all things and that I have within myself the ability to do this. It also helps to know that in the end everything can be spiritually satisfying, even if physically and emotionally difficult. I also must appreciate that everyone goes through illness and growing older.

**Counselor.** It's pleasing to know there's a different way to view moment-to-moment experiences.

**Client.** Yes.

**Counselor.** What if we go through your worksheet again, and when we get to the exploring and challenging section with religious resources think about those two ideas that there is a higher wisdom and the outcome will follow from extending this openness of spirit and loving compassion to yourself and to others. Could you give that a try?

Here the client and counselor pause as the client tries the cognitive processing.

**Counselor.** What did you notice?

**Client.** This time it was more a sense of peace; knowing in my heart that everything be more peaceful.

**Counselor.** And how did that work against the resentment and self-pity beliefs?

**Client.** I didn't think so much about that because I was focusing on the fact that the meaning in my life is not dependent on how I feel right now. I wasn't so much focused on this minute feeling resentful. It was kind of like, "This feeling can be temporary".

**Counselor.** And how much change did you notice in your mood improvement? What number did you reach?

**Client.** I guess I got down to a three or four.

**Counselor.** So you experienced noticeable change in your negative experience and mood.

**Client.** Yes.

**Counselor.** Once again, it would be important to think about whether this can work for you at the time these negative feelings pop up. Do you think that is worth a try?

**Client.** Yes I do.

**Counselor.** Well then this would be a second thing to try before next session. The idea would be to consider your gratitude to the Buddha and his teachings when these negative feelings rise up and see whether they help improve your mood.
Counselor and client collaboratively identify the kinds of feelings and situations where using this strategy might be helpful.

**Gratitude Behavior Directed Toward Others (10 mins)**

*Up until this point we’ve been discussing generating grateful feelings toward people, events, and to the wisdom of the Buddha. It is not necessary to leave it at that. We can also generate grateful behaviors toward others. For example, when someone does a favor for you, what do you usually say or how do you usually respond to that person?*

Here clients typically note that they say ‘thank you’ or sometimes return the favor.

*Exactly. That is a typical grateful behavior. Often, however, it’s an automatic reaction that we don’t give a great deal of thought to. What we want to do here is think more carefully about what others – friends, and family– have done for us, and see if we have perhaps more to say or do for them with regard to grateful responses than we have in the past. Perhaps we have said simply ‘thank you’ but have not fully expressed in depth what their kindness or behavior meant to us.*

*This next exercise to which this dialogue is directed can be an extremely powerful one, yet needs to be carefully coordinated. Full instructions are included in the Gratitude Exercise – Celebrating the Positives* worksheet. Ask the client to turn to page 54 in the Workbook. The idea is for the clients to identify some person in their life whom they have "more to say" regarding how grateful they are for what that person has done and for how they have contributed to the person's well-being. Start by asking about two or three people to whom the client would have more to say regarding gratitude.*

*The exercise works best when the person selected is a living person.* Often people regret that they did not express their gratitude to people who have died, but that is more suitable for healing shame or guilt rather than generating the positive emotion of gratitude. Therefore, in this dialogue the goal is to identify living people. Just as the person needs to be alive they should be in some way able to be contacted by the client. The contact can be ideally in person. Telephone can be a powerful form of contact as well. Writing a letter sometimes is the only behavior a client is willing to choose. They do so because they themselves feel it would be too intense, or they are concerned that the person on the other end will be overwhelmed. Counselors can gently suggest the more direct modality of in person or telephone, but should not push the client into a form he or she does not desire.

For this exercise people select a wide variety of persons: former teachers, spouses, siblings, parents, other friends and relatives. This same strategy will also be used in the next session on altruism. That is, a very specific person should be selected along with concrete times and places as well as the means of delivery for the expression of gratitude.*
1. **Elaborate on the selected gratitude behavior.**
   a. Generally the gratitude behavior will be in the form of expressing the client’s feelings of gratitude toward the individual. This ordinarily takes place in person, by phone, or letter. Counselor and client together must outline the content of the communication to ensure it touches all the important bases. Once again it should be done by writing out together the topics to be communicated.

   b. **The points that should be made universally are the following:**
      - Precisely and specifically what it was that the other person did for you. Thus, "you were a nice person to me", is not as suitable as, "when I was in the hospital you came to visit me and I knew you were there for me." It may be helpful to keep in mind that when someone has done something like this, they have acted out of a sense of ‘loving kindness’ toward you. So how would you acknowledge receiving that from them?
      - Counselors should elicit as many of these concrete activities as possible for which clients feel grateful.
      - Clients should note what the meaning of the person's activities for them was. That is, how the activity or way of being made the clients feel, influenced their life, caused them to grow, taught them things they needed to know, etc.

2. **Pick the time, place, and modality for expressing client gratitude.**
   a. Counselors and clients together should identify the specific way in which the gratitude will be expressed, as well as the specific time and place. This prevents the exercise from becoming too vague and thus not able to be accomplished. Counselors should make clear that they expect to review the gratitude exercise within the remaining sessions.

**Homework Assignment (5 mins)**

Ask the client to turn to page 52 in the Workbook to follow along with you.

1. **Memory Verse**
   "Just as a mother would protect her only child at the risk of her own life, even so, cultivate a boundless heart towards all beings. Let your thoughts of boundless love pervade the whole world. “ Sutta Nipata 1490150.

