

Chapter 1

Introducing Moods and Depression

In This Chapter

- ▶ Defining depression
 - ▶ Describing the symptoms
 - ▶ Understanding how your depression affects you
-

To tackle depression, you have to know a little about the condition. In particular, you have to understand how it differs from normal emotions and moods such as sadness and misery.

In this chapter, I describe the main symptoms of depression and help you relate them to your own experience. I include a number of examples to illustrate different aspects of depression in the hope that they help you when you're thinking about your own situation. I also provide an overview of this book as whole, including cross-references to where you can find further relevant material in other chapters. So if something particularly strikes you while reading, just turn straight to the chapter to get more information.

Recognising the Differences: Sadness, Misery and Depression

The overall human experience doesn't vary that much. Throughout life, everyone has all sorts of experiences and has to face difficult situations; everybody has moments of contentment and periods of trouble. The differences for people

often reside in their response to those events. Whereas feeling sad when things go wrong for you is entirely natural, that feeling persisting for months, driving you to avoid your friends, isn't normal.

Understanding that feelings of sadness and even misery are completely different from depression is crucial, which is where this section comes in.



Expecting to live a life in which sadness and misery don't occur is not only unrealistic but also unhealthy. Accepting that negative life events are bound to happen and developing healthy coping strategies is an important life skill and makes you appreciate life's blessings all the more.

Meeting sadness and misery

Sadness is a part of the normal range of human experience: a melancholy, sorrowful or heavy-hearted feeling that everyone's familiar with. It comes about when you experience life events that awaken an emotional response within you.

When healthy people experience setbacks, their mood naturally plummets. They may even spend a short time thinking very negatively about themselves, other people and the world in general. But within a short period of time they start to get their head around what happened. They start to comfort themselves and reassure themselves that everything's going to be all right and that they're okay.

At this point, they seek comfort and reassurance from other people. This support helps to confirm their more healthy thoughts and reactions. With assistance from friends, they begin to address the situation and move beyond the problems. Soon their mood is back to normal.

As the following example indicates, sadness is an entirely appropriate temporary response to events in life.



Tina discovers that her husband's been having an affair and is leaving her for another woman. She's devastated, and her mood falls to the floor. Initially she asks herself 'What's wrong with me?' Thoughts and images of being lonely, miserable and unloved fill her head, and she worries that she's unattractive and unlovable.

Within a few days, however, she begins to realise that this situation isn't her fault. She starts to feel angry at her husband's disloyalty. She tells herself that she was faithful and a good wife and isn't to blame.

She informs her friends about what's happened, and they comfort her, reassuring her that she's an attractive and good woman with a lot to offer and has loads of friends. They agree with her criticism of her husband and encourage and support her to take steps to build a new life and be happy.

Within a few months, Tina begins to sort out her life and move on from the separation with courage and optimism.

Like sadness, *misery* is also a response to life circumstances and is best thought of as a prolonged state of sadness. It occurs when you find yourself in negative circumstances for a long period of time, but unlike depression, misery is nevertheless a healthy response to circumstances. In other words, if the circumstances change, the misery goes.



Unlike depression, being miserable doesn't prevent you from feeling motivated to work at changing your circumstances or enjoying what you can from day to day.



Sadness and misery aren't depression, and depression isn't a normal part of a healthy person's life experiences.

Experiencing depression

Depression is different from sadness and misery because it's a disorder that isn't part of a healthy, confident person's usual life experience. It occurs when people have had early life experiences that leave them vulnerable to depression.



Vulnerability to depression caused by early life events is surprisingly common and, in fact, experienced by most people. The early life experiences don't need to be extreme or dramatic – they're often minor incidents that accumulate and undermine your confidence or leave you with some negative beliefs about yourself, other people and the world in general.

You're usually unaware of these unhealthy core beliefs because you find ways to compensate or overcome them

and get on with your life. But although you work hard in an attempt to prove to yourself that the beliefs are untrue, you can still find your life dogged by self-doubt.

