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Instructor’s Manual for Mixed Anxiety and Depression: A Cognitive Behavioral Approach

with Donald Meichenbaum, PhD

Cover design by Sabine Grand

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Instructor’s Manual

MIXED ANXIETY AND DEPRESSION
A Cognitive Behavioral Approach

with Donald Meichenbaum, PhD

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Tips for Making the Best Use of the DVD

1. USE THE TRANSCRIPTS
Make notes in the video Transcript for future reference; the next time you show the video you will have them available. Highlight or notate key moments in the video to better facilitate discussion during the video and post-viewing.

2. SESSION-BY-SESSION DISCUSSION QUESTIONS
Pause the video after each session to elicit viewers’ observations and reactions. The Discussion Questions provide ideas about key aspects of the therapeutic work that can stimulate rich discussions and learning.

3. LET IT FLOW
Allow the sessions to play out some so viewers can appreciate the work over time instead of stopping the video too often. It is best to watch the video in its entirety, since issues untouched in earlier parts often play out later. Encourage the viewers to voice their opinions; no therapy is perfect! What do viewers think works and does not work in the sessions? We learn as much from our mistakes as our successes and it is crucial for students and therapists to develop the ability to effectively critique this work as well as their own.

4. SUGGEST READINGS TO ENRICH VIDEO MATERIAL
Assign readings from Suggestions for Further Readings and Websites prior to viewing. You can also time the video to coincide with other course or training materials on related topics.

5. ASSIGN A REACTION PAPER
See suggestions in Reaction Paper section.

6. ROLE-PLAY IDEAS
After watching the video, organize participants into groups of three. Assign each group to role-play a session with a client suffering from mixed anxiety and depression, with the therapist utilizing a cognitive behavioral approach. Each role-play shall consist of one therapist, one client, and one observer. After the role-plays, have the groups come together to discuss
their experiences. First have the clients share their experiences, then the therapists, and then ask for the comments from the observers. Open up a general discussion on what was learned about treating clients with mixed anxiety and depression using this model.

An alternative is to conduct a single role-play in front of the group with just one therapist and one client; the entire group can observe before discussing the interaction. After a while, another participant may jump in as the therapist if the therapist gets stuck. Follow up with a discussion that explores what works and does not work in psychotherapy for mixed anxiety and depression.

7. PERSPECTIVE ON VIDEOS AND THE PERSONALITY OF THE THERAPIST

Psychotherapy portrayed in videos is less off-the-cuff than therapy in practice. Therapists or clients in videos may be nervous, putting their best foot forward, or, conversely, trying to show mistakes and how to deal with them. Therapists may also move more quickly than is typical in everyday practice to demonstrate a technique. The personal styles of therapists are often as important as their techniques and theories. Thus, while we can certainly pick up ideas from master therapists, all participants must make the best use of relevant theory, technique and research that fits their own personal style and the needs of their clients.
Session-by-Session Group Discussion Questions

Professors, training directors or facilitators may use a few or all of these discussion questions keyed to certain sessions or those issues most relevant to the viewers.

SESSION ONE

1. **Repetition:** Meichenbaum notes key phrases used by Anna, such as “focusing in,” “total preoccupation,” “battling depression,” and “stuffed them down,” and repeats them back to her. Is this effective? How much is useful and how much is too much? Do you see yourself doing this with clients?

2. **Two Clinical Issues:** What do you think of Meichenbaum’s assessment in the first session that treating her depression is as much a goal for the therapy as focusing on the presenting problem of panic attacks? Would you set a goal for therapy that was different from the client’s stated goal? What could be some risks and benefits of this approach?

SESSION TWO

3. **Closed Eyes:** What was your first reaction to Meichenbaum’s asking Anna to close her eyes? Does this seem to be a useful technique? Would you make this request of a client? In what situations might asking the client to close her eyes not be a good idea?

4. **Control the Panic:** What do you think about Meichenbaum’s early use of techniques in which Anna records different information about her panic experiences? Do you think these kinds of cognitive behavioral strategies really help clients?