2. **Contemplative/meditative Practice**
   Spend 20 minutes a day in contemplative/meditative practice. Begin by using the memory verse for this week, and then try with previous weeks’ memory verses if you wish.

3. **Grateful Feelings Exercise: Appreciating the Positives**
Use your gratitude list, particularly your gratitude toward the Buddha for all that he was and all that he represents, as well as gratitude for those in your sangha, to help challenge negative thoughts and to replace negative emotions. Continue to add to your gratitude list this week as you think of more things for which you are grateful.

4. Gratitude Expression Exercise: Expressing Gratitude

Express your feelings of gratitude toward the individual you identified in session. This ordinarily takes place in person, by phone, or letter. Complete at the specific time and place you chose in session. Remember to include the following:

- Precisely and specifically what it was that the other person did for you. Thus, "you were a nice person to me", is not as suitable as, "when I was in the hospital you came to visit me and you called me after I was out, which made me feel as if I was in your thoughts."
- Include as many of these concrete activities for which you feel grateful as possible
- Be sure to note what the meaning of the person's activities was for you. That is, how the activity or way of being made you feel, influenced your life, caused you to grow, taught you things you needed to know, etc.

5. Solicit feedback on how the session went today.

Terminate the session
SESSION 8: Altruism and Generosity

Goals of Session:
1. Review gratitude exercises: Gratitude Expression and Grateful Feelings
2. Introduce the notion of expressing spiritual gratitude by being generous and practicing altruism.
4. Altruism Exercise

Materials Needed in Client Workbook
- Homework Assignment Worksheet
- ABCDE Method for Exploring and Challenging Beliefs Leading to Negative Emotions
- Altruistic Acts

Set Agenda

Our session today is called “Altruism and Generosity.” This session builds on our session on gratitude last week. We will explore how we can express spiritual gratitude by being generous and engaging in altruistic (positive, kind) acts for others. As always, at the end, I will give you a homework assignment based on what we discuss today and another verse to memorize.

[elicit feedback from client at this point]

Before we begin, I’d like to review your homework assignments and mood this week.

Homework Assignment Review (10 mins)

1. Review Memory Verse:
   “Just as a mother would protect her only child at the risk of her own life, even so, cultivate a boundless heart towards all beings. Let your thoughts of boundless love pervade the whole world.” (Sutta Nipata 1490150).

2. Inquire about use of contemplative /meditative practice, using the memory verse.

3. Review Mood Rating Scale
   - Using a scale ranging from 0 to 10, where 0 is the worst that you’ve ever felt in your life and 10 is the best you’ve ever felt, what was your mood like on average this week?

4. Review gratitude exercise, if the client has carried it out. It is likely that the client carried out either the gratitude expression exercise or the grateful feelings exercise. Time should be made for either or both. In the event that neither was carried out, explore this with the client and tweak, if necessary, whichever exercise to make it more possible to be accomplished.
Review of Grateful Feelings Exercise: Appreciating the Positive in our Life

Begin with the grateful feelings exercise and review the impact that carrying out the exercise had for the client. The focus of this review should be on what happened as the client maintained her attention on people, places, and things for which she is grateful. In general, clients report that such focus has an uplifting effect on their feelings. Counselors should inquire as to why clients think this effect occurred.

The goal of the inquiry is to get at the meaning of being grateful -- that is, when I focus on things to be grateful about, what kind of person do I become, what does that say about me? Clients may only say it made them feel better and this is okay. However, to get the most out of the exercise it is useful to have the client reflect back on what gratitude does to and for their character.

It is especially useful to connect grateful feelings to any events, experiences, or situations that have a direct or indirect religious meaning. For example, people may speak about feeling grateful for the beauty of the universe, and with some gentle questioning this may come back to feeling grateful for other positives in our lives.

Review of Grateful Expression Exercise: Expressing Gratitude

Follow this up with a review of the grateful expressions exercise. The point of the review is to help clients see the value in explicit expressions of gratitude. Once again, careful inquiry may relate these feelings to the kind of person clients want to be. At times, this exercise can be quite powerful emotionally so counselors need to pay attention and debrief with sufficient focus so that clients fully process what has happened.

Once again, counselors should attend to whether or not grateful expression was connected directly or indirectly to spiritual meaning. If so, that meeting should be explored in some detail.

Assess Client’s Desire to Continue to Develop the Value of Gratitude

Finally, the ultimate goal of both generating grateful feelings and generating grateful expressions is to determine whether not clients wish to continue developing these values in their life, and what this connection can have for them in light of their present suffering. The more immediate goal is to determine whether clients are willing to incorporate generating grateful feelings into their everyday life. This can be done via conscious focus using the worksheet.

Catch up Time (5-10 mins)

Use a few minutes now to catch up on any material you may have run out of time to address in previous sessions.
Introduce Altruism and Generosity (10 mins)

The purpose of this part of our treatment is to re-focus our attention to the healing aspects of giving to others and being generous, even if to a limited degree. Research tells us that if we pay even a little attention to giving to others that, over time, we end up feeling better ourselves. In traditional Buddhist cultures, monks had to daily circulate through local villages to receive their food. Although one reason for this was for the monks to follow their vow of poverty, the other was to provide the villagers opportunities to be generous on a daily basis – and for the monks to practice humble gratitude for what they received.

