

Introducing CBT for Low Mood and Depression (#5): Ten Tips for Coping in a Crisis

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Hello there, and thanks for tuning in to this fifth podcast in my CBT for Low Mood series. You may have listened to the others in the series already, or you may have picked out this one. Either way is fine – for this podcast, most of what I'll talk about should stand on its own, although you may find that listening to the others will give you some helpful background. The theme for this podcast came from a CBT group I run in the counselling service. In the past, students in the group have often said something along the lines of: these techniques are great, but when I'm feeling *really* low, when I'm in a crisis, it feels almost impossible to put them into practice: what do I do then? So: here are my top tips.

What do I mean by a crisis? Well there's no singular definition here and just like the term depression it'll mean different things for different people. I guess I'm thinking here about the real holes of depression, the times when you feel most overwhelmed or hopeless, when it's hard to keep going or feel OK about yourself. If you've listened to the other podcasts you may remember me talking about negative core beliefs – basically our deepest fears about ourselves and the world: *I'm inadequate, I'm unlikeable, I'm fundamentally crap in this or that way and things will never work out*. It's when these beliefs seem to us to be true – and again I emphasise the seem – that we are at our most vulnerable, when we're really in the grip of these self-attacking, shame-laden thoughts. And of course it's not just a cognitive thing – when our core beliefs light up we *feel* all the horrible feelings that come with them. Often there is a kind of mental time-travel that goes on in these moments as painful memories and feelings are activated. Core beliefs have their roots in early experiences and we all carry our childhood selves and their wounds with us, no matter how old we are. So we can feel very small in these moments, very weak. Feelings of shame often lurk in the shadows of depression and can be very powerful in moments of crisis as the inner critic is unleashed. But there might be a whole cocktail of feelings: anxiety, dread, sadness, numbness, anger. Sometimes, strong negative emotions find their expression in behaviour: we may withdraw, fail to look after ourselves or find ourselves drawn towards risky or harmful coping strategies. Relationships can become turbulent at these times too – indeed relationship issues are often the trigger for a crisis – and we can find ourselves caught in complicated layers of feelings – our own and other peoples' – and struggling to communicate effectively.

So, on to my top tips.

Tip number one: try to anticipate a crisis. I'll acknowledge straight off that this is easier said than done, and not always possible. Life has a habit of surprising us; often there's little we can do to prepare. But sometimes we can clue ourselves up a little. Sometimes there are patterns we can notice, triggers we can watch out for. Times of transition, for example, such as going home for the vacation or coming back to Oxford, can often be tricky. New beginnings and goodbyes. Exams and assessments. Significant dates, anniversaries, holidays and celebrations. Physical factors that may make you more vulnerable such as lack of sleep, illness and hormonal factors. It's worth giving some thought to the kinds of situations that might predispose you to a crisis. It won't necessarily prevent the crisis but if you've pre-empted it then that can help you put things in place before things really start to slide. There are various tools and exercises available to help you reflect on your own risk factors and early warning signs, and to plan things you can do to help yourself at these times. A safety plan is a particularly helpful thing to consider if you're prone to self-destructive impulses: it's

basically a note to yourself which sets out all the things you can do to look after and keep your future-self safe when that future self may be less able to think these things through in the moment. At the end of the document version of this podcast I've listed a number of useful links and resources, including a Safety Plan template.

Tip number 2: Recognise a crisis for a crisis. You don't have to call it a crisis – you might not like that word, or it might not fit for you in that moment. What I'm getting at here really is the importance of noticing when your mental health needs prioritising, and doing just that. It can be easy to bury your feelings when things get shaky, to resort to avoidant strategies or push yourself to keep on keeping on. Take work, for example. I see a lot of students who get into a habit of over-working despite signs that it's taking its toll. Others fall into a very stuck place with work, struggling to face it and the feelings associated with it. There's no perfect balance, and we're all prone to avoidance, but when it comes to a crisis, this is your body and mind giving you a clear signal: something needs to change. Your usual rules and expectations for yourself may not be workable at the moment. You may need to break some habits. Give yourself permission to listen to your feelings.

