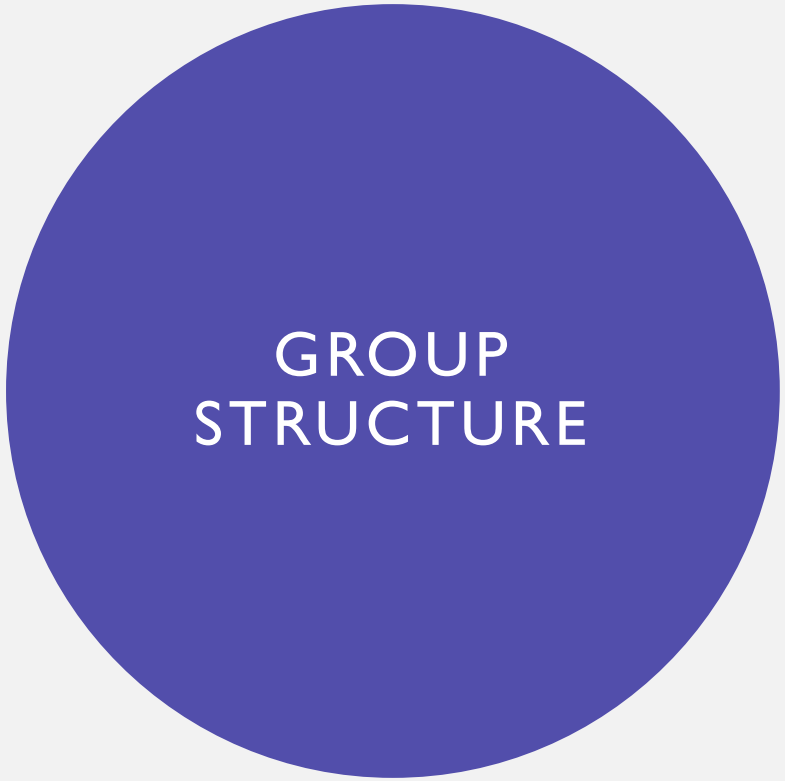
DEPRESSION 101

UPDATED JUNE 2026

4-Week Psychoeducational Group

Group # 1: Introduction, CBT Triangle

- Psychoeducational group
  - Not psychotherapy group, crisis management, case management, etc.
- 3-4 sessions
  - Each session will have an agenda, topic, skill, and practice assignment
- Participation
  - Even though this is a course, there will be some opportunities for participation



INFORMED CONSENT

- **Psychoeducation.** The courses are educational in design and purpose, and do not provide individual therapy or group therapy. In these psychoeducational group courses, the facilitator will present scientific and theoretical material that may be applicable to a variety of life circumstances and problems. Psychotherapy services are entirely distinct and separate from the psychoeducational group experience.
- **Confidentiality.** All information about participants in the course will be kept confidential within Ochsner Health. There are exceptions to confidentiality that are required by law. We have a duty to report if you are a danger to yourself or someone else, or that a dependent child or adult is being abused or neglected. You can view Ochsner's privacy policies online: https://www.ochsner.org/patients-visitors/privacy- policies/ochsner-privacy-policy.
- **Confidentiality of Other Attendees.** With full understanding of the need for confidentiality for all attendees, you accept the following: (1) You will not disclose personal information about other attendees to anyone outside of the course; (2) any activity between attendees outside of the course is solely based on the choice of these attendees and is not the responsibility of the facilitator.
- **Respect for Dignity and Safety.** You are expected to treat other attendees and the facilitator with respect for their dignity and safety. Intimidation and threats to any attendees or the facilitator will not be tolerated. The course facilitator reserves the right to terminate any attendee's participation in the course for violating these rules.
- **Limitations.** These psychoeducation courses are not built to manage high-risk conditions or crises (i.e., substance abuse, psychosis, severe cognitive issues, suicidal or homicidal ideation, non-suicidal self-injury, etc.). Please do not contact your course facilitator for help in a high-risk or crisis situation. If you have an immediate and severe crisis, please call 911 or go to an emergency department or urgent care.

