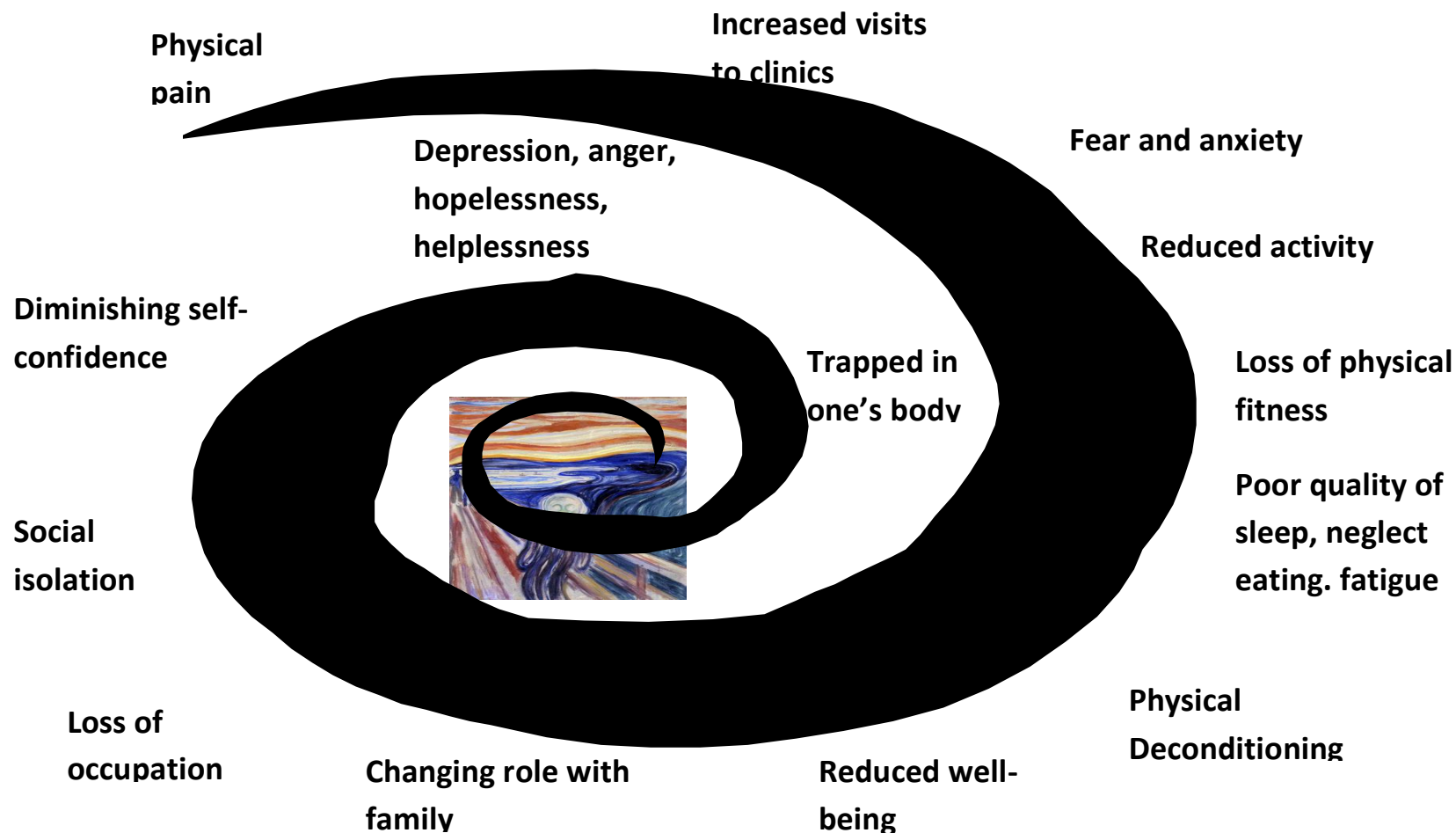




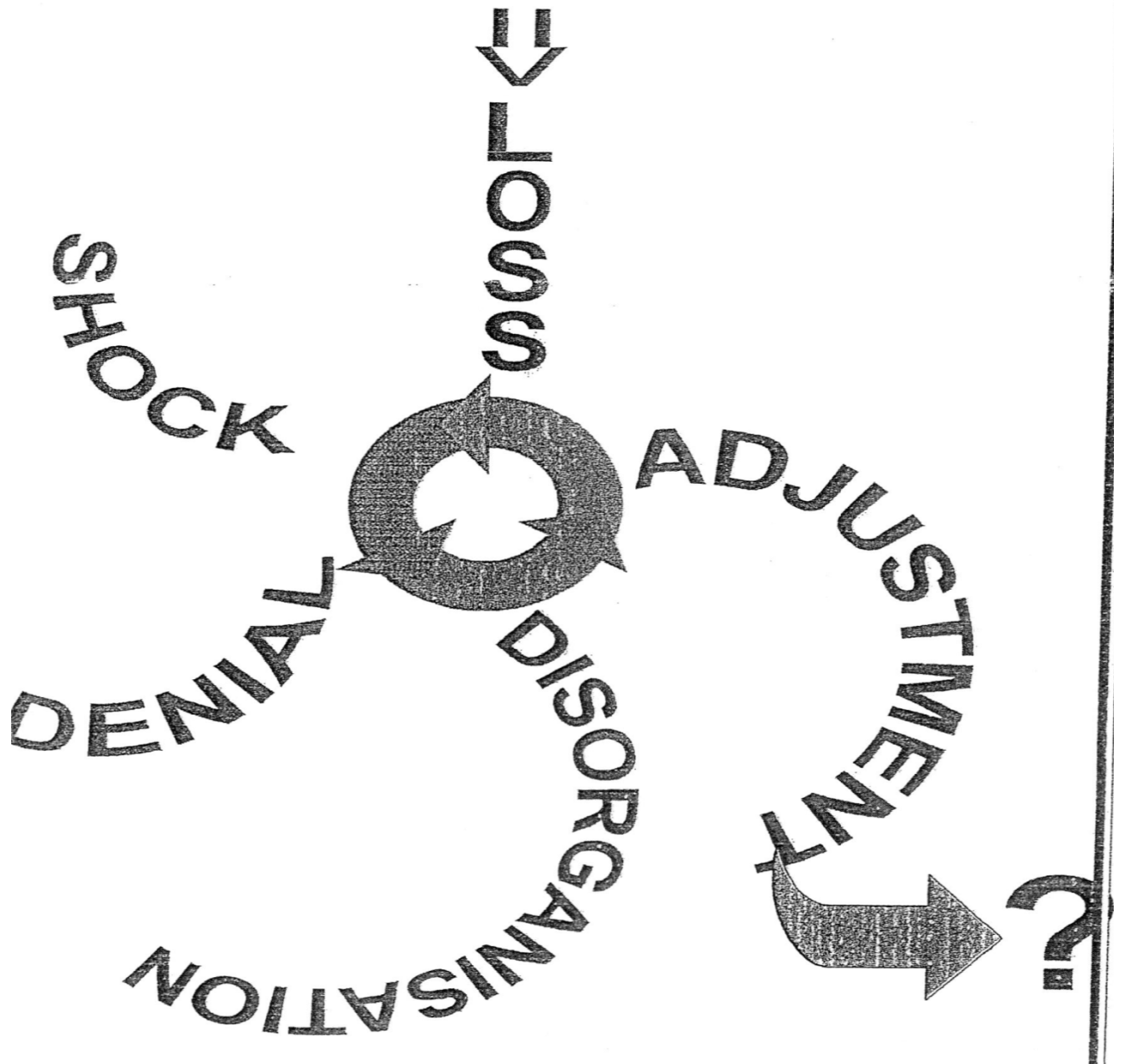
Pillar D1. Understand how pain makes you think and feel