The following list contains some common indicators of unhealthy core beliefs:

- ✔ Feeling like a fraud, no matter how successful you are
- ✔ Feeling uncomfortable around other people, as if you don't really fit in or belong
- ✔ Worrying about what other people are thinking (usually about them judging or disapproving of you)
- ✔ Feeling the need to prove yourself constantly
- ✔ Feeling the need to please others and win approval all the time
- ✔ Having difficulty being relaxed or spontaneous around others; feeling inhibited
- ✔ Experiencing difficulties in feeling secure in relationships, sometimes continually seeking reassurance or worrying about others leaving you
- ✔ Having difficulties with self-reliance; often becoming over-dependent on others
- ✔ Being over-dominant and choosing to be around others who accept this behaviour
- ✔ Having constant nagging feelings that the good times can't last; often being afraid to enjoy life, believing that you'll only be disappointed if you do



TIP

If you recognise yourself in some of or all the above, the chances are that you're harbouring unhealthy core beliefs, even though you may not be aware of them or remember what experiences caused them. In Chapter 4, I show you how to uncover these beliefs and overcome them.



REMEMBER

Depression occurs when life events appear to confirm your unhealthy core beliefs. At its most basic, depression is surrendering to core beliefs, giving up hope, and being convinced that you're powerless and that life is miserable, and there is no chance of any lasting improvement.

Here's another example based around a separation. Compare it with the one in the earlier section 'Meeting sadness and misery', featuring Tina. Notice how Angela responds quite differently from Tina.



Angela discovers that her husband's been having an affair and is leaving her for another woman. She's devastated and her mood plummets. She asks 'What's wrong with me?' Unlike Tina, she begins to think that her husband left her because he saw how useless she is (one of her core beliefs). Thoughts and images of being lonely, miserable and unloved fill her head, and she worries that she's unattractive and unlovable.

Whereas in the previous example Tina quickly realised that these thoughts and feelings are inaccurate, because Angela has core beliefs that she's not good enough and unlovable, she doesn't experience this crucial realisation and doesn't self-comfort, seek support and recover. Instead she *believes* her initial negative thoughts and feels hopeless and powerless to do anything about her situation. She avoids her friends because she feels that she can't keep up her pretence that she's an okay person; she fears that they'll reject her like her husband did.

Angela starts to avoid everything and withdraws into herself, engaging in self-loathing and beating herself up. As a result, she turns her sadness into depression and fails to correct her low mood.

Take a look at Figure 1-1. It shows graphs that illustrate the mood patterns of two different people. The first graph shows a normal drop in mood following a *critical incident* (a life event that evokes a drop in mood). You can see that the response is to self-comfort and recover relatively quickly from this setback, as Tina did in her example. In the second graph, you can see how responding to the critical incident with rumination, self-criticism and avoidance turns a negative life event into a depressive episode and prevents recovery, as happened with Angela.

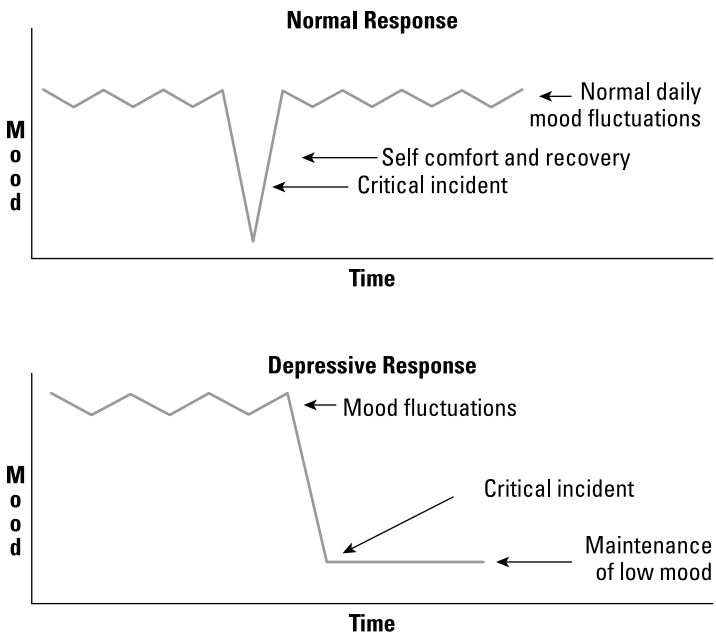


Figure 1-1: Healthy and depressive responses to a critical incident.

Making Sense of Your Symptoms

Just as the origin of people's vulnerability to depression often lies in the same place – childhood – many people suffering from depression also share similar symptoms. Being aware of this common thread means that you don't need to feel alone when experiencing the symptoms; but that doesn't mean that feeling depressed is natural, healthy or indeed inevitable.