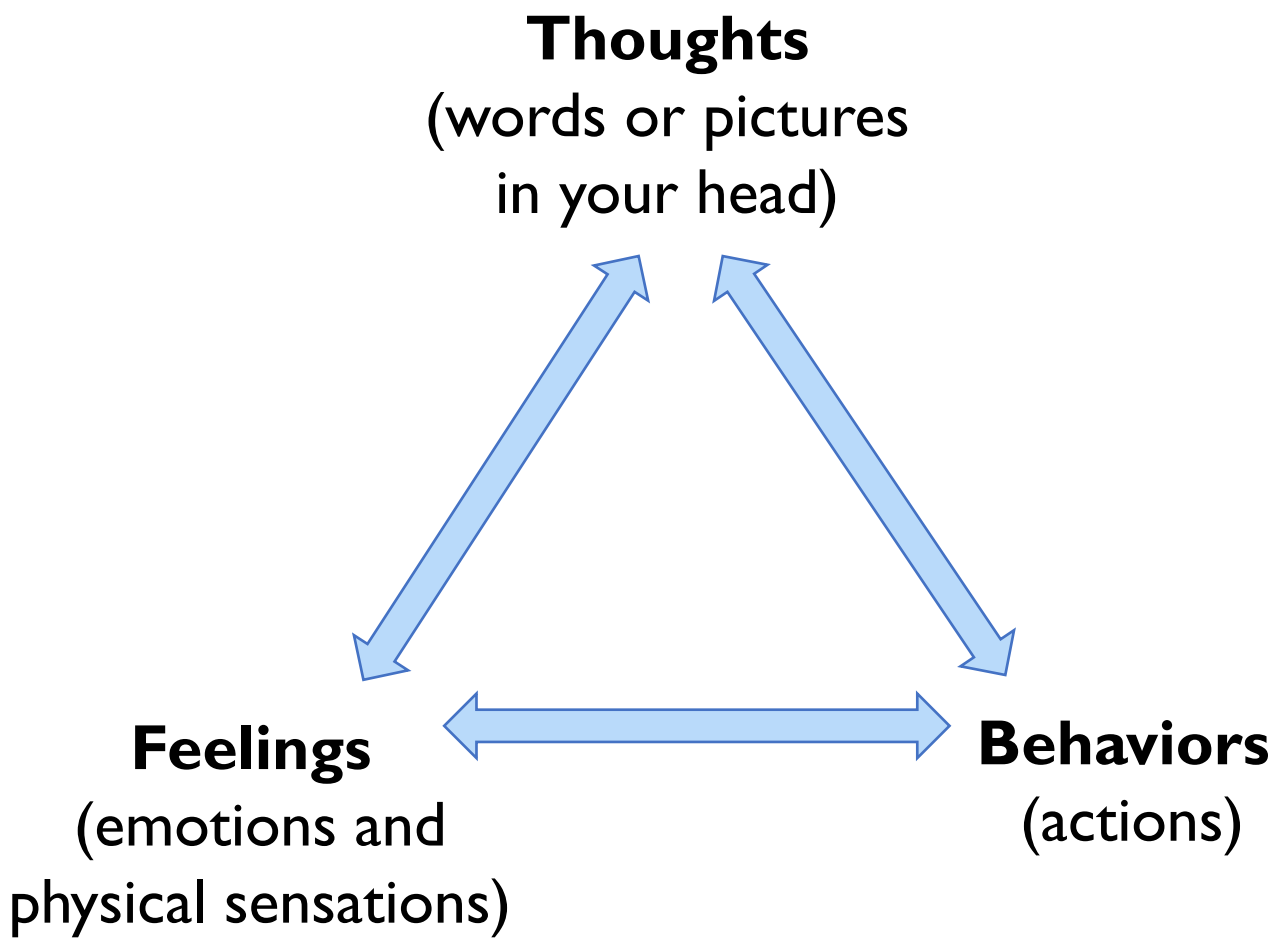
SESSION 1 AGENDA

1. Symptoms of Clinical Depression
2. CBT Triangle
3. Introduction to Emotions (with an emphasis on depression)
4. Vicious Cycle of Depression
5. ABC Model

COMMON SYMPTOMS OF CLINICAL DEPRESSION

- Sadness, emptiness, or hopelessness, most of the day, nearly every day
- Low interest/pleasure in previously enjoyed activities (anhedonia)
- Feelings of worthlessness or excessive or inappropriate guilt
- Changes in sleep and/or appetite
- Moving more quickly or slowly than normal
- Fatigue or low energy
- Decreased ability to think, concentrate, or make decisions
- Recurrent thoughts of death or suicide

COGNITIVE-BEHAVIORAL THERAPY (CBT) TRIANGLE



CBT TRIANGLE AND DEPRESSION

Feelings

- Sadness
- Disappointment
- Emptiness
- Hopelessness
- Helplessness
- Disappointment
- Despair
- Gloom
- Loneliness
- Defeat
- Displeasure

Thought

- "I'm not good enough"
- "I'm a failure"
- "This feeling is never going to change"
- "Nobody wants to be around me"
- "I'm unlovable"
- "I don't want to get out of bed"
- "It's too hard to be around other people"
- "I'm having trouble thinking clearly"

Behavior

- Low interest
- Avoiding activities that usually bring pleasure
- Isolating
- Moping or brooding
- Withdrawing from social contact
- Frowning
- Sobbing or crying
- Talking little or not at all
- Giving up or not trying to improve
- Difficulty thinking or concentrating

EMOTION BASICS

- 3 functions:
  - Motivate us to action
  - Communicate to others
  - Communicate to ourselves
- Shift language of "good/bad" emotions to "comfortable/uncomfortable," "helpful/unhelpful"