SESSION THREE

5. **Breathing:** How did you react to Meichenbaum’s teaching Anna breathing techniques to manage hyperventilation and other symptoms? How comfortable do you feel stepping into this active teaching role with a client?
6. **Automatic Thoughts:** Meichenbaum spends time in the session exploring Anna’s automatic thoughts that she is a failure. Does this approach make sense to you? Why or why not? When Anna asks Meichenbaum if she should say different things to herself, he answers back with the question, “Well, are you a total failure?” Is this question helpful or not? How might you have responded differently?

**SESSION SEVEN**

7. **Taking Credit:** What do you think about Meichenbaum’s style of acting dumb to get Anna to take credit for the changes she has made? Did you find his approach patronizing or useful in a playful way? Can you imagine yourself talking with a client in this way? If not, how would you be different?

**SESSION NINE**

8. **Grieving:** Does the coincidence of Anna’s mother’s death when Anna was 13 and the onset of panic attacks when her daughter turned 13 seem significant to you? Do you buy Meichenbaum’s proposed connection and its meaning in Anna’s life and the therapy work?

**SESSION TEN**

9. **Blowing Up:** What did you think of the way Meichenbaum worked with Anna around her blowing up at her husband and insulting him? Does this kind of explosion seem healthy or productive to you in any way?

10. **Assertiveness:** Does Meichenbaum’s shift toward assertiveness training seem useful, given Anna’s presenting problem? Would you have taken that approach with her at this juncture, or what other approaches would you have tried?

**SESSION ELEVEN**

11. **Obstacles:** Anna did not seem to follow Meichenbaum’s lead when he tried to explore obstacles to her use of new assertiveness skills. Would you have pushed her harder on this? How would you have explored the issue differently with her?
12. **Session Pacing:** What do you think about Meichenbaum’s suggestion that Anna wait an additional week before the 12th session? What reactions might clients have to such a suggestion?

**SESSION TWELVE**

13. **Termination:** What did you think about the discussion of the changes Anna made from the first session to the last? Do you agree with her self-assessment? If you were the therapist, how would you feel about terminating after this session? Do you agree with Meichenbaum that what Anna went through in therapy is irreversible?

14. **Techniques:** Which of the techniques demonstrated in this video can you imagine using with clients? Certainly these techniques fit in a CBT model; can they also be effectively integrated into other approaches?

15. **And You?** How would you feel having Meichenbaum as your therapist? Do you feel an alliance could be made and that he could be effective with you?
Reaction Paper for Classrooms and Training

• **Assignment:** Complete this reaction paper and return it by the date noted by the professor or facilitator.

• **Suggestions for Viewers:** Take notes on these questions while viewing the video and complete the reaction paper afterwards, or use the questions as a way to approach discussion. Respond to each question below.

• **Length and Style:** 2-4 pages double-spaced. Be brief and concise. Do NOT provide a full synopsis of the video. This is meant to be a brief reaction paper that you write soon after watching the video—we want your ideas and reactions.

**What to Write:** Respond to the following questions in your reaction paper:

1. **Key points:** What important points did you learn about this method of treating mixed anxiety and depression? For example, how is the alliance developed? What stands out in how the therapist works?

2. **What I am resistant to.** What issues/principles/strategies did you find yourself resisting, or what approaches made you feel uncomfortable? Did any techniques or interactions push your buttons? What interventions would you be least likely to apply in your work? Explore these questions.

3. **What I found most helpful.** What was most beneficial to you as a therapist about the model presented? What tools or perspectives did you find helpful and might you use in your own work?

4. **How I would do it differently.** What do you think you would have done differently than Meichenbaum did? Be specific in what different approaches, strategies and techniques you might have applied.

5. **Other Questions/Reactions:** What questions or reactions did you have as you viewed the therapy in the video? Other comments, thoughts or feelings?
Suggestions for Further Readings, Websites and Videos

BOOKS


WEB RESOURCES

[www.psychotherapy.net](http://www.psychotherapy.net) An in-depth interview with Don Meichenbaum

[www.nacbt.org](http://www.nacbt.org) National Associate of Cognitive-Behavioral Therapists

[www.psych.ualberta.ca/GCPWS/dmeichenbaum.html](http://www.psych.ualberta.ca/GCPWS/dmeichenbaum.html) Video biography of Don Meichenbaum

[www.melissainstitute.org](http://www.melissainstitute.org) The Melissa Institute for Violence Prevention and Treatment, where Meichenbaum is the Director of Research.
RELATED VIDEOS AVAILABLE AT
WWW.PSYCHOTHERAPY.NET