[elicit feedback from client]

The dark side of depression and physical illness is how easy it is to forget the curative nature and importance of giving to others. It is part of our human dignity to care for and take care of people in need. When we cut ourselves off from that quality, we have lost something of ourselves. However, because of our own pain it is easy to become self-focused -- and this is quite natural. It is very difficult to think about a neighbor's needs when you are experiencing acute pain yourself. In those situations it is necessary to take care of yourself first. However, most of us fortunately do not experience this intense level of pain every moment of our lives -- even though we have a chronic illness. Most of us have windows of peace or relative calm where we could be available to others if we planned properly.

Although one of our motivators to engage in altruistic acts is for our emotional benefit, the most important motivator to give to others is to follow the guidance of the Buddha.

1. Assess what the client thinks of the notion of altruism and generosity and how this is (or is not) tied into their identity and practice as a Buddhist.

2. Assess the change in mood they may have experienced when being generous and giving to others. Ask for specific examples in their past.

3. Assess how their illness and/or depression have impacted their altruistic focus and activities.

Example of Dialogue with Client:

Counselor. *In what ways have you been able to give to others since you have been ill?*

Client. *Not too often really. It seems like everyone around me has to pay attention to me, so I'm the center of attention all the time.*

Counselor. *And what does that feel like?*

Client. *In some ways it's okay. It's good to know others are around. But in some ways it gets to be tiresome. Everyone doing for you and you not doing for anyone else.*

Counselor. *Are you still interested in carrying out this value?*

Client. *Yes I am. I just can't seem to figure out how.*
Counselor: That’s great. That’s exactly what we want to spend some time talking about right now.

If the client goes in the other direction of mentioning ways in which he or she has continued to be generous and altruistic, then the counselor should explore what that feels like on the occasions when that has happened. Usually people will talk about how it felt good. The counselor than should pick up on this and talk about how systematically planning to reach out to others and help them is what the focus of this time will be.

Spiritual Motivation for Altruism (5 mins)
From the spiritual perspective, remind the client to connect their own goals of helping others with the message of the Buddha to extend loving kindness both in thought and deed to others.

[Note to Therapist: use the following material depending on your sense of the comfort level and/or familiarity your client has regarding Christianity. Many American Buddhists grew up in Christian families, but others may have grown up in families that were non-observant, atheist or of a different faith, particularly Judaism, and might not find the following material at all familiar. If so, then share only the Buddha’s perspective mentioned below.]

In Christianity, in the gospel of Matthew (25:35-40), Jesus says something about serving others that is widely quoted. He says that everything we do for others is actually done to him, and that everything we don’t do for others, all the needs we do not meet, we failed to do for him. Similarly the Buddha stated in “If you do not tend one another, then who is there to tend you? Whoever would wish to tend me, he should tend the sick.” (Vinaya, Mahavagga 8.26.3.) Whether it is providing care for those who are sick or being attuned to other needs that neighbors, friends or families have, much spiritual value can be gained by being attuned to such needs, as one is able to.

The Christian verses continue:

35 For I was hungry and you gave Me food, I was thirsty and you gave Me something to drink, I was a stranger and you brought Me together with yourselves and welcomed and entertained and lodged Me,

36 I was naked and you clothed Me, I was sick and you visited Me with help and ministering care, I was in prison and you came to see Me.

37 Then the just and upright will answer Him, Lord, when did we see You hungry and gave You food, or thirsty and gave You something to drink?

38 And when did we see You a stranger and welcomed and entertained You, or naked and clothed You?
And when did we see You sick or in prison and came to visit You?

And the King will reply to them, Truly I tell you, in so far as you did it for one of the least in the estimation of men, My brothers, you did it for Me.”

Just as the message in this very profound Christian verse makes clear that giving to others is giving to the spirit of Christ, most of us never think about our actions being done for the spirit of the Buddha. It is both a sobering thought and a joyful one, as it makes giving to others even more meaningful and rewarding.

[elicit feedback from client]

Caution
At the same time, counselors want to be on alert for clients whose lives become overburdened with what they are doing for others, even in their impaired condition. For these clients the focus of the session should be on the obligation to balance this with taking care of themselves.

Altruistic Exercise (10-15 mins)

The worksheet Altruist Acts* is provided in the client’s workbook on page 58. Please have the client turn to this worksheet. There is space available to plan three altruistic acts. It is important to ensure that the client is not expecting a reward or gratitude from the person helped, but is motivated by the spirit of opening her heart in actions of loving kindness.

1. The counselor discusses with the client ways in which the client has been helpful in the past and ways in which he sees he is able to be helpful now.

2. Together counselor and client collaboratively make a list of situations and possibilities. Then, as we typically do with strategies such as this before implementation, the client is asked to rank them from easiest to most difficult. This can be done by using a simple percentage such as from zero to a hundred, with 100 being the most difficult of all.

3. Together counselor and client select which of the easier altruistic acts the client would like to initiate. This is discussed in some detail in terms of the questions who, what, when, where, why, and how of carrying out the activity. This makes the activity concrete and provides a visual picture of what is needed to carry it out, and also anticipates any barriers that could be present.

4. Next, client decides on the frequency of the altruistic acts. One trap is for clients to get very enthusiastic but then find that they have overreached and give up making any attempts. Counselors should be alert to this trap and consider reining in activities that will be ultimately too much at this point.
5. A second concern is how others in their environment will react to these behaviors on the part of the client. Sometimes family and friends in their concern will worry that such activities tax the clients' emotional or physical energy and caution clients about carrying them out. Counselors should ask whether or not family and friends will support them in doing these activities and, if not, what they might want to say to them. Here the counselor can brainstorm ways to describe their goals and perhaps even role-play what to say in such an event.