Everyone has some negative events in life to endure. The key to understanding depression is to understand the different possible ways to respond to these events. An unhealthy response to an event usually occurs because the event reflects your fears and doubts about yourself. For these fears and doubts to exist, it is only logical that you must have experienced something in life to make you have these fears and doubts in the first place and to let them appear realistic.

In this section, I describe the common symptoms of depression.

Prolonging a low mood

This symptom usually starts as a normal response to a negative life event. But instead of a healthy, self-comforting response, you maintain the low mood with negative thoughts, beliefs and behaviours.

I describe some different types of distorted thinking in Chapter 13 and talk about challenging and changing negative thoughts in Chapter 4.

Changing weight

Some people who experience depression attempt to comfort themselves by eating. Over-eating is common in people whose parents comforted them, when they were children, by giving them sweets or other treats. As a result, people think they can feel better by eating.

Others who experience depression avoid eating. This reaction is common in people whose parents were critical and emphasised punishment rather than comforting. These people often think that they don't deserve pleasant things and can't feel better until they punish themselves into achieving again. Chapter 5 is useful if you tend to self-berate, and Chapter 8 describes ways of being more compassionate with yourself.

Suffering disturbed sleep

People who get depressed can have difficulties getting to sleep, and lie awake ruminating and worrying. Often this comes about after a day in which you tire out your mind with negative ruminations and emotions, but haven't done enough physical activity to tire your body ready for sleep (flip to the later section 'Feeling tired all the time' for ideas on changing this situation).

The other common sleep problem is early-morning waking and being unable to get back to sleep. This problem often occurs when the depression's been around for a time and you lack a good life balance (check out the later 'Balancing your lifestyle: What's missing' section).

Lacking pleasure or enjoyment

This common symptom of depression usually comes about when you set up a self-fulfilling prophecy. Take a look at the following two examples and notice the different thoughts, feelings and behaviours in each.



Tom's invited to a party. He immediately accepts with enthusiasm, thinking 'How nice that they invited me.' He begins to look forward to the event and has images in his mind of meeting old friends, making new ones, having a few drinks and a laugh with others, and generally enjoying the party. As a result of these pleasant thoughts and images, he feels happy and looks forward to the gathering. When he arrives at the party in this positive state of mind, he enthusiastically joins in the fun, has a great time, and goes home feeling tired and relaxed with happy images in his mind.



Ian's invited to the same party. But he's been depressed for months and so has a very different reaction to the invitation. He thinks that the party's going to be horrible: 'I'll just drag everyone's mood down, no one will want to talk to me, and if someone does talk to me I won't be able to talk normally, because I'll be too distracted and won't know what to say; they'll think I'm weird.'

He begins to have images of being alone in a room feeling uncomfortable and regretting coming to the party. As a result of these thoughts and images, Ian decides not to go, convinced he wouldn't enjoy it. In fact, if he had gone with those thoughts and that attitude, the chances are that he'd have isolated himself, preoccupied with his negative thoughts and concerns. In this way, he'd have made his fears a reality and maintained his depression.

As you can see from the above examples, a person's attitudes and beliefs are crucial factors in being able to enjoy things in life. When depression affects these attitudes in a negative way, it sets up a downward spiral that robs you of the joy in your life and the pleasure you can get from the good things. You begin to avoid more and more of the pleasurable things in life and end up leading a miserable, joyless life. But it doesn't have to go that way. I present ten invaluable tips to help tackle your depression in Chapter 12.

Feeling tired all the time

When depressed, you tend to avoid and withdraw from so much in your life that you lack the necessary elements for healthy sleep.



To have a good night's sleep, you need to have a balance of the following things in your life:

- ✓ Healthy diet
- ✓ Meaningful activity that gives a sense of purpose and satisfaction
- ✓ Mental stimulation
- ✓ Physical activity and exercise
- ✓ Social contact and stimulation
- ✓ Work-life balance

Depression often adversely affects all these elements, and so you can have difficulty ever getting a good night's sleep. The result is that you feel tired and therefore do less and less. But doing very little means that you haven't got the necessary balance to get a good night's sleep. So the cycle just goes on and on, maintaining the fatigue and loss of energy associated with depression. This downward spiral often means that you can find it a real struggle to have enough energy to do even the simplest task.