Tip number three: remember that thoughts are thoughts. This has been a theme in these podcasts and it's that central tenet of CBT: thoughts are not equivalent to facts. Now there may well be very real, factual circumstances that have contributed to a crisis – usually there is some precipitant. But to me, what turns it into a depressive crisis is when the meaning we ascribe to those facts plunges us deeper and deeper into a hole. Maybe it's all your fault, maybe things will never go right for you, maybe you've been kidding yourself all along and you really are a failure – these are the pernicious, depressive thoughts that drag you down. I talked in earlier podcasts about ways of spotting these kinds of thoughts and introduced a couple of techniques to help you loosen their grip on you. The thing is, when you're in crisis mode, it is pretty hard to implement them. The thoughts seem very real – *feel* very real, and your capacity to weigh them up and contemplate different perspectives diminishes. There's a biological effect here: under high levels of stress, the prefrontal cortex – the bit of the brain involved in reasoning, working memory and attention regulation – functions less well, and priority is given to the emotional centre of the brain, the amygdala. So going through some of the more cognitively demanding aspects of CBT is probably going to be tricky. My advice here: even if it's hard to challenge your depressive thoughts, if it's hard to see a different perspective *in that moment*, you can still hold on to the possibility there *might* be another way of thinking. In other words, you don't have to be persuaded of a different viewpoint, you don't even have to know what it might be, you just have to hold onto the possibility there might be one. This is more about a leap of faith than a change in your thinking. But you can come back to those thoughts when you're more able to think clearly – for now, you've just got to get through the crisis.

Tip number four: focus on behaviour rather than thoughts. It's often easier to change your behaviour rather than your thinking during a crisis. Not easy – but easier. And this is important because how you behave has a massive impact on how you think and feel. If you act with hatred towards yourself, it reinforces the idea there are hateful things about you. Do your best to act with kindness towards yourself, even if you don't feel that way. I'm not saying that tender, soothing feelings will inevitably follow, but it might just take the edge off more destructive impulses. What do I mean by acting with kindness towards yourself? Well, everyone will have a different version of this. Imagine you are putting together an emotional first aid kit for yourself – what would you want in it? It might be particular songs or books or films or poems. It might be relaxation or meditation exercises, games, people you can reach out to or whose voices you can bring to mind, places you can visualise where you feel safe and comfortable. Take some time to compile this – whether physically or in your mind – and turn to it in a crisis.

Tip number five: look to your body to turn the emotional temperature down. This follows on from the last suggestion but I think deserves its own separate point. Emotions are *bodily* experiences as much as they are psychological, and when they run high, there are profound physical consequences. It's easy to forget it, maybe particularly in a place like Oxford where you have to be in your head so much of the time, but we are animals, and we have animal brains and animal bodies. And emotions serve a physiological, adaptive function – they're designed to gear us up for some kind of action. When strong emotions reach a certain pitch, they act as a powerful force for directing our behaviour and thoughts. If you're feeling overwhelmed with emotion, it's often a good idea to try and bring the emotional temperature down a notch or two by soothing your body. Again, there are lots of ways to do this – sometimes sensory distractions work well: getting outside, changing your environment, a walk or run, a shower or bath. Anything that just helps to ease your physiological stress. Equally, when you're feeling very depressed and depleted, perhaps struggling to get out of bed, it can often be really helpful to take some small, concrete steps towards activating yourself: a walk round the quad, tidying your room, preparing a simple meal. Do your best to see to the basics: sleep, food, self-care and whatnot – it won't necessarily solve things, but neglecting them is almost guaranteed to make things worse.

Tip number six: remember that healing and growth can come from pain. In the midst of a crisis this may be hard to see, but in my clinical and personal experience often a crisis can be a pivotal moment and the gateway, in time, to important insights or changes. And it may well take time, lots of it. There may be many crises, many setbacks, misfortunes, mistakes, but if you can hang on to the idea that perhaps there is, ultimately, meaning to be found through these experiences and *give* yourself that time, it can provide a powerful anchor in the midst of a storm. One of the things in my own emotional "first aid kit" is the music of Nick Cave. Asked what advice he'd give to his 16-year-old self, Cave acknowledged a wish to protect them from suffering, but went on to say: "my older and more experienced self also knows that the painful things are often the things that ultimately give substance and meaning to life. My older self knows that life's mistakes are destiny's way of laying the tracks that will bring my younger self to the place where I am at this very moment — the mostly happy place."

Tip number seven: reach out for support. No surprise perhaps that this is one of my tips. For a whole myriad of reasons, having support is probably the number one most important thing that's going to help you get through a crisis. It's worth saying though, support can come from lots of different forms and lots of different people. It may be emotional support from a trusted friend or family member. It might be company and distraction – people you enjoying being around, to help dispel some of the mental fog and lighten the mood. Or it might be professional support: a counsellor, a helpline, a GP, or a member of your college welfare team. All of the colleges have designated members of staff whose roles include pastoral and welfare support; if you haven't already done so, check out your college website for details of who this is. Many colleges have on-call Junior Deans who can provide emergency support night or day – just call the porters lodge and they'll arrange this. Your GP is a key port of call for mental as well as physical health and can make onward referrals to mental health services as appropriate. Outside of surgery hours, you can call 111 or, in a life-threatening emergency – for example if you feel worried about keeping yourself safe – you can go to the Emergency Department at the John Radcliffe hospital or call 999. Attached to this podcast is a list of these and other contacts.