6. In order to increase motivation for selecting altruistic acts, counselors should explore with clients how they will probably end up feeling should they carry out their goal of giving to others. The idea here is to accentuate whatever is related to positive desires, ability, and importance or benefits from giving to others.

7. Remind the client to connect their own goals of helping others with the idea that they honor the Buddha nature of whomever they are helping.

8. In addition to the altruistic acts the client has chosen, ask the client to extend a loving kindness meditation to someone specific this week who is struggling with something in their lives. Help her to choose the person. Perhaps the person she has made contact with from her faith community. Extend loving kindness to this person each day. Emphasize doing so for another helps to get one’s mind off of one’s own problems and is a great way to be generous with one’s time and energy. It also helps to put one’s own problems in perspective.

Homework Assignment (5 mins)

Ask the client to turn to page 57 in the Workbook and follow along with you.

1. Memory Verse

"Selfish desires give rise to anxiety; selfish desires give rise to fear. Be unselfish, and you will be free from anxiety and fear." (Dhammapada 215)

2. Contemplative/meditative Practice

Spend 20 minutes a day in contemplative/meditative practice. Begin by using the memory verse for this week, and then try with previous weeks’ memory verses. Continue with mindfulness practice if you wish.

3. Altruistic Acts

Carry out the specific altruistic acts to be done for the particular persons at a particular time you and your therapist chose in session. Be sure to have more than one option in case other people are unavailable. These assignments, like others, should be written down so that no confusion remains.
4. **Extend a Loving Kindness Meditation toward Someone Daily**

   If you have not been doing so already, begin to daily extend a loving kindness meditation toward the person in your faith community with whom you have begun to have contact. Doing so for someone other than ourselves helps to get our minds off of our own problems and is a great way to be generous with our time and energy. It also helps to put our own problems in perspective.

5. **Solicit feedback on how the session went today.**

**Terminate the Session**
SESSION 9: Stress-Related and Spiritual Growth

Goals of Session
1. Introduce and develop the concept of stress-related growth, especially from a spiritual perspective
2. Explore ways the client may have experienced positive growth through the illness experience
3. Help the client “look for the positives” through a series of exercises.
4. Revisit the importance of interpretation.

Materials Needed in Client Workbook
- Homework Assignment Worksheet
- ABCDE Method for Exploring and Challenging Beliefs Leading to Negative Emotions
- Looking for the Positive
- Spiritual Reflections

Set Agenda
Our session today is called “Stress-related and Spiritual Growth.” We will explore the concept of stress related-growth, especially from a spiritual perspective. We will complete a series of exercises that will help you to look for the positives in your life, even in the midst of the negative things you have been experiencing. To remind ourselves about the importance of the interpretations we make, we will consider again how strong our conditioned mind is; that we impose quick judgments and interpretations on situations in ways that often contribute to suffering, rather than cultivate wisdom. As always, at the end, I will give you a homework assignment based on what we discuss today and another verse to memorize.

[elicit feedback from client at this point]

Before we begin, I’d like to review your homework assignments and mood this week.

Homework Assignment Review (7 mins)

1. Memory Verse Review: “Selfish desires give rise to anxiety; selfish desires give rise to fear. Be unselfish, and you will be free from anxiety and fear.” (Dhammapada 215)

2. Review experience with contemplative/meditative practice.

3. Review Mood Rating Scale
Using a scale ranging from 0 to 10, where 0 is the worst that you’ve ever felt in your life and 10 is the best you’ve ever felt, what was your mood like on average this week?

4. Review altruism exercise.
5. Review exercise to extend loving kindness daily to someone. Did they do this? What was the experience like?

Counselors should carefully explore the emotional reaction to carrying out these activities, as well as the effect on their physical well-being.

The goal of this review is to determine to what degree the client desires to make altruistic activities an ordinary part of his or her life. Clients have any number of common responses:

1. For some, these are activities they commonly engage in so that such practices do not significantly alter how they operate. For such people, the discussion should center on what it was like to intentionally connect these events to the spiritual motivation discussed in the previous session. Thereafter, the discussion should focus around ways in which they can continue to carry out such activities and plans for themselves despite their medical condition.

2. For others, it will be a return to activities that they once engaged in. For these individuals the discussion will be whether this is something they want to continue. Also discuss what it was like to intentionally connect these events to the spiritual motivation discussed in the previous session. Thereafter, the discussion should focus around ways in which they can continue to carry out such activities and plans despite their medical condition.

3. For others, it will be like a breath of fresh air and will create a whole new way of thinking about who they are and what they are doing. For such people the counselor will want to take considerable time in discussing the implications of these activities in terms of their well-being and spiritual perspective. Also discuss what it was like to intentionally connect these events to the spiritual or religious motivation discussed in the previous session. Tying these activities into ABCDE model will connect it to the overall CBT model.

Introduce Stress-Related Growth (8 mins)
The research literature in positive psychology offers ample evidence that many people who are suffering from serious trauma, losses, or intense medical conditions are able to find something positive about a painful experience or one that causes suffering. Naturally, this is an extremely sensitive area and one in which counselors can come across as boorish and unfeeling. Also, depending on how it is introduced, clients may end up feeling even more shame and guilt because they have not been able to experience any positive outcomes as a result of their suffering. Thus, this whole topic can have exactly the opposite effect as intended and come across as still one more demand clients are unable to fulfill.
To help steer the conversation in a productive manner, counselors can begin broadly by 
asking about changes rather than by first talking about positive outcomes.