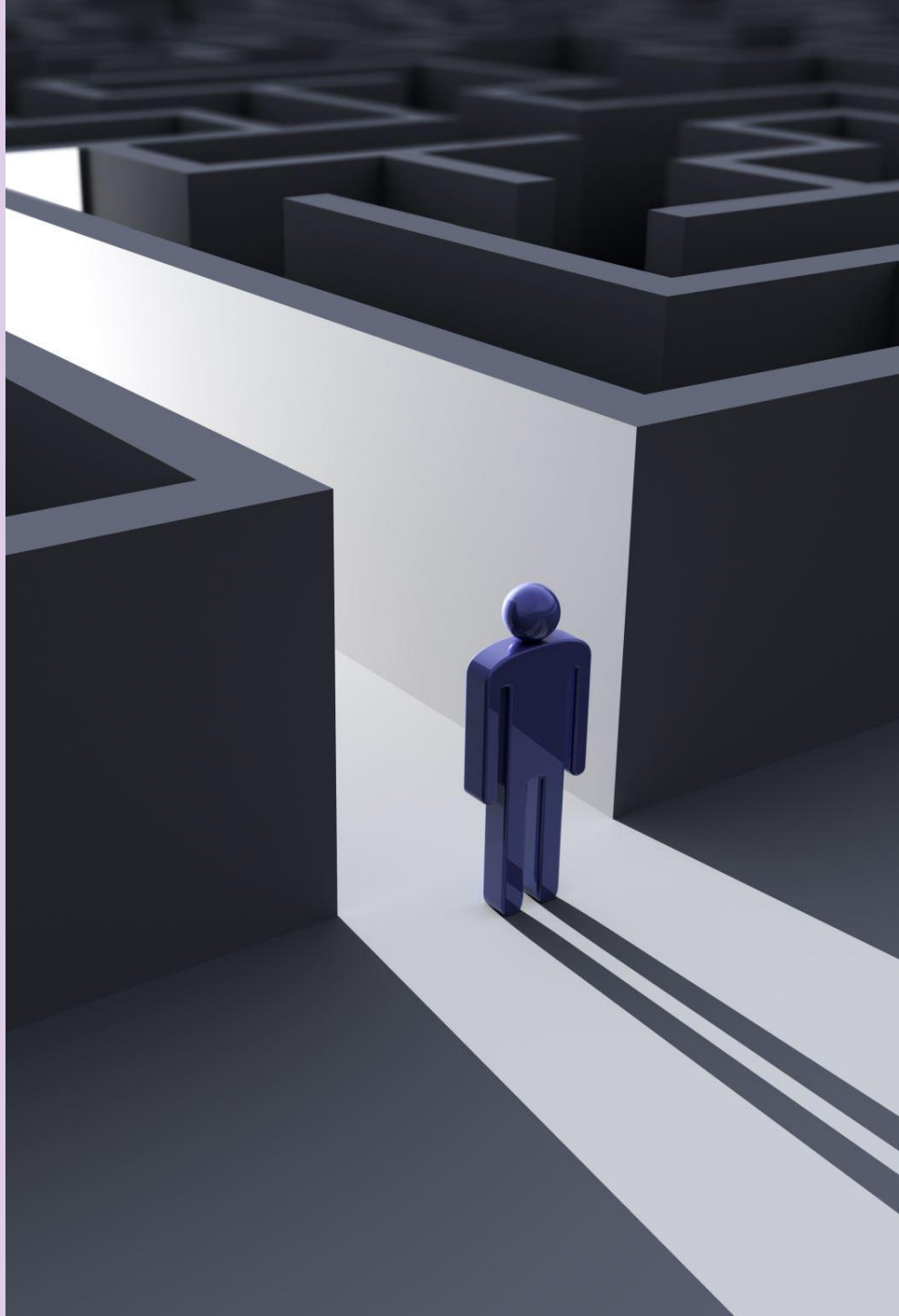
EMOTION RANGES

- All emotions exist on their own separate continuum.
  - For example, the opposite of happiness is NOT sadness, because these are separate emotions and thus exist on separate continuums:

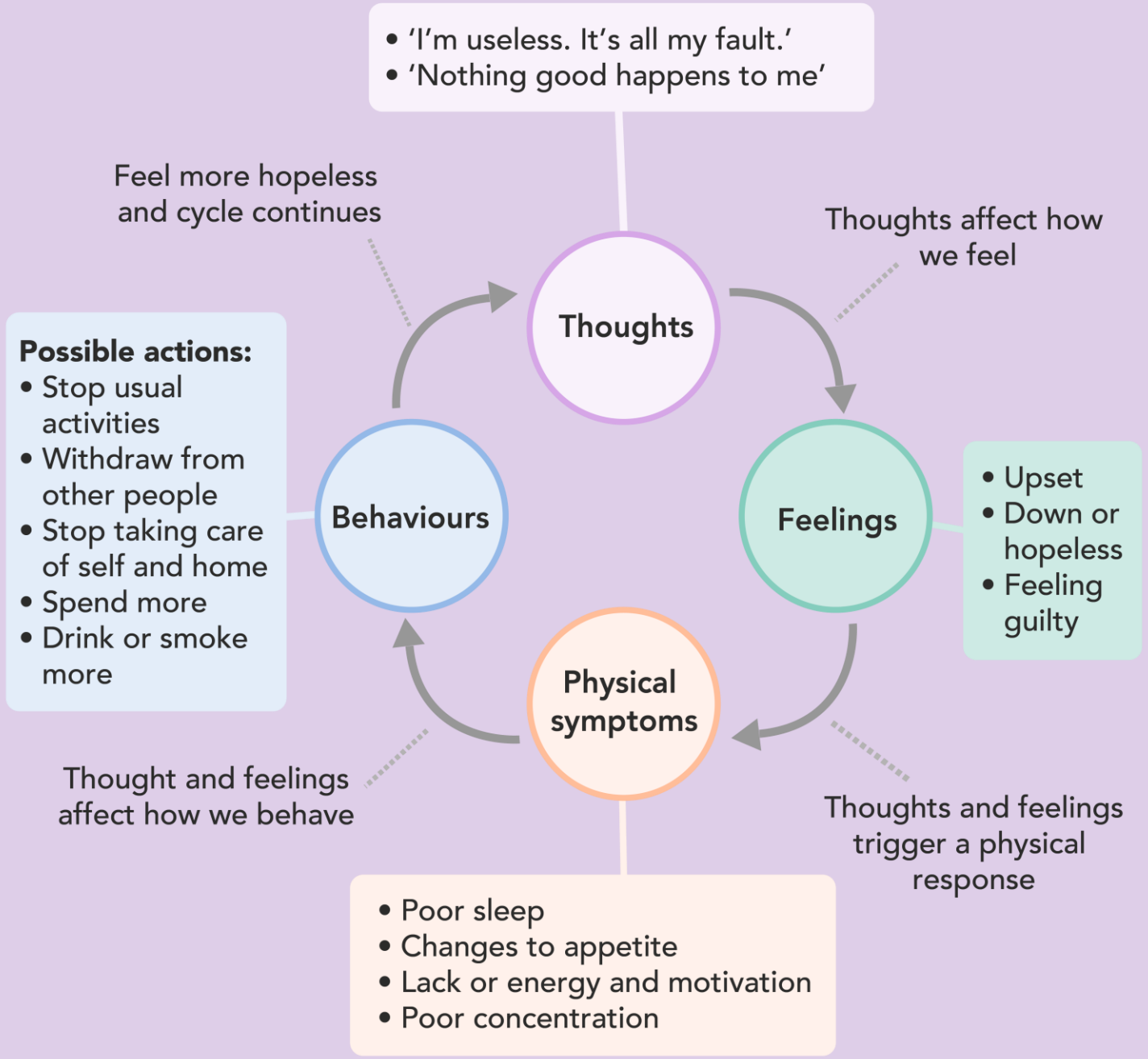
  - ←okay, content ----------HAPPINESS----------euphoria, mania →
  - ←down ----------SADNESS----------depression→

