

HOW TO CHALLENGE UNHELPFUL THOUGHTS

It is normal to feel anxious and / or depressed at times when dealing with a life-changing event such as cancer. However, when we feel anxious or depressed we tend to think in a distorted, often illogical way. Everybody thinks in this kind of way some of the time, but if we allow our distorted thoughts to shape how we feel, then we are guaranteed to feel worse rather than better. By understanding common patterns of distorted thinking and carefully examining them when they begin to take hold, we can help ourselves feel better and not spiral deeper into anxiety and / or depression. Common unhelpful thinking patterns include:

- **Black-and-white thinking:** The 'all or nothing' approach. For example: *'If I can't be there for my children 100 per cent then I am a useless mother'* or *'I am useless to my family because I can't provide for them at the moment'*.
- **Overgeneralising:** Assuming that one negative experience will dictate the future experiences. For example: *'My first chemotherapy was horrendous, it looks like this is how it is going to be for the rest of my treatment'* or *'I'm the sort of person that will get all the side effects going.'*
- **Mind-reading:** Based on the actions of others we assume that we know what they are thinking and feeling about a situation. For example: *'My family obviously don't care about what I am going through otherwise they would be there for me'* or *'That person over there is looking at me because I am wearing a wig.'*
- **Catastrophising:** Assuming the worst possible outcome is going to happen and there is nothing you can do about it. This style of thinking is often dominated by the 'what ifs?': *'What if my cancer comes back? I will die'*, *'What if I just can't cope and get through treatment?'*
- **The 'shoulds':** We terrorise ourselves with thoughts of all the things we should be doing better. For example: *'I should be able to work and have chemotherapy at the same time'* or *'I should be able to cook for my family and not rely on others to help out.'*

The four steps to changing how you feel

Step 1: Recognise the thought

Recognise the kind of unhelpful thinking patterns in which you tend to engage. Did any of the above ring true for you? Sometimes recognizing that you are engaging in an unhelpful thinking patterns can be enough to help the process of adopting more helpful ways of thinking about things.

Step 2: Examine the thought

- a. What is the persistent thought that keeps going around in your head? (For example, *'What if nothing I do helps and the cancer comes back?'*)

b. Where is the evidence for and against this thought? Write this out as follows:

Evidence for	Evidence against
Example: <i>'There is a chance that my cancer will come back and I can't do anything about that.'</i>	Example: <i>'I am getting the best treatment and the doctors tell me there is a very good chance that my cancer won't come back.'</i>

c. How helpful is this way of thinking? (For example: *'This way of thinking is not helpful because it keeps me in a constant state of fear.'*)

d. Is the outcome that you fear really as bad as you imagine? Would you be able to cope? (For example: *'If the cancer does come back, I would have to deal with it then. I guess I would be able to cope as I am coping pretty well with it now, so I could do it all again.'*)

Step 3: Try looking at it another way

a. If someone else had this thought what advice would you give them? (For example: *'I would say to them that they are doing the best they can for themselves. I would tell them to focus on living now, as none of us knows what lies in the future.'*)

b. What can I tell myself next time I have this thought? What would be a more helpful way of looking at this? (For example: *'I don't know if the cancer will come back, but I am doing all I can to ensure that it doesn't. in the meantime, I can live my life a day at a time and enjoy it as best I can.'*)

Step 4: Assess how you feel now

- a. How do you feel now? Is there even a slight change in how you feel? (For example, 'I am still really worried about what might happen down the track, but in the meantime I'm just going to keep on being involved with all my grandchildren's activities for as long as I can.')

- b. Recognize your achievements! What can you say to yourself about how you are coping? (For example: 'I have been told that lots of patients get depression because of the stress of the cancer. Everyone says I look good and I am doing well to get up and about each day despite how tired I am' or 'I think I'm doing well keeping on with the treatment as it's hard going.')

Extracted from: MacDonald, Mandy, 'Depression' in Hodgkinson, Dr Katharine; Gilchrist, Dr Jemma (eds), *Psychosocial Care of Cancer Patients: A Health Professional's Guide to What to Say and Do*, Ausmed Publications (2008, Melbourne), 107, 108, 109.

Disclaimer: This publication contains a variety of content on health and medical issues for general education and informative purposes only. The content of this publication is not diagnostic or prescriptive and does not replace the service or advice of a qualified health care professional. The Publisher does not purport to give any medical advice and is not qualified to do so. While the Publisher has taken every care to ensure the accuracy of the professional, clinical, and technical components of this publication, it accepts no responsibility for any loss or damages suffered by any person as a result of following the procedures described or acting on information set out in this publication. To the extent permitted by law, the Publisher expressly disclaims responsibility for and liability in respect of, the accuracy of the content in this publication.