Before we finish our work together there is one last topic that may be helpful. We have 
reviewed many topics that are related both to your depression and your medical 
condition. We would like to finish by taking a bird’s eye view of all the changes that have 
occurred as a result of your medical illness and/or depression. Some of the changes are 
things you definitely did not want and some of the changes might have been unexpected. 
I'm wondering if you can talk about some of the changes that were expected and some 
that were not expected.

Some such opening gives the client permission, so to speak, to delve into the positive 
changes that have occurred. Counselors can word this opening in any general way they 
like as long as it does not descend into the pitfalls mentioned above. After that opening 
counselors listen carefully for anything that strikes them as related to a positive shift.

What you are looking for specifically are positive changes in their own personal 
relationships with other people (e.g., I didn't know how much so-and-so really cared 
about me), positive changes that may have occurred for the people close to them (e.g., 
bringing people closer together, having family members who were formerly estranged 
now speaking to each other), positive changes in their own character or abilities (e.g., I 
am a much stronger person than I was before; I can tolerate so much more than I thought 
I could; I am a much less selfish person than I was).

When clients mention those kinds of changes this is what counselors should zone in on 
with their reflective listening skills and explore these in detail.

Once positive changes have been broached as a topic it is relatively easy to tag these 
changes onto religiously integrative CBT. Counselors now have a very large database of 
information about the client on which to draw. For example, if the client has admitted to 
spiritual struggles, counselors can invite clients to consider what these positive changes 
mean in reference to their negative feelings about their illness being due to 'bad' karma, 
or to not being good-enough Buddhists, and therefore being depressed. The ABCDE 
Thought Monitor worksheet* and Dispute Questions* from Session 4 can be used to 
generate alternative beliefs for the negative ones driving emotional distress and self-
defeating behavior. Thus, the client has come full circle from focusing on beliefs that lead 
him or her into a negative downward spiral and now has a new toolkit for generating a 
positive upward spiral.

Looking for Positives (10 mins)

In this section, introduce clients to the Looking for Positives* worksheet (page 62). It is 
hoped that this exercise will top off their experience over the last nine weeks, and at least 
create the potential for a positive summary of the experience, as well as the thrust of the 
therapy itself.
Feelings of discouragement, sadness, and helplessness are common and normal when dealing with physical and mental illness. What happened to you may seem terribly unfair. It may be terrifying. It may feel like your body or medical system has betrayed you and can no longer be trusted. These thoughts and feelings are certainly understandable. The challenge of coping effectively with illness is to learn how to both acknowledge and accept these changes, losses, and your feelings, and at the same time actively pursue growth, meaning, purpose, an appropriate sense of control, and a healthy relationship with your body, and others. Many describe illness as an end of life; others as an end of a way of life. Some are able to see the possibility of a new beginning; that perhaps even though they never asked for this experience of illness, nor would they wish it on anyone else, that something positive can come from it.

No one wishes to be the target of hatred, anger from others, or lies from other people, just as no one wishes to become ill or struggle with fears of further illness or even death. Our natural tendency is to respond with hurt, anger, our own untruths, or in the case of illness -- fear, anxiety or a sense of helpless or hopelessness.

The Buddha taught that “Hatreds do not ever cease in this world by hating, but by love; this is an eternal truth… Overcome anger by love, overcome evil by good. Overcome the miser by giving, overcome the liar by truth.” (Dhammapada, 15; 223).

There are two important messages here. The first is that it is normal and natural to have reactions to hurt, untruths, or illness, that involve anger, a desire for retribution, or a sense of depression or helplessness. Such reactions are natural because they come from a place of survival, of fighting back, or fundamental fear. But the message of Buddhism is that these types of reactions will do nothing to overcome the suffering that is involved -- and indeed, will only deepen or extend it. Rather the message is to come to understand such experiences as opportunities for an awakening of wisdom or a different way of being. This may not happen quickly or easily -- but only in the face of such suffering is such a shift really possible.

“Looking for the Positives” Exercise (10 mins)

(Note: these are the exact words at the top of the client’s Looking for Positives* worksheet).

It may sound insensitive to suggest there is anything positive in pain and suffering, yet many people who cope admit they eventually make sense of the situation or find something that benefited them or others. This does not mean they like what happened or
stop wishing it had never happened. They discovered that despite the pain they went through they could also describe positive changes in themselves and others or found parts of it that made sense. In the long run, finding benefits seems to give people a measure of serenity.

Have the client turn to the Looking for Positives* worksheet in her Workbook on page 62. Answer the three questions in session. Have the client write down her answers during this time so that she can refer back to them later. (Note: The Spiritual Reflections* worksheet will be assigned as homework so you will not ask these questions in session.)

1. In what ways, if any, can you make sense of what happened to you?

2. What positive changes have you noticed as a result of what happened?

   - In you?
   - In others and the people close to you?
   - In the way you look at the world?
   - In your religious and spiritual views and belief?

3. How can these changes help you live your life more fully?

Need to Remind Self Often
It does little good for clients to simply list the positive changes or benefits that have occurred as a function of their struggles. It is absolutely essential for benefit-finding to be effective that clients remind themselves at regular intervals of these benefits.

Focus on Meaning of Benefits or Changes
The bulk of the discussion should focus on the meaning of the benefits or changes and what the client can do in order to remind himself or herself of these changes.