== DOWNWARD SPIRAL OF CHRONIC ILLNESS ==



THE LOSS - ADJUSTMENT CYCLE

TRAUMA



YOUR OVER-ALL SENSE OF LOSS / GAIN THROUGH COPING WITH A CHRONIC CONDITION

LOSSES	GAINS

POINTS TO PONDER

The Loss-Adjustment Cycle helps examine the stages one passes through in the process of coming to terms with a new body and, perhaps, a new life-style.

**What have your experiences been at each stage in terms of
...the behaviour of your family members?
...the reactions of your friends? Colleagues?
...the responses of the medical profession?
...society at large? Cultural expectations?

How did these experiences influence
...your thoughts?
...your feelings?
...your handling of the pain?

**Where do you see yourself at, now on the cycle?

Where are you generally on a good day? How come?!

Where do you think you might be on a difficult day? Why do you suppose that is so?

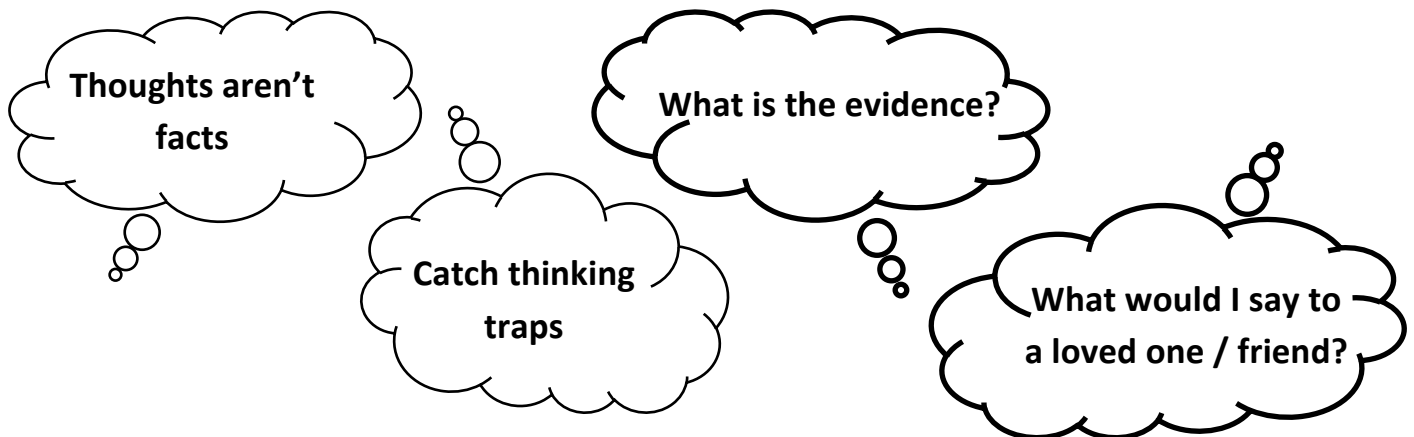
How can we create a bridge from one to the other?

** What new learning and discoveries have you made about yourself on your journey?

Which areas do we have to work at a bit more?