Enduring aches and pains

Aches and pains can be the result of not getting enough movement and activity, if you're inactive because of your depression. Or sometimes they're the result of *hyper-vigilance*, which is when you're constantly scanning for signs of aches and pains, and so normal minor sensations that would otherwise hardly be noticed take on greater significance.



If you've been inactive for a while, any movement or activity is likely to make your muscles ache. The only solution is to get moving again, even if you start by just taking a short walk every day.

Being unable to concentrate

When you're feeling depressed, you may well have difficulty in concentrating. In fact, the longer you feel this way, the more trouble you're likely to have. Strong negative emotions make you feel bad and distract your attention from what you're trying to do. Therefore, you need to exercise your 'concentration muscles', starting small and building up. The techniques I present in Chapter 9 on mindfulness may well be helpful in this area.



Try not to become self-critical or beat yourself up when your concentration lapses. Just accept that this is the way you are at the moment and gently bring your focus back to what you're doing.

Wanting not to be around people

Nobody likes other people to see their weaknesses, so not wanting to mix with people is natural when you think that they're going to see you as weak, unsociable, miserable or grumpy. The trouble is that when you've been inactive for a time, the chances are that you've little to talk about, and the situation perpetuates itself. You may even feel you're a burden or that you're going to bring other people's moods down. You may do some negative mind-reading (as I describe in Chapter 3), imagining that people are criticising you or don't like you.

All this negativity makes being around other people very uncomfortable, so you avoid them. However, the longer you keep away from people, the more difficult you're going to find getting back in touch. You may feel guilty about neglecting people or you may just feel that you've nothing to offer. Either way, when these feelings dominate, the tendency is to isolate yourself. But behaving this way always makes the situation worse in the long run. Instead you need to recognise that your negative thoughts are misleading you (to do so, read Chapters 2 and 3) and aim to improve your self-esteem (as I discuss in Chapter 7).

Stopping the world (I want to get off): Suicidal thoughts

Not everyone with depression gets suicidal thoughts, but they're common. Suicidal thoughts are often a form of self-loathing; for example, 'No one would care if I died' or 'People would be better off without me.'



Many people worry that because they have suicidal thoughts they must *be* suicidal and will one day act on the thoughts. This isn't the case. The vast majority of depressed people who have suicidal thoughts never act on them.

If you're troubled by suicidal thoughts, however, consult a mental-health professional, who can help keep you safe while you recover from your depression.

Thinking About Your Own Depression

In essence, the preceding two sections lay out the theory of depression. But knowledge of theory is limited in its usefulness when all you really want is to feel better. To change how you feel, you need to take practical action, because when depression takes hold it rarely goes away on its own. If you want your life to be different, you have to start doing things differently. Therefore, in this section you start doing a little work (but don't worry, I promise to be gentle).

Use this section to see how you fit in with the cognitive behavioural therapy (CBT) model (the principles of which I present in Chapter 2). Doing so helps to make sense of your depression, guiding you towards understanding why you're depressed, what's keeping you depressed, and what you can do to overcome your depression.

Discovering how your experience fits with the theory

The first thing to do is to start to collect information about your depression, which means that you need to keep a diary. Here you record anything that makes you feel bad – your so-called *hot cognitions*.

Hot cognitions



A *hot cognition* is any thought, topic, situation, and so on that evokes a negative emotional response. CBT practitioners use hot cognitions like signposts; in effect, they're great big arrows pointing to your sensitivities, indicating the issues that are significant in your depression. You're likely to experience waves of negativity when something happens (maybe just a thought) that connects to your sensitive issues.



Janet suffers from depression. One of her hot cognitions is about loneliness and believing that she'll never find love in her life. So any time she sees a romantic image on TV or spots a couple holding hands in the street, she experiences a wave of intense sadness. By keeping a diary and jotting down each hot cognition she experiences, Janet was able to identify the issue of feeling unlovable. This was her first step towards working on this issue.

I show you how to work on your issues in Chapter 4 but, for now, just try to notice your hot cognitions and look for the issues that lie behind them.



Get a notebook and start keeping your diary today. Every time you experience a depressive feeling, make a note of the following aspects (I include some sample entries purely as illustration):

1. **Situation** (including where, when, who, what, and so on). Try to include anything you think may be contributing to the problem.