DEPRESSION

- When does it make sense that we experience sadness?
  - Sadness alerts us to loss
- What does sadness motivate us to do?
- How is sadness helpful or useful?



VICIOUS CYCLES



ABC MODEL

- A: Antecedent
  - The situation/trigger – what starts the CBT triangle
  - External (traffic, upsetting email) or internal (memory, self-critical thought)
- B: Behavior
  - Influenced by our thoughts and feelings
- C: Consequences
  - Both positive and negative!

- Over the next few weeks, we will look at skills to impact each of the components in the CBT triangle with the aim to improve overall mood.
- Cognitive Coping (Session # 2)
  - Thinking traps, cognitive restructuring basics
- Behavioral Coping (Session # 3)
  - Emotion-driven behaviors, opposite action, SMART goal setting
- Coping with Physical Sensations (Session # 4)
  - Relaxation strategies, TIPP



BUT FIRST, PRACTICE!

- Before we can use skills to intervene with each aspect of the CBT triangle, we need to be clear on what you are experiencing in each area!
- Use the chart over the next week to track your emotional triggers, thoughts, behaviors, and consequences to get a better understanding of how your emotions unfold

CBT TRIANGLE PRACTICE

Date	Antecedent	Thoughts	Feelings (emotions and sensations)	Behaviors	Short-Term Consequences	Long-term Consequences
9/12	Feeling really tired	My depression is getting worse, I won't feel up to going out tonight	Heaviness in head and arms, pit in stomach, sadness, guilt	Cancel plans, take a nap	Feel relief, feel nothing while sleeping	Feel guilty for not getting anything done and for ditching friends

DEPRESSION 101

4-Week Psychoeducational Group

Group # 2: Cognitive Coping Skills

SESSION 2 AGENDA



Why are thoughts important?



Automatic thoughts



Thinking traps



Challenging Questions for Cognitive Flexibility

WHY ARE THOUGHTS IMPORTANT TO FOCUS ON?

The way we *think* about our world influences how we *feel*. Many situations can be interpreted in more than one way.

How you *feel* can also influence what you *think*.

EXAMPLE

Example: Imagine you call a friend every Friday afternoon, but this week they don't pick up.

What thoughts might you have?

"They're angry at me"
"Something bad must have happened to them"
"They're probably busy and will call me back later."

Example: You're feeling frustrated by a tough day at work.

How might this affect your interpretation?

What if you had just received a big raise at work?

EXAMPLE



AUTOMATIC THOUGHTS

- We all experience *automatic thoughts* at times: thoughts that come up quickly and drive us to react.
- This ability can be helpful to our survival: If we're in danger, we want to be able to react fast
- However, these thoughts can also lead us to unhelpful interpretations

THINKING TRAPS



When we focus only on the negative parts of situations, automatic thoughts aren't so helpful. Getting stuck in patterns where our automatic thoughts are usually negative is common for people with depression.



Because the way we think affects how we feel, it's important to notice when we are getting stuck in negative thinking patterns.



Thinking traps can get in the way of seeing other possibilities. They make our thinking less flexible. By only seeing the negative side of a situation, we are more likely to respond in unhelpful ways—like avoiding or pushing feelings away.

All-or-Nothing Thinking

Jumping to Conclusions

Emotional Reasoning

Labeling

Over-generalizing

Disqualifying the Positive

Magnification & Minimization

Critical Words

COMMON THINKING TRAPS

ALL-OR-NOTHING

- Thinking in absolutes
- Everything is either black or white, no consideration of gray

- Examples:
  - If I'm not perfect, I'm a failure
  - I can never do anything right

OVER-GENERALIZING

- Making broad interpretations from a single or few events. One negative is seen as a never-ending pattern.