CHANGING OUR RELATIONSHIP WITH OUR THOUGHTS

1. Finding HELPFUL thoughts



2. Connect with the present moment



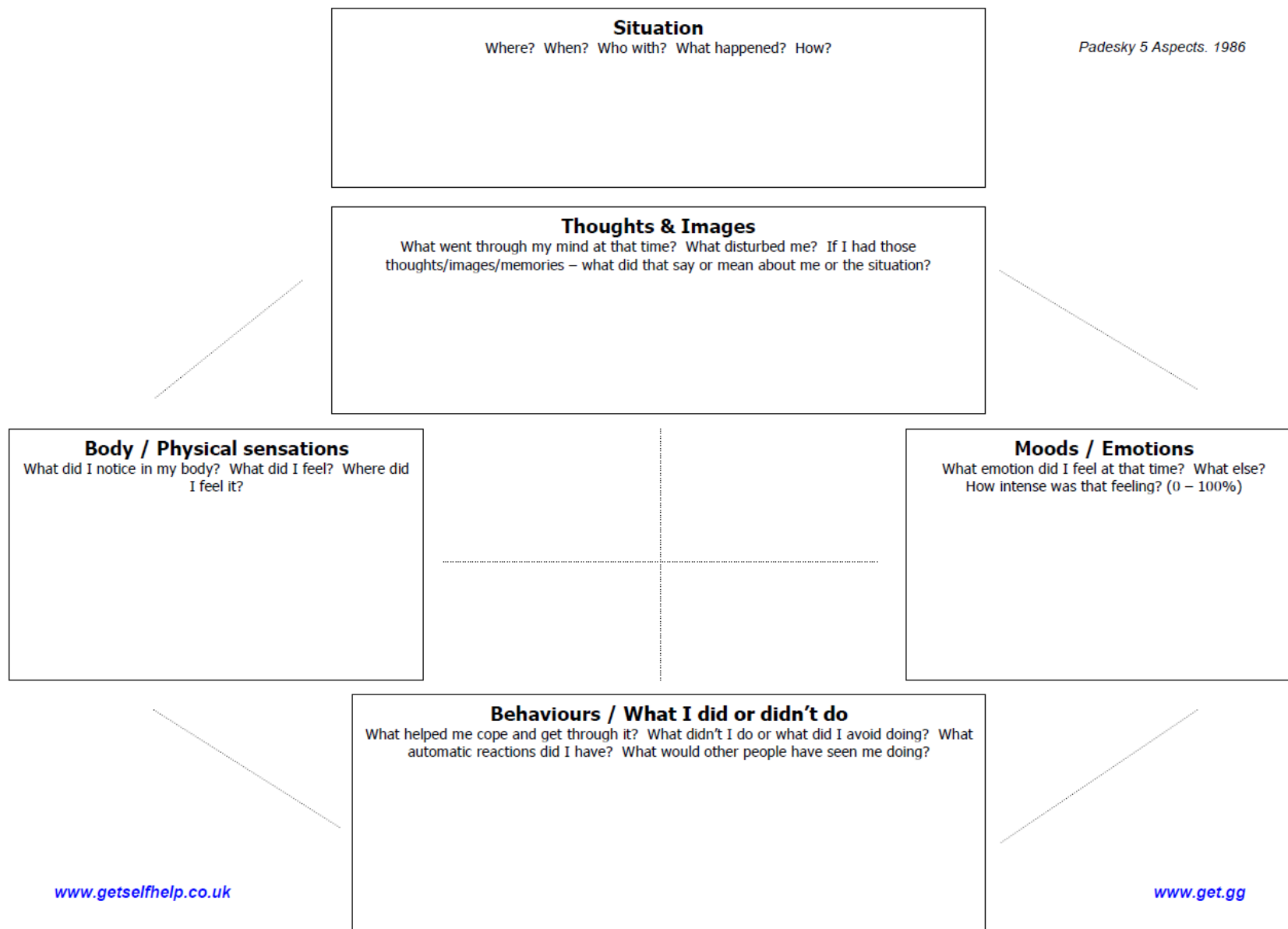
Mind Full, or Mindful?