Incorporation in Contemplative/Meditative Life
The suggestion should be raised about how these changes can fit into the client’s meditative/contemplative life. Perhaps it may be that during meditation practice, thoughts arise that are painful or negative. Simply observing and engaging them with acceptance is helpful. Or during other daily activities, mindfully noticing/accepting such negative thoughts or feelings, and at the same time noticing personal strengths that arise and appreciating them.

Religion, Spirituality, and Benefit Finding
Benefits and positive changes have embedded within many aspects of consolation. At some point, most people turn to their religion, spirituality, and faith for consolation. Up
until this point this has only been mentioned marginally. Now, however, it is easier to point out the connection between benefit-finding and its associated consolations. This feature should be emphasized when it is apparent.

You may or may not want to address the following questions with the client.

- When people attend to new capacities and strengths, what does this say about their ability to manage their lives with its pain and suffering?
- If some people are now more conscious of the core role in Buddhism of learning to recognize and address suffering in the path to heightened awareness and inner peace, does this help?
- If positive outcomes are possible, and you – the client – have witnessed them, what does this say about the possibilities in the future as you deal with what you are handed?

The Importance of Interpretations (10 mins)
**If you have time, this is a good illustration to share with the client to demonstrate, again, the importance of our interpretations. It also ties in well with today’s theme of seeing the positive in a seemingly negative situation.**

There is a classic Buddhist story about interpretation, judgment, and wisdom. Two Buddhist monks were walking from one village to another when they reached a stream that was deeper than usual due to recent rain. A young woman was anxiously viewing the stream, afraid to wade across as she usually did. One of the monks offered to carry her across, which she gratefully accepted. He placed her down on the other side, and he and his companion continued on their way. Some time later his companion, who had been acting preoccupied, shared his concern: “You know we aren’t supposed to consort with young women! How could you possibly have offered to carry her across the stream?”.

The other monk smiled …. and responded… “I left her on the side of the river 20 minutes ago – and you are still carrying her!”.

The first monk was certainly aware of the rules about relating to women, but decided he was comfortable offering to help the young woman across the stream, as he was doing so in the spirit of kindness and giving. The other monk, however, interpreted his behavior as inappropriate, but in doing so, he was the one investing the situation with sexuality. In addition, he was judging his fellow monk negatively and placing blame when none existed. He was also carrying these negative thoughts with him, obsessing about them.

What are your thoughts about this story?

How would you summarize the moral of the story?
(Note: You just summarized the moral of the story for the client, but asking her to tell you in her own words allows you to check her understanding of it and correct any misinterpretations).
Paradoxes in Buddhism (5 min)

**Encourage the client to read this worksheet on pages 64-65 for homework this week. It is provided below for your information, not to be discussed in session.**

Provide the following introduction: There are many paradoxes in Buddhism. Buddhism indeed embraces the power of paradoxes, not to confuse, but to help release us from seeing the world in terms of absolutes. These paradoxes are designed to help us see situations in our lives from another perspective. Then consider choosing one to read through with the client (informed both by your knowledge of the client and your own preference) and very briefly discuss.

Some of these paradoxes include the following:

1. “Form is no other than emptiness, emptiness no other than form. Form is exactly emptiness; emptiness exactly form. Sensation, conception, discrimination, and consciousness are also like this.” (Heart Sutra).

   Emptiness (shunyata) does not mean that nothing exists, but that all substance is dependent on our perception and our thoughts. This also points to the interrelationship of all forms that do exist (dependent origination).

   These statements are sometimes interpreted as fatalistic or nihilistic, but the intent is just the opposite. The intent is to help us understand that we can shift our experience of virtually everything by shifting our conceptions or awareness.

2. “Things are not what they appear to be, nor are they otherwise.” Lankavatara Sutra.

   Understanding comes from simply observing – neither projecting a certain meaning nor avoiding doing so. Can you hear a bird song, without thinking the word ‘bird’ or wondering what type of bird it is, or wishing the sound was clearer or nearer? Just listen. Can you observe an emotion, without judging it or expanding on it or suppressing it? Can you observe physical pain in this way?

3. “All states are without self; those who realize this are freed from suffering. This is the path that leads to pure wisdom.” (Dhammapada 279).

What is meant within Buddhism as ‘self/no-self’, the ultimate paradox, continues to be a question of great debate. Does this mean that there is no validity to having a sense of ‘self’? Perhaps not, as we know that losing a sense of self, under trauma or in certain drug states, can be terrifying and is not normal. However, there are two very positive ways in which this can apply.
One way is core to the Buddhist sense of enlightenment, which may emerge from deep meditative practice, in which a profound experience of loss of self opens the door not to terror but to an encompassing sense of wisdom. But if this was all that was intended by identifying the reality of ‘no-self’, then it would be limited to the relatively few who experience such states. Rather, the Buddha meant this to have much broader meaning by noting that “ALL states are without self…”.

Therefore, the other meaning is in relation to how we identify self in the moment. This applies to our tendency to identify our ‘true self’ with only one aspect of who we are: ‘I am a mother; I am a musician; I am a teacher.’. The problem is that when this changes or ceases, particularly due to illness or disability, we experience our being as fundamentally incomplete. Or with illness, we might begin to identify ‘self’ with the disability or with the illness, ‘I am a cancer patient; I can’t walk; I am blind’. And feel -- and believe -- that this negates every other aspect of who we are. In truth, who we are is incredibly multi-faceted, and each part is in constant flux, yet deserves acknowledgment and appreciation. Realizing that this is true, we can then experience all those other aspects of our being in a way that will help free us from suffering in the moment. Doing so also awakens us to the possibility of experiencing wisdom in the moment. Wisdom is not about learning more information, but is about opening ourself to the complexity of understanding that can occur in the moment: “If I am not my illness, then how can all those other aspects of my past and present experiences help me be as much of a person as is possible?”