- Examples:
  - "Everything is always terrible."
  - "I always mess everything up."

JUMPING TO CONCLUSIONS

- Interpreting the meaning of a situation with little or no evidence.
  - Mind reading: interpreting the thoughts and beliefs of others without adequate evidence,
  - Fortune telling: The expectation that a situation will turn out badly without adequate evidence

  - Examples:
  - "She must think I'm an idiot.:
  - "I'm not even going to try to talk to them because I know it won't work."

DISQUALIFYING THE POSITIVE

- Recognizing only the negative aspects of a situation while ignoring or discounting the positives.

- Examples:
  - "I know they said I did a good job, but anyone could've done it."
  - "I could've done a better job."

EMOTIONAL REASONING

- Assuming emotions reflect reality or the way things really are. Using emotions as evidence that something is true.
- Beliefs that feelings are facts about a situation

- Examples:
  - "I'm afraid to fly (so it must be very dangerous)."
  - "I can't get out of bed because I'm so sad."

MAGNIFICATION & MINIMIZATION

- Magnification: also called catastrophizing. Blowing things up out of proportion, seeing worst-case scenario only.
  - Examples: "This is the worst day I've ever had!" "My life is terrible!"
  - Minimization: Shrinking the importance of things inappropriately, often positive qualities
  - Examples: "Everyone got positive reviews, not just me"

LABELING

- Attaching negative labels to yourself and others, which leads to rigid and inflexible categorizations.
  - Examples:
    - "He's an idiot."
    - "I'm a slacker."

CRITICAL WORDS

- Could, should, would
  - Critical words lead to guilt or resentment about a situation that we cannot change.
  - Examples:
    - "I should've worked harder on that project."
    - "If I had paid more attention, I wouldn't have made that mistake."

HOW DO WE BECOME MORE FLEXIBLE IN OUR THINKING?

- One way out of these thinking traps is to consider your negative automatic thoughts not as "truths" but as one possible interpretation.
- *Cognitive Flexibility* involves coming up with other interpretations of situations that bring up strong emotions for you. Learning to be more flexible in your thinking can help you respond in more helpful ways to strong emotions.



CHALLENGING QUESTIONS

- When you find yourself falling into a thinking trap, ask yourself the following questions to generate other ways of thinking about emotional situations:
  - Do I know for certain that _____ will happen or is true?
  - What evidence do I have for and against this thought or belief? (Evidence = objective facts)
  - Could there be any other explanations?
  - How much does it *feel* like _____ is true? What is a more *realistic* chance that _____ is true?
  - Is my negative automatic thought driven by the intense emotions I'm experiencing?
  - If _____ was true, could I cope with it? How would I handle it?
  - Even if _____ was true, could I live with it?
- The responses to these questions can be used to help you come up with other interpretations of the emotion-producing situations you face.

EXAMPLE

- Situation/Trigger: Home alone on a Saturday night
- Automatic Thought(s): "I'm such a loser." "I'll never find a partner"
- Is this a thinking trap? Yes (labeling; all-or-nothing thinking, any others?)
- Run through cognitive flexibility questions:
  - Do I know for certain that ___ will happen or is true? *No, I don't*
  - What evidence for I have for this thought?
  - Any other interpretations or explanations?
- Come up with a flexible alternative thought:
  - "Just because I'm not out with people right now doesn't mean I'm a loser."
  - "I may be more hopeful about finding someone tomorrow, when I'm feeling less depressed."

EXAMPLE

- Situation/Trigger: Going to an event where I don't know many people
- Automatic Thought(s): "I won't have anything to say." "People will reject me or not want to talk to me."
- Is this a thinking trap? Yes (fortune telling)
- Run through cognitive flexibility questions to come up with a flexible alternative thought:
  - Do I know for certain that ___ will happen or is true? *No, I don't know this for certain.*
  - How much does it feel like ___ will happen? What is a more realistic chance? *It feels like it will happen a lot, like 90%, but maybe a more realistic change is 40%*
  - Even if ___ were true, could I live with it? *I guess. I have been rejected before, like someone not calling me after a first date. Even though it didn't feel good at the time, I don't really think about it much now.*

HOMEWORK #2: CHALLENGING QUESTIONS PRACTICE

- Do I know for certain that _____ will happen or is true?
- What evidence do I have for and against this thought or belief? (Evidence = objective facts)
- Is this a thinking trap?
- Could there be any other explanations?
- How much does it *feel* like _____ is true? What is a more *realistic* chance that _____ is true?
- Is my negative automatic thought driven by the intense emotions I'm experiencing?
- If _____ was true, could I cope with it? How would I handle it?
- Even if _____ was true, could I live with it?