An example may be: 'I was walking to work. As I passed the recreation ground, I saw a man playing football with his children.'

- 2. Feelings.** Try to recognise the emotion you experience and label it. You can usually state an emotion in one word such as sad, angry, hurt, and so on.

The example may continue: 'intense sadness', 'hurt', 'anger'.



Note that statements such as 'I feel that nobody likes me' are thoughts and not feelings. If you find yourself writing a statement of this sort, ask instead how that makes you feel (for example, sad) and write that word down.

- 3. Reflection.** Look at which emotions you've written down and ask yourself what thoughts, images and memories come to mind that may explain why you feel each emotion. For the example, the answers may be:

- **Thoughts.** 'I never get to do that with my kids. They'll think I'm a rubbish dad. My kids never contact me. My ex-wife's probably turned them against me. Her new partner's taking over the dad role. I'm useless anyway; they're probably better off without me.'
- **Memories.** 'Playing with my kids when they were young'.
- **Images.** 'Their stepdad and my ex-wife all doing things together, being a family, excluding me'.

Keep your diary for a week. Try to be brave about it and *entirely* honest. Some people have avoided thinking about sensitive issues for so long that they find allowing themselves to acknowledge them very uncomfortable and even a bit scary. Others deny their feeling or sensitivities, refusing to recognise them. Although these strategies can have the short-term benefit of avoiding unpleasant feelings, the long-term cost far outweighs it.

After a week, set aside some time to analyse the information you collected. Look for patterns in your entries by asking yourself what they have in common. Try to extract a list of issues that are *your* hot cognitions. They may look something like this:

- ✓ 'Feeling unloved, lonely, or unwanted'
- ✓ 'Being pessimistic about the future'

✓ 'Seeing my life as empty and meaningless'

✓ 'Realising how miserable I've become'



You can now use this list to help understand what unhealthy core beliefs you have about yourself, other people and the future.

Core beliefs

Core beliefs can exert an incredibly powerful influence over your life. Like most people, you're probably only vaguely aware of your core beliefs and rarely consciously think about them or question whether they're true. The reason you rarely challenge these beliefs is that they're deep-seated, protective, private conclusions based on how other people treated you when you were young, and what sort of experiences you had. (I talk more about this process in the earlier section 'Experiencing depression'.)



When Gerry was young, his parents were often too busy working to spend much quality time with him. They were generally good, loving parents but were busy trying to provide a good lifestyle for their family. Gerry was too young to realise or understand this context, however. All he believed was that mum and dad seemed to think everything else was more important than him.

As a result, he felt that his emotional needs were left unmet, and Gerry learned not to expect his parents to have time for him. By doing so, he avoided hurt and disappointment when his expectations weren't met. Over the years, deep down Gerry developed the beliefs 'I'm not lovable' and 'Other people will hurt me if I expect them to love me' and 'To survive in the future, I must be self-sufficient and not allow myself to need other people.'



Now take a look at your own list. Try to see what core beliefs underpin your noted issues and ask yourself where these beliefs come from: what did you experience that led you to these conclusions? Write down these core beliefs. What does it feel like to see them in black and white?

Despite feeling uncomfortable at first, most people find that as they examine their core beliefs consciously, they realise that

they're untrue or at least partly untrue (I describe the importance of testing your beliefs in Chapter 4). However, they may still *feel* true, even though your rational mind realises that they're extreme, unhelpful, and don't paint the whole picture.

Assessing what's keeping you stuck

When you've uncovered the issues that are significant in your depression and the beliefs that underpin them (in the earlier 'Hot cognitions' and 'Core beliefs' sections), you're ready to look at how these concepts not only triggered your depression in the first place but also continue to work to maintain it.

Take a look at your diary and your lists, and ask yourself what you did when the hot cognition occurred. Chances are that you avoided or escaped the situation in some way. This is human nature, because people are hardwired to avoid unpleasant or distressing situations. The consequence of such escape or avoidance is that you maintain your negative beliefs because you fail to disconfirm them by giving your unconscious mind positive experiences that may contradict the beliefs.



