Using the Thinking Cards in a one to one mentoring session

Below is an article published in Dec 2016 taken from: PyschologyToday.com. This article is aimed at helping people with depression but actually helpfully points to a number of strategies that can be used when working with a student in a one to one mentoring session. This article uses the term 'Thinking Errors' whereas the cards use the term 'Unhelpful Thinking'

https://www.psychologytoday.com/gb/blog/hide-and-seek/201612/thinking-errors-in-depression



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Thinking errors, also called cognitive biases or cognitive distortions, are irrational patterns of thinking that can both cause depression, and be caused by depression: the more depressed you feel, the more you are bugged by thinking errors, and the more they bug you, the more depressed you feel. To break this vicious circle, you need to identify your thinking errors and successfully challenge them. You may need help with this, so maybe ask a trusted friend or relative to read this article and discuss it with you.

Seven common thinking errors in depression are:

1. Arbitrary inference: drawing a conclusion in the absence of supporting evidence e.g.

The whole world hates me.

Questions to challenge arbitrary inference:

- Why do I say that?
- Why would that be the case?
- Can I think of anything that goes against this statement?
- Is anyone else in the same predicament?
- 2. Over-generalization: drawing a conclusion on the basis of very limited evidence e.g.

My sister did not come to visit me. The whole world hates me.

Questions to challenge over-generalization:

- Could there be other ways of explaining my evidence?
- Is my evidence strong enough to warrant that conclusion?
- Is my conclusion too broad?
- Can I think of anything that goes against my conclusion?
- 3. Magnification and minimization: over- or under-estimating the importance or significance of an event e.g.

Now that my cat is dead, I'll never have anything to look forward to.

Questions to challenge magnification and minimization:

- Has this ever happened to me before? How did I cope?
- How would other people cope in a similar situation?
- What are some of the other good things in my life?
- Am I seeing this in the right perspective?

4. Selective abstraction: focusing on a single negative event or condition to the exclusion of other, more positive ones e.g.

The nurse hates me. She gave me an annoyed look three days ago. (But never mind that she spent an hour with me this morning.)

Questions to challenge selective abstraction:

- Why would this be the case?
- Am I looking at all the evidence?
- Are there some more positive things that I can focus on?
- What are other people telling me?
- 5. Dichotomous thinking: 'all or nothing' thinking e.g.

If he doesn't come to see me today, then he doesn't love me.

Questions to challenge dichotomous thinking:

- Could there be any other reasons? (What else could have held him back?)
- Does it have to mean that?
- Is it really all black and white? Or could there be shades of grey?
- Can I think of anything that goes against my conclusion?
- 6. Personalization: relating independent events to oneself e.g.

The nurse went on holiday because she was fed up with me.

Questions to challenge personalization:

- Are there any other possible explanations?
- Is my explanation the most likely explanation?
- What evidence do I have for this?
- Am I reading too much into things?

7. Catastrophic thinking: exaggerating the consequences of an event or situation e.g.

The pain in my knee is getting worse. When I'm reduced to a wheelchair, I won't be able to go to work and pay the mortgage. So I'll end up losing my house and dying in the street.

Questions to challenge catastrophic thinking:

- Are things as bad as they could be?
- What is the most likely outcome?
- What action can I take to prevent this outcome?
- Could any good come out of this situation?

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