DEPRESSION 101

4-Week Psychoeducational Group

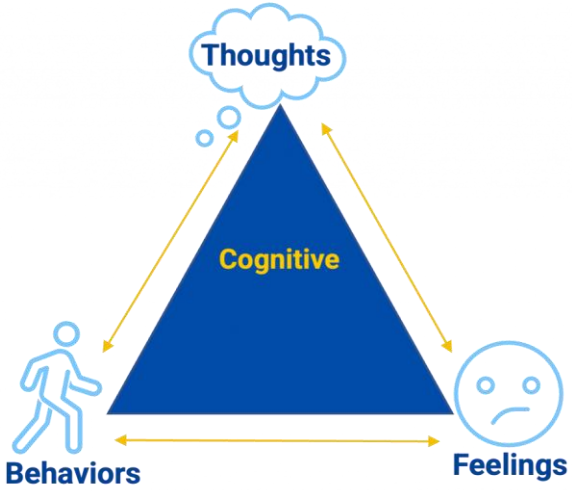
Group # 3: Behavioral Coping Skills

AGENDA


Emotion driven behaviors
Opposite action
SMART Goals
Additional habit forming tips

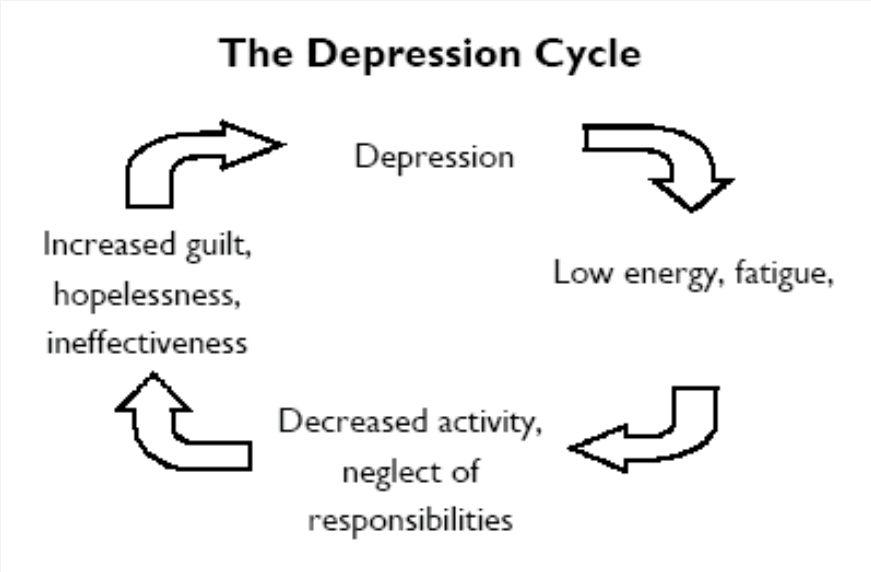
BEHAVIOR ACTIVATION BASICS

- Often, we tell ourselves, "Once I feel better, then I will do X, Y, Z...."
  - We need to do the opposite!
- Changing behaviors leads to changes in thoughts and feelings
- Increasing pleasant activities provides positive reinforcement and creates momentum
  - Dopamine, Serotonin



EMOTION-DRIVEN BEHAVIORS

- Each emotion has a corresponding behavioral urge
  - Sometimes helpful, sometimes not, depending on the situation.
- Emotion-driven behaviors typically reduce uncomfortable emotions in the short-term, worsen them in the long-term



EMOTION-DRIVEN BEHAVIORS

- Emotion-driven behaviors are our attempt at escaping/relieving uncomfortable emotions (ex: avoidance)
- Avoidance can be...
  - Overt
  - Subtle
  - Cognitive
  - Safety aids

Avoidance sends your brain the message that you are unable to cope with the emotional experience—keeping you stuck in the cycle of avoidance and maintaining negative beliefs about emotions.

EMOTION-DRIVEN BEHAVIORS

Worry/Rumination	*Short-term*: Feel like you're working to solve the problem *Long-term*: Doesn't solve the problem, takes up a lot of time, actually increases negative emotions over time
Distraction (watching TV, phone scrolling)	*Short-term*: Avoid feelings associated with a difficult situation *Long-term*: Miss important elements of situation (e.g., questions directed at you, instructions)
Perfectionism	*Short-term*: Feel stressed but prevents uncomfortable uncertainty about whether you're doing a good job *Long-term*: Continue to feel pressure for things to be "perfect," maintains worry that people will think less of you if you make a mistake
Lashing out at someone	*Short-term*: Release of tension, like you "taught them a lesson" *Long-term*: Damage relationships, feeling guilty

HOW DO YOU BREAK THE CYCLE OF UNHELPFUL EMOTIONAL BEHAVIORS?

- Replace emotion-driven urge with a new behavior (Opposite Action)
- Approach uncomfortable emotions to strengthen your ability to cope
- Opposite Actions...
  - Can be small (sitting up straight when you have the urge to slouch)
  - Should be active (replace "sleep all day" with "go for walk/attend social outing," rather than simply "not sleep all day")

POSSIBLE OPPOSITE ACTIONS

Emotion-driven behavior	Opposite Action
Withdraw from friends	Call friends, make plans to go out
Nap	Schedule activities, go for a walk
Listen to sad music	Listen to upbeat music
Move slowly or minimally	Be active – walk quickly, stretch, do jumping jacks or push ups
Avoid eye contact	Make direct eye contact
Apologize excessively	Apologize only once (and only if warranted), talk about something else
Speak softly	Use a full voice
Deny yourself something to make up for what you did	Engage in an enjoyable activity (text friends, eat a favorite food, listen to music, etc.)
Seek reassurance	Talk about something else
Worry/ruminate	Practice mindfulness or problem solving

GOAL SETTING

- It can be very challenging to engage in alternative behaviors, especially if motivation or energy is low.
- SMART Goal setting can assist with setting realistic, "baby step" goals to improve chances of success, which will improve motivation and ultimately, improve mood.