Mathew has core beliefs that he isn't good enough and is incompetent. As a result, he feels extremely uncomfortable when he's tested in any way or when others are observing him doing a task. He fears that if others see his incompetence, he'll expose his vulnerabilities and be ridiculed or rejected. To prevent such exposure, he avoids any form of test or scrutiny. Therefore, Mathew has few qualifications, never applies for promotion, and has stayed on the bottom rung of his career.

In this way, Mathew's situation appears to reaffirm his beliefs, because most people of his age have moved up the ladder. He has witnessed many people coming in below him and then being promoted above him. The fact that he avoids any situation that may disconfirm his core belief and provide evidence that contradicts it means that Mathew's able to maintain these depressing beliefs about himself.

Mathew is in the classic depressive catch-22 situation, believing that he's damned if he does, damned if he doesn't. He's stuck and can see no way out of his situation.



Can you see a similar pattern in your own depression to that of Mathew? Take a look at the core beliefs you've identified and write down a list of the things you avoid or things you do as a result of your belief.

Mathew's list looks something like this:

- ✔ 'I try to avoid any situation where I may be under scrutiny.'
- ✔ 'I avoid other people whom I think are clever.'
- ✔ 'I'm a bit of a perfectionist, worrying that if I don't do things perfectly others will notice and see how incompetent I am.'
- ✔ 'In social situations, I think carefully before I say anything, and often end up not taking part in conversations.'

Often you can find that your avoidance behaviour becomes a set of rules by which you live. As long as you obey your rules, you appear to cope and feel that you're managing your life and compensating for your core beliefs. These compensatory strategies can work so well that you're unaware for a time that you have a problem.



Your rule-bound way of living and managing your vulnerabilities leaves you vulnerable. You're often under pressure and have difficulty being spontaneous or relaxed in company. And when a critical incident happens that interferes with your strategies or appears to expose your vulnerabilities (which lie behind your strategies), you can find yourself suffering from depression.

A *critical incident* is one that appears to prove the core beliefs you hold. As a result, the situation appears worse than it is and often makes you feel hopeless and stuck. You've tried all your life to cover up and compensate for your 'weaknesses' and now you've failed. You become unmotivated and think 'What's the point of trying if I'm just going to fail again?'

A CBT model of depression

Figure 1-2 illustrates, in a CBT model of depression, the process I describe throughout this section. The model's based on the example of Mathew in the preceding section.

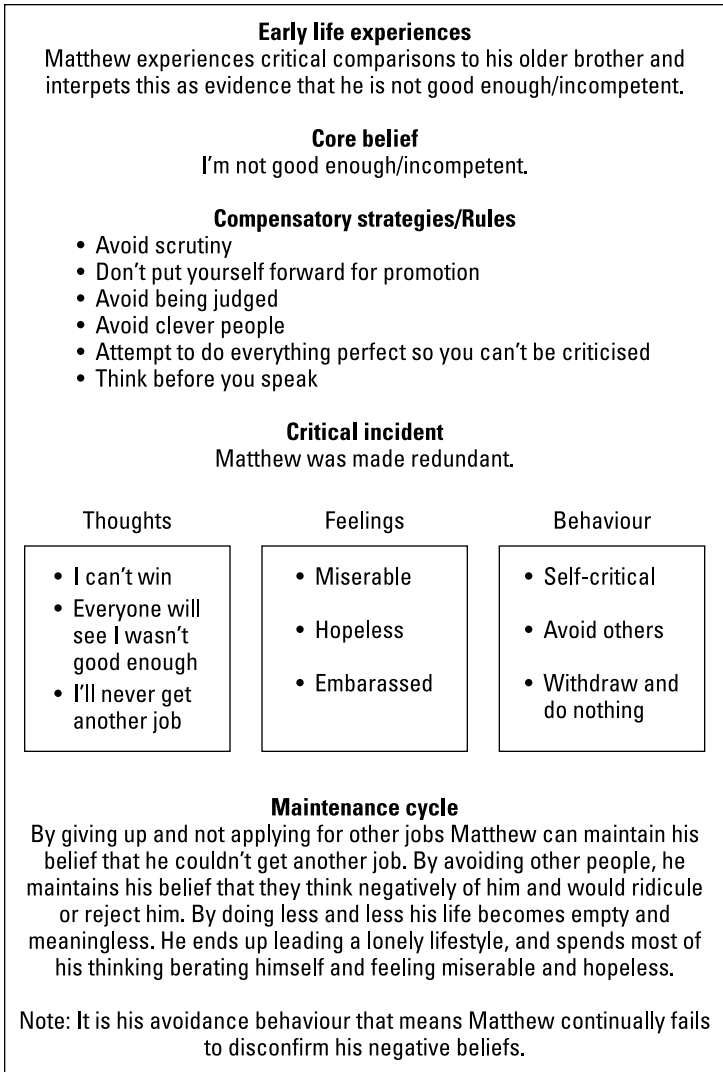


Figure 1-2: Mathew's depression model.