from u

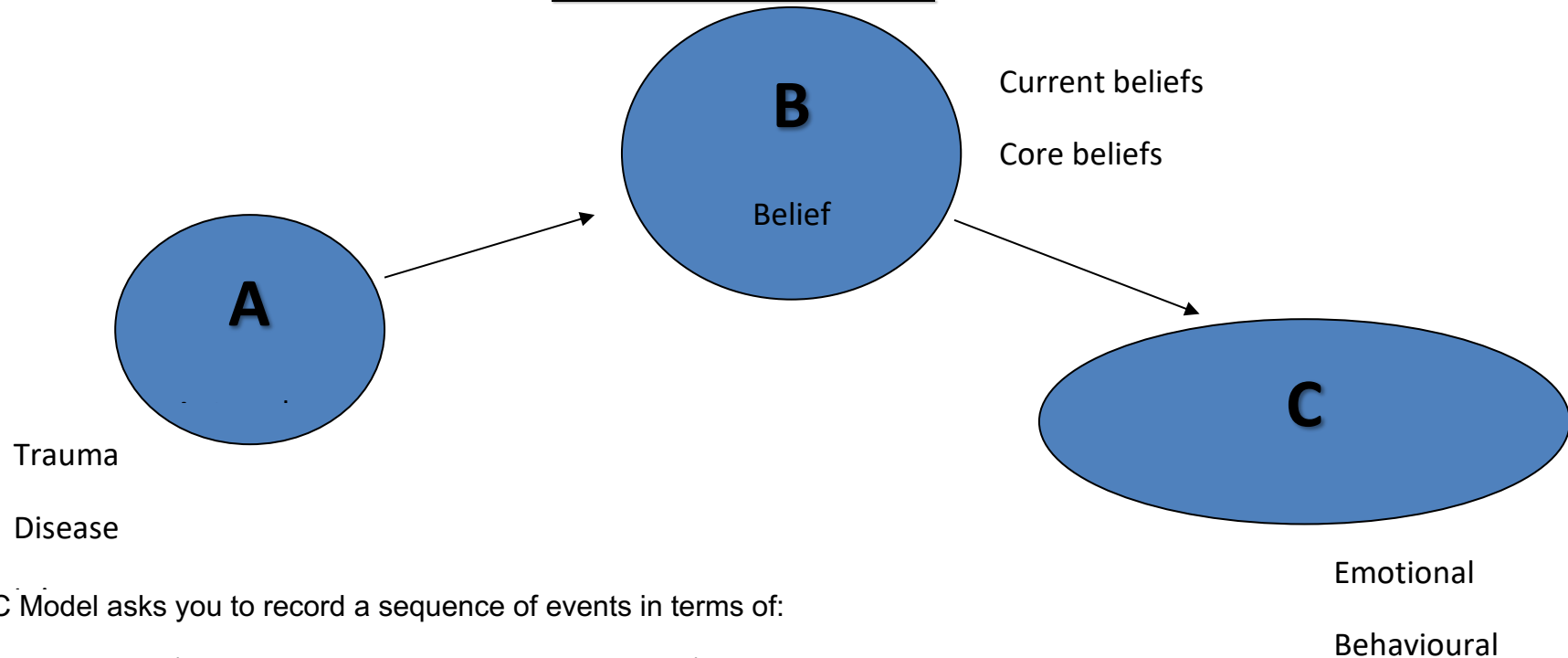
Being aware of thoughts like passengers on a bus ... You can be in the driving seat, whilst all the passengers (thoughts) are being critical, abusive, intrusive, distracting, and shouting directions, or sometimes just plain nonsense. You can allow those passengers to shout and chatter noisily, whilst keeping your attention focused on the road ahead, heading towards your goal or value.

(Hayes et al, 1999)



A SIMPLE DIAGRAM OF

COGNITIVE BEHAVIOUR THERA



The ABC Model asks you to record a sequence of events in terms of:

A - Activating Event (also sometimes described as a 'Trigger')

B - Beliefs (for example, the thoughts that occur to you when the Activating Event happens)

C - Consequences - how you feel and behave when you have those Beliefs (consequences may be divided into two parts: your actions and your emotions)

Common Cognitive Distortions

BY JOHN M. GROHOL, PSY .D.