S: Specific

M: Measurable

A: Achievable

R: Relevant

T: Timely

ADDITIONAL TIPS

- Start with SMALL changes
- Update your environment
- Tie new behaviors to other existing habits
- Something is better than nothing
- Tell someone about your new behavior/goal

PRACTICE OPPOSITE ACTION

Situation/Trigger	Emotion(s)	Emotion-driven urge	Opposite Action (s)

PRACTICE: SET A SMART GOAL FOR THE WEEK

- Specific:_Read a chapter of a book___
- Measurable: ___Yes, measured by reading 1 chapter__
- Achievable:_In the morning, in a quiet place. Choose book ahead of time. Put the book where I will read. Can use noise-cancelling headphones. Can tell my brother to increase accountability.__
- Relevant: _Yes, reading chapter of book will help get closer to learger goal of reading a book._
- Timely:_Tomorrow at 10am__

DEPRESSION 101

4-Week Psychoeducational Group

Group # 4: Physical Sensations Coping Skills, Wrap-Up

AGENDA

- Review homework (Opposite action, SMART goals)
- Review of physical sensations
- Stress response and relaxation response
- TIP Skills
- Guided Imagery
- Body Scan
- Group Wrap Up

PHYSICAL SENSATIONS

Physical sensations refer to any physical symptoms that you might experience during strong emotions

Just like *how we think* and *how we behave* in a situation can influence our emotional experience, so can *how we feel physically*.

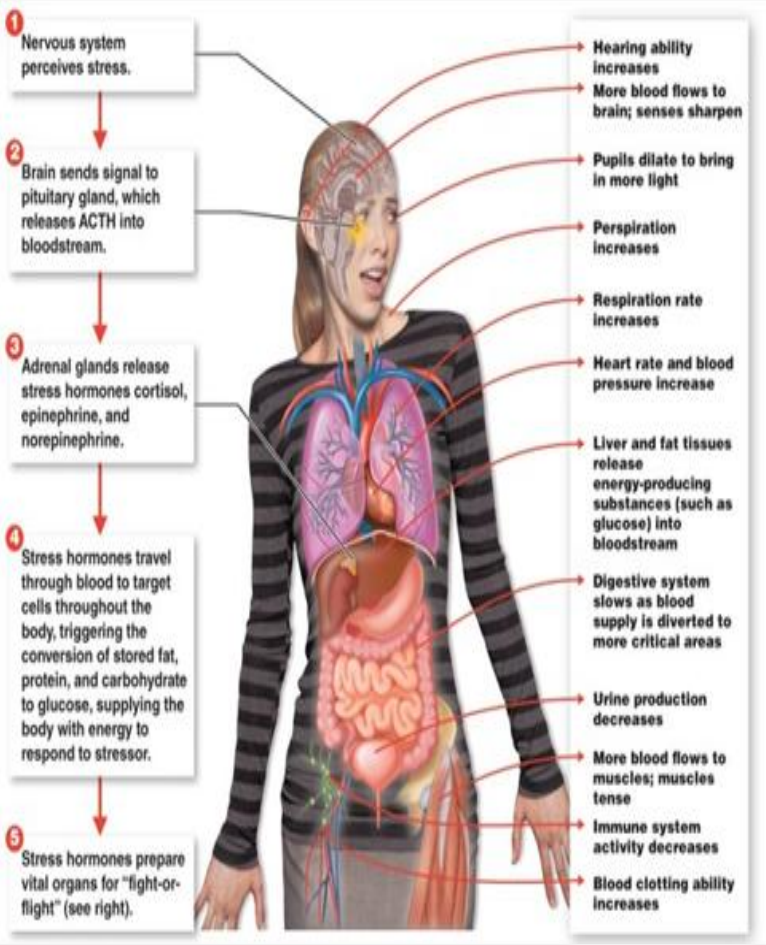
These physical responses are a normal part of emotions—they alert us to what our emotions are trying to communicate, as well as what motivates us to action.

PHYSICAL SENSATIONS OF DEPRESSION

- Pain: People with depression often have vague aches and pains, "all over" pain.
- GI symptoms: nausea, bloating, diarrhea or constipation
- Sleep problems: difficulty falling asleep or staying asleep, getting unrestful sleep, or sleeping too much
- Fatigue
- Psychomotor symptoms: movements seem heavy or slowed, or feeling restless
- High blood pressure

STRESS RESPONSE

- Often, these physical symptoms are a result of our body's natural stress response.
- When responding to a true threat, the stress response is incredibly helpful. It keeps us alive!
- However, often we can respond to something that is a "false alarm." In these cases, the stress response isn't needed and can lead to significant distress.



RELAXATION RESPONSE

The cool thing about the body is that it has a way of counterbalancing the stress response.

The relaxation response counters the harmful effects of distress in the moment and can help to prevent distress in the future.