See whether you can fit your own experience into the model in Figure 1-2.

Measuring up

One of the really useful things about CBT is that you can keep a record of the problems you're working on and have concrete evidence of progress. The evidence you collect lets you see what's helping and gives a way of measuring improvements, which is important in depression, because the tendency exists for depressed people not to recognise progress and to discount the positives.

One of the most simple and effective ways of keeping track of your progress is by using *subjective units of distress* (SUDs). You start by deciding what you want to measure in depression; I suggest your mood, but you may also want to measure worry, irritability or any other emotion that plays an important role in your depression. Then simply rate each element on a scale of 0–10, with 0 representing that the problem hasn't occurred and 10 representing the worst or most intense emotion you've ever experienced. Rate each item as an average over the past seven days. Table 1-1 provides an example. By rating your emotions, you have a visual record of your progress which can indicate when difficult issues arise, as well as showing general progress.

Table 1-1 Example Record of Progress Using SUDs

<i>Item</i>	<i>Week 1</i>	<i>Week 2</i>	<i>Week 3</i>	<i>Week 4</i>
Mood	7	7	6	5
Irritability	8	7	7	6
Worry	8	5	6	5



You may think that all this recording and scoring seems unnecessary, but I strongly recommend that you take the time to note regular SUDs. The records never lose their usefulness, proving a valuable resource while managing your depression and making progress. SUDs are useful after you recover too – at which point you can use the advice in Chapters 10 and 11 to help you recognise and enjoy the ‘new you’ and avoid the chance of a relapse.

Balancing your lifestyle: What's missing

An initial step in striving to recover from depression is to take a good look at your lifestyle. People suffering from depression nearly always end up living a lifestyle that makes their depression worse. In fact, many sufferers end up avoiding so much in life that, unintentionally, they end up living an empty lifestyle that would be enough to make anyone depressed, even if that person was fine to begin with.



To help you see what a balanced life looks like, I list the various aspects that everyone needs to be happy and content:

✔ **Basic needs.** You need to have: enough to eat and drink (a healthy diet); a comfortable, warm home; a balance of sleep and wakefulness, work and play; physical exercise; and so on.

✔ **Security needs.** To be happy, you have to feel safe and secure. So if your home, finances, work situation or relationships are precarious, you need to address any of these issues and manage your safety.

If some things seem beyond your control, seek help from the Citizens Advice Bureau or your GP. Face up to and address your needs, because burying your head in the sand only holds back your recovery.

✔ **Sense of belonging.** You need to fit in somewhere. Human beings are a social species, and you can only go so long on your own before it begins to affect your mood negatively.

Ask yourself where you belong: that is, from what groups you get a sense of belonging. Your groups may be family, friends, work, clubs or other social networks.

If you don't have at least a couple of social groups that you feel you belong to, start finding groups and individuals to reconnect with, and work on building up your social network.

✔ **Self-improvement.** Humans have an instinct to improve their knowledge and understanding. Reading, talking to others and taking an interest in what's going on around

you all provide ways in which you can fulfil this need and begin to feel more satisfied with your life.

- ✓ **Achievement.** People need to feel as though they're fulfilling their potential and doing something meaningful with their lives. So when you've met your more basic needs, take a look at your unique balance of skills and talents, and ask what you're capable of achieving if you put your mind to it.

Think of something that you'd be proud of and that would give you a sense of achievement. Try to think outside the box: joining an amateur dramatics group, taking an art course, signing up to a political party, learning a language at evening classes, and so on. Then go to work and make it happen.

Flip to Chapter 6 for loads more on living a balanced life. Also, in the appendix, I provide a balanced lifestyle sheet for you to complete to help identify any areas that you need to address.



If you've been depressed for some time, you have to deal with your depression before attempting the above. So make overcoming your depression your first goal.