**Homework Assignments (5 mins)**

Ask the client to turn to page 61 in the Workbook to follow along with you.

1. **Memory Verse**
   
   “May I know how to nourish the seeds of joy in myself every day.”
   
   *(Visuddhimagga [from Thich Nhat Hanh, Teachings on Love]*)

2. **Contemplative/Meditative Practice**

   **Spend 20 minutes a day in contemplative/meditative practice.** Begin by using the memory verse for this week, and then try with previous weeks’ memory verses.

3. **Complete the Spiritual Reflections Worksheet**

4. **Positive Changes**

   **Add to your list of the changes in your life that you could view as positive or that have caused growth, including spiritual growth.** It will be helpful to look to writings within Buddhism to help you view some of the changes that have occurred as positive. Also think about the paradoxes in Buddhism and how these might help you reframe your situation.
Reflect on the meaning of these changes in terms of your character and the predictions you make regarding negative beliefs. In particularly, what power do these changes give you to stop avoiding unpleasant experiences and to face them courageously?

5. **Read Paradoxes in Buddhism worksheet**
   - If you can think of other paradoxes in Buddhism, add them to the worksheet.

6. **Extending Daily Loving Kindness to Someone**
   - Continue to contact your support person in your sangha community and to extend loving kindness to this person daily.

7. **Solicit feedback on how the session went today.**

**Terminate the Session**
Remind the client that next week is that last week of treatment. Your client will likely have many feelings about ending treatment with you. Let them know that next week you will be processing her experience in treatment and how to maintain the gains she has made.
SESSION 10: Hope and Relapse Prevention

Goals of Session
1. Introduce the topic of hope as a general way of being that results from using spiritual cognitive and behavioral strategies
2. Discuss dreams and goals
3. Discuss what the client has learned/gained through these ten weeks
4. Review spiritual resources
5. Discuss how to maintain the gains in therapy through their Buddhist practices, involvement in their sangha/spiritual community (receiving and giving support), and other spiritual resources
6. Termination of treatment

Materials Needed in Client Workbook
- Homework Assignment Worksheet
- ABCDE Method for Exploring and Challenging Beliefs Leading to Negative Emotions

Set Agenda
Our last session is called “Hope and Relapse Prevention.” We will explore the concept of hope and belief, and how these two things can help us create and achieve new dreams and goals despite illness and suffering. We will then review what you have learned over the past ten weeks and the spiritual resources you have available to you. We will also discuss how to maintain the gains you have made in treatment. Finally, I will be interested in your feedback about your experience in this treatment study and what you found most helpful. And, as always, I will leave you with an encouraging memory verse from the words of the Buddha.

[elicit feedback from client at this point]

Before we begin, I’d like to review your homework assignments and mood this week.

Review Homework Assignments (8 mins)

1. Memory Verse Review:
   “May I know how to nourish the seeds of joy in myself every day.”
   (Visuddhimagga [from Thich Nhat Hanh, Teachings on Love]).

2. Review experience with contemplative/meditative practice.
3. Review Mood Scale

Using a scale ranging from 0 to 10, where 0 is the worst that you’ve ever felt in your life and 10 is the best you’ve ever felt, what was your mood like on average this week?

4. Looking for the Positives and Spiritual Reflections worksheets:

Explore what worked in terms of being effective benefit-finding reminders. What did he experience when he found himself noticing any positive changes in his life as a result of his learning to cope with his medical and environmental struggles?

When clients mention any aspect of benefit-finding, counselors need to explore what is the meaning of this. That is, the fact that they can see positives even under their current difficult circumstances says something about the following:

- Who they are as persons.
- What their capacities are.
- How their worldviews can influence their everyday mood and life.

Such reflections help us end on a note of empowerment and a sense of control over life’s vicissitudes.

5. How did the client use his faith and the words of the Buddha and other enlightened ones to help view life changes as positive? Did he think about the paradoxes in Buddhism? Was this helpful?

Hope (10 mins)

Benefit-finding and positive changes naturally lend themselves to discussion about hope. Share this with the client and ask him the following questions:

- What does hope mean for someone in a seemingly hopeless situation?
- Where can you find hope?
- What does hope mean concretely for you?
- How does Buddhist wisdom relate to your experience of hope?
- How can you hang on to hope?

These questions are just different ways of benefit-reminding but couched in the framework of different religious terminology that may open up other perspectives.
According to the words of the Buddha:
“Insight into change teaches us to embrace our experiences without clinging to them – to get the most out of them in the present moment by fully appreciating their intensity, in full knowledge that we will soon have to let them go to embrace whatever comes next.

Insight into change teaches us hope. Because change is built into the nature of things, nothing is inherently fixed, not even our own identity. No matter how bad the situation, anything is possible.”

*From “All about Change”, by Thanissaru Bhikkhu, in Purity of Heart.*

Clearly, this is not intended to mean that we can wish away our illness, the course of future medical challenges, or the possible actions of others around us. But it does mean that we can relate in a different way to aspects of our lives that are under our own control, including our thoughts, our feelings, our sense of self, and our actions, all of which can change in the moment. Recognizing this can contribute to a sense of hope.