What's a cognitive distortion and why do so many people have them? Cognitive distortions are simply ways that our mind convinces us of something that isn't really true. These inaccurate thoughts are usually used to reinforce negative thinking or emotions – telling ourselves things that sound rational and accurate, but really over serve to keep us feeling bad about ourselves.

For instance, a person might tell themselves, "I always fail when I try to do something new; I therefore fail at everything I try." This is an example of "black or white" (or polarized) thinking. The person is only seeing things in absolutes – that if they fail at one thing, they must fail at all things. If they added, "I must be a complete loser and failure" to their thinking, that would also be an example of overgeneralization – taking failure at one specific task and generalising it to their very self and identity.

Cognitive distortions are at the core of what many cognitive-behavioural and other kinds of therapists try and help a person learn to change in psychotherapy. By learning to correctly identify this kind of "stinkin' thinkin'," a person can then answer the negative thinking back, and refute it. By refuting the negative thinking over and over again, it will slowly diminish overtime and be automatically replaced by more rational balanced thinking.

TYPE OF C.D.	EXPLANATION	EXAMPLE
ALL OR NOTHING THINKING	You see things in black and white categories. If your performance falls short of perfect, you see yourself as a total failure.	I was in so much pain today that I accomplished nothing. OR Because the gardening was left half-done, I feel I'm no good at all...I'm depressed.

OVER-GENERALIZATION	You see a single negative event as a never-ending pattern of defeat.	I've had such a bad day, I'll never feel any better. OR Because Dr. XYZ was hard on me, the entire medical profession disbelieves me and I had better keep my distance from them all.
MENTAL FILTER	One negative event gets picked out and you dwell on that till everything seems wrong/ negative/ discouraging.	I was angry with my partner/child/ friend yesterday so that makes me a really awful person.
DISQUALIFYING THE POSITIVE	You reject positive experiences by saying that they don't count.	I had a good day, but that doesn't count for anything because it happens so rarely. OR I enjoyed our trip out but that doesn't count because I'll pay for it tomorrow.
JUMPING TO CONCLUSIONS: MIND READING	You arbitrarily conclude that someone is reacting negatively to you, but don't bother to check this out.	Society at large thinks I am a shirker/doctors think I am a nuisance/my partner is fed up with me/friends think I'm a grouch!
MAGNIFICATION or CATASTROPHIZING	You exaggerate the importance of one element, such as your own shortcomings or other people's achievements.	Everybody else seems to cope better with his or her problems than I do. OR Life was wonderful before I had this pain. OR Because I've woken up in pain, I'll never get anything done today.
MINIMIZATION	You inappropriately shrink the positive until it appears tiny and insignificant.	It doesn't matter that despite the pain, I was able to do xxxx . Anyone would have done that.
EMOTIONAL REASONING	You assume that your negative emotions/symptoms reflect the way things really are.	I am in pain therefore I must be feeling really awful today. OR Because I am so much in pain, I am the patient.

<p>“SHOULD” STATEMENTS</p>	<p>You allow your life to be governed by words such as should/ must/ ought (or should not...)</p>	<p>I am not working so I must do more housework to compensate. OR I should be making an effort to go to the park because everybody else wants to.</p> <p>OR, conversely, My family should be more tolerant of me because I am in so much pain.</p>
<p>LABELLING and MISLABELLING</p>	<p>An extreme form of over-generalization, involves attaching a negative label to yourself instead of keeping the self separate from the experience.</p>	<p>I am in pain therefore I am a patient. OR I can't do my regular work anymore therefore I am a loser. OR My concentration is worse than before – I must be stupid.</p>
<p>PERSONALIZATION</p>	<p>You see yourself as the cause of external events that you are in fact not responsible for.</p>	<p>My partner went around the shops slowly to be with me...it's my fault she/he had a lousy time. OR I can't play football with my kids anymore...it's my fault that they are losing out. OR My marriage is under strain and it's my entire fault because I'm to blame.</p>