Tip number eight: reach for self-compassion. There's now a whole body of research attesting to the importance of self-compassion for mental health, and a whole therapeutic approach based on it. I just want to mention a particular aspect of it here, which is the capacity it affords us to look beyond

and through suffering and shame at our shared and flawed humanity. Dr Kristen Neff has a wonderful website full of resources on self-compassion which I'll link to in the transcript, but I'll just share here a quote from her:

"Things will not always go the way you want them to. You will encounter frustrations, losses will occur, you will make mistakes, bump up against your limitations, fall short of your ideals. This is the human condition, a reality shared by all of us. The more you open your heart to this reality instead of constantly fighting against it, the more you will be able to feel compassion for yourself and all your fellow humans in the experience of life."

Tip number nine: find what works for you. This is by no means an exhaustive list. I hope it's given you some ideas, but do pick and choose, depending on what works for you, and find your own way. There is no one right way to cope in a crisis, and just as we all have our own unique vulnerabilities we all have our own unique sets of needs and coping strategies. Invest time in thinking about what helps you.

Tip number ten: focus on the here and now. I like to read this short poem by Lemn Sissay to members of my CBT group which I think says it perfectly:

"How do you do it?" said night

"How do you wake and shine?"

"I keep it simple" said light

"One day at a time"

Useful Links and Resources

Students against Depression: <https://www.studentsagainstd Depression.org/> - lots of self-help materials including a Safety Plan template (see the Self Help page)

Dr Kiristen Neff's website: <https://self-compassion.org/guided-self-compassion-meditations-mp3-2/> - lots of resources including guided exercises on self compassion.

University Counselling Service Self-Help Resources:

<https://www.ox.ac.uk/students/welfare/counselling/self-help> (see the Mental Health section in particular for more useful links)

Points of Contact

Emergency Services: Call 999 or go to Accident & Emergency (A&E) if you are at immediate risk e.g. if you are having suicidal thoughts and believe you might act on them imminently. The nearest A&E in Oxford is at the John Radcliffe Hospital: Headley Way, Headington, Oxford, OX3 9DU. See weblink for Emergency Department of Psychiatry:

<https://www.oxfordhealth.nhs.uk/wp-content/uploads/2014/10/AM-075.15-Emergency-Department-Psychiatry-Service.pdf>

Your GP: Your GP is a point of contact for mental as well as physical health and can make referrals to specialist services where appropriate. See your college website if you're not sure which surgery you're connected to.

111: Call 111 if you need medical help quickly but there is not an immediate risk, or if you are unable to contact your GP surgery (e.g. due to its being out-of-hours). As well as physical health advice, this is a source of round the clock, non-emergency advice on accessing mental health support. (<https://www.oxfordhealth.nhs.uk/news/mental-health-helpline-moving-to-nhs-111/>)

Safe Haven: A late night safe space for people experiencing mental health crisis (run in partnership with Mind). Open 6pm – 10pm Friday, Saturday, Sunday and Monday. You can self-refer on the night from 5pm by calling 01865 903037 or email: oxonsafehaven@oxfordhealth.nhs.uk

College Support

Your College Welfare Team: Every college has its own setup but this may include a Wellbeing Adviser, Welfare Officer or Dean, Chaplain, Nurse and others. Check your college website if you're not sure who to contact.

Your College Lodge: The porters can also help you access support within college. If you need urgent support outside of normal working hours, they will be able to alert an on-call Junior Dean who can help you access appropriate support.

Helplines and Online Support

Samaritans: 116 123. Emotional support helpline, free to access, operates 24/7.

NightLine: 01865 270 270. Run by and for students, open 8pm – 2am, also offers instant messaging chat.

No Panic: 0300 7729844 OR 0330 606 1174 for the Youth Helpline (13-20 year-olds). Operates 10am to 10pm, provides support for people struggling with anxiety.

CALM (Campaign Against Living Miserably): 0800 58 58 58. Operates 5pm – midnight. “For people in the UK who are down or have hit a wall for any reason, who need to talk or find information and support.” Also offers webchat.

The Mix: 0808 808 4994. Support service aimed specifically at under 25s. Helpline is open 3pm – midnight, and there are also webchat and text support services available.

Togetherall: A safe, professionally moderated online peer support community. Register with your university email address to gain free access.

The Helplines Partnership: There are lots of other helplines and online supports out there. This site helps you find organisations you can contact quickly by phone, email or online, for a range of different forms of support.