- 4 components of relaxation:
  - Quiet place
  - Comfortable position
  - Repetitive mental focus
  - Letting go of attachment to thoughts

TIP SKILLS

- TIP skills help you change your body chemistry to reduce high emotional arousal and feelings of being overwhelmed

T	Temperature
I	Intense Exercise
P	Paced Breathing
	Paired Muscle Relaxation

(From DBT Skills Training Handouts and Worksheets, Second Ed., by Marsha M. Linehan, 2015)

T: TEMPERATURE

- Put your full face in cold water (especially on your eyes and upper cheeks)
- Hold your breath for 15-30 seconds
- Your heart slows down, blood flow to nonessential organs is reduced, and blood flow is redirected to the brain and heart
- Try it with a sink of cold water or a zip-lock bag filled with water (and closed)

Video Link: https://www.youtube.com/watch?v=00RKh6NRMqc

Dive Response:



I: INTENSE EXERCISE



Video Link: https://www.youtube.com/watch?v=RclXkeG90t0

P: PACED BREATHING

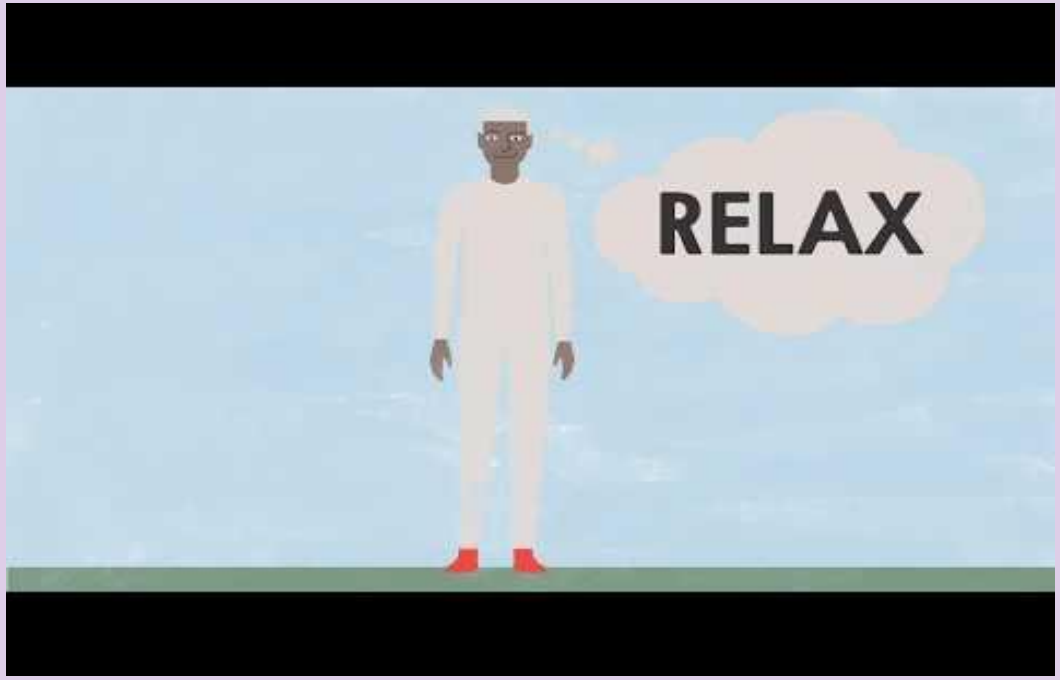
- One of our most powerful therapy tools, but also one that is often underused!
- There is a "right" way to breathe when relaxing!
- Breathe deeply to your belly (diaphragm), not your chest and shoulders
- Take a longer exhale than inhale. Practice pushing past your first initial urge to inhale – it may feel uncomfortable at first, but it will get easier with practice!
- Once you are comfortable breathing to your diaphragm, practice pacing your breath



Video Link: https://www.youtube.com/watch?v=IdNnKVGxabA

P: PAIRED MUSCLE RELAXATION

- Practice in a quiet place
- Breathe in for 5-10 seconds while tensing muscles
- Breathe out for 7 seconds while slowly relaxing muscle tension. Think of "relax" or "calm"
- Observe sensations for 10-15 seconds before moving to the next muscle group



Video Link: https://www.youtube.com/watch?v=Dn__nO3Clog

GUIDED IMAGERY



Video Link: https://www.youtube.com/watch?v=gW5CDMnLMMg

- Identify positive, calming scenes that you can visualize in your mind.
- Use all of your senses to vividly write about or imagine your calm scene.

BODY SCAN MEDITATION

- The purpose is to tune in to your body - to reconnect to your physical self - and notice any sensations you're feeling without judgement.
- The goal is to train the mind to be more open and aware of sensory experiences, and ultimately, more accepting.
- With time and practice, the body scan will build your ability to focus and be fully present in your life.



Video Link: https://www.youtube.com/watch?v=CeT_ZAp6juw

PRACTICE: TIP SKILLS

Date:	Cold Facial Temperature	Intense Exercise	Paced Breathing	Paired Muscle Relaxation

DEPRESSION 101 REVIEW

Remember, all emotions (even ones like depression that don't "feel good,") exist for a reason!

It's best to take something that's big and overwhelming and break it up into smaller, manageable pieces.

Depression, like all emotions, has three main components:

- Thoughts, behaviors, and physical sensations
- You now have specific skills in each of these areas to help target your overall emotional experience

RELAPSE PREVENTION

- Practice is how skills strengthen and progress is made!
- Identify early warning signs that might indicate your mood is worsening
- Be mindful of antecedents/triggers, prepare ahead of time when going into a triggering situation
- Continue to seek outside help and support when needed

Congratulations!