*With that in mind, we are going to discuss the new meaning, dreams, and goals you may now have at the end of our work together.*

[elicit feedback from client]

**Meaning, New Dreams, and Spiritual Goals (7 mins)**

- Do you feel that there is a greater purpose or meaning in what has happened to you?
- Do you have any new dreams as a result of your diagnosis?
- What about new spiritual goals?
- How might the wisdom of the Buddha help you change and achieve your dreams and goals?

**Termination Protocol (10 mins)**
The main idea before the nitty-gritty items that follow will be to offer the client an opportunity to reflect on the meaning of the therapy process overall.

- What parts of the process did you find most helpful?
- Why?
- What parts seemed to help you with your depression?
- How and why?
- What parts helped you deal with your physical condition?
- How and why?
- Did anything in particular surprise you about the experience?
- Are there any other things you want to discuss before we end?
At no point should counselors be defensive about any client response; rather, the use of reflective listening and empathy is especially called for here at the end. If the client asks a question which requires gathering information, let the client know someone from the research team will address that with him.

**Maintenance and Relapse Prevention (10 mins)**

*Note: The following are included in their workbook. Please review these points with the client now. You can direct his attention to page 69 in his Workbook.*

1. **Continue to Use the Tools Daily**

   In order to maintain the gains you have achieved in treatment you need to keep using the tools you have learned.

   Ask the client to list some of the tools he has learned over the last ten weeks.

   These tools include the following:

   - Mindfully observing/exploring your negative interpretations
   - Gratitude
   - Altruism (encourage a specific activity for a specific person)
   - Finding the positives in your life
   - Extending loving kindness to others in your community/sangha (meditation group or spiritual community)
   - Look for examples in the words of the Buddha for encouragement
   - Spending time with others
   - Connecting with your sangha/spiritual community, specifically the person(s) identified earlier in treatment
   - Filling your mind and heart with the words of the Buddha and other enlightened beings

   One way to remind yourself to continue to put into practice the things you have learned is to incorporate them into a daily contemplative period. Each day during this time you can become more aware of your thoughts and experiences in a mindful, accepting manner. You might find it helpful to use a journal during this time.
2. **Make Use of Your Spiritual Resources**

Spiritual resources include, but are not limited to, meditation, journaling, social support from friends, conversations/counseling with spiritual leaders, studies of the words of the Buddha and others, forgiveness of yourself and others, extension of loving kindness to yourself and others, attending spiritual services or gatherings, attending support groups, attending activities sponsored by spiritual or religious groups such as retreats, meditation sessions, and discussion groups.

3. **Anticipate Set Backs**

Remember that there will be setbacks and times that are more challenging and difficult than others. It is at these times that it is even more important to engage in the activities and resources you learned, especially if you don’t feel like it.

**Final Homework Assignment (10 mins)**

1. **Memory Verse**

"If you want to reach the other shore, don’t let doubts, passions, and cravings strengthen your fetters. Meditate deeply, discriminate between the pleasant and the permanent, and break the fetters of mara/troubles and temptation."

(Dhammapada 349-350)

2. **Contemplative/meditative Practice**

Spend 20 minutes a day in contemplative/meditative practice. Begin by using the memory verse for this week, and then try with previous weeks’ memory verses, as you wish. Continue to cultivate whatever meditation practice you find best furthers your sense of inner well-being, peace and wisdom.

3. **Daily Use of Loving Kindness Meditations**

Continue to contact the person in your Buddhist and/or meditation/sangha community and to extend loving kindness to this person – or to others you choose -- daily.

4. **Solicit feedback on how the therapy has gone overall for them.**
Final Thoughts

1. Be sure to thank your client for what he has contributed to the therapy experience, his hard work, courage and honesty in facing these most difficult times and topics.

2. Be appropriately open with what your client taught you personally so your client can have a sense of his own altruism despite his receiving help at the same time.

3. Remind client that someone will contact them within the next week to set up an appointment to complete some questionnaires and collect blood and urine samples for analysis. Emphasize the importance of completing assessment, so as to document what has happened during the past 10 sessions. Also, therapist should be sure to contact Sally Shaw, who will contact interviewers at Duke and Glendale to set up appointment with client for evaluation.

4. End with Poem of Praise to the Shakyamuni Buddha. “Read” the prayer together (It is included on pages 70-71 in the Workbook), i.e., give client time to read and you do likewise, and then ask for any feedback from client.

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<th>Liberating Prayer</th>
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**Praise to the Shakyamuni Buddha**

O Blessed One, Shakyamuni Buddha  
Precious treasury of compassion,  
Bestower of supreme inner peace,

You who love all beings without exception,  
Are the source of happiness and goodness;  
And you guide us to the liberating path,

Your body is a wishful filling jewel,  
Your speech is supreme, purifying nectar,  
And your mind is refuge for all living being,

With folded hands I turn to you,  
Supreme unchanging friend,  
I request from the depths of my heart:

Please give me the light of your wisdom,  
To dispel the darkness of my mind  
And to heal my mental continuum.

Please nourish me with your goodness,  
That I in turn may nourish all beings  
With an unceasing banquet of delight.
Through your compassionate intention,
Your blessings and virtuous deeds,
And my strong wish to rely upon you,

May all suffering quickly cease
And all happiness and joy be fulfilled
And may holy Dharma flourish for everyone.