Cognitive Behavioral Therapy with Donald Meichenbaum, PhD
Cognitive Behavioral Therapy with John Krumboltz, PhD
Cognitive-Behavioral Therapy with Children
Couples Therapy for Addictions: A Cognitive-Behavioral Approach
Effective Psychotherapy with Men
Reality Therapy with Robert E. Wubbolding, EdD
INTRODUCTION

Meichenbaum: Hi, I’m Don Meichenbaum. For the last 30 years I’ve been involved in the development and evaluation of cognitive-behavior therapy procedures with a variety of psychiatric patients. In recent years, cognitive-behavior therapy has been receiving increasing attention because of its demonstrated effectiveness. Cognitive-behavior therapy helps clients to become aware of the interdependence between their feelings, their thoughts, behavior, and resulting consequences. I’ve come to appreciate that psychotherapy in general and cognitive-behavior procedures in particular address a number of specific psychotherapeutic tasks. The first task of psychotherapy is to help the client tell her story. The therapist operates in a nonjudgmental, empathic fashion in order to find out what brings the client to therapy and what is its impact. There’s also a need for the therapist to help the client tell the whole story, the rest of the story, the strengths and resilience, the courage and coping skills that they’ve demonstrated.

The second task of psychotherapy is to educate the client about the nature of her presenting problems. This educational process is no didactic exercise. It’s a Socratic process, an ongoing discovery process between the therapist and the client. The next task is to help the client reconceptualize her problems in more hopeful terms; to shift from a description of her situation as a global predicament into a problem that lends itself to solutions. It is also important that clients have the intra and interpersonal skills in order to cope more effectively in their daily lives. Moreover, it’s important for clients to perform personal experiments, in vivo, so that they can take the data that results from these personal experiments as evidence to unfreeze their beliefs about themselves and the world. It’s also important that clients take credit, take
ownership, for the changes that they’ve brought about, to see the connections between their own actions and these resulting consequences. The final task of psychotherapy is relapse prevention. It is critical for the therapist and client to work together in anticipating possible lapses and setbacks so that the client does not take these lapses and setbacks as occasions to catastrophize and relapse. In this program with a client who has both panic and depressive symptoms, we will see how these various tasks are addressed.

Tasks for Therapy:

- Help clients tell their story
- Educate clients about their problems
- Reconceptualize problems
- Build intra- and interpersonal skills
- Perform “experiments” using data to change beliefs
- Help clients take credit for changes
- Relapse prevention

SESSION ONE

Meichenbaum: Anna—is it okay if I call you Anna?

Anna: Oh, of course.

Meichenbaum Commentary: Anna is 40, the mother of two children: Joseph, 17, and Lizzie, 13. Her husband, Patrick, is a lawyer, and Anna works for an interior design company. She is referred by her physician because of recurrent bouts of panic attacks with a history of depression.

Anna: Lately I’ve been having these attacks that are keeping me from functioning. My heart starts racing. I feel like I’m suffocating, and I just focus in on—and, uh…

Meichenbaum: Focused in—Give me a feel of what’s happening.

Anna: Well, it becomes a total preoccupation. I can’t think about anything else but this attack. My heart starts beating, my blood starts racing. I feel like I’m going to die. I’ve been to the emergency room three times already.

Meichenbaum: Total preoccupation?
Meichenbaum Commentary: Picking up on her descriptive phrases—“focusing in” and “total preoccupation”—I was able to help Anna to tell her story. This discussion will lay the groundwork for Anna to appreciate the interconnection between her physical symptoms and her accompanying feelings, thoughts, and behaviors.

Anna: Patrick—that’s my husband—he was late, he lost his car keys, it was a madhouse, and after they all got out I just started crying. I couldn’t stop. I was uncontrollably crying.

Meichenbaum: And what happened then, when you…

Anna: Well, somehow I finally got myself together and I started to get ready to go to work, and then I got to the car and I just froze up. My heart started to race. I had feelings up and down my arm. I thought I was going to pass out. I knew I had to get to the emergency room so I called Patrick, and he was too angry. He told me if I thought I needed to go to an emergency room, I should call someone else. So I called my son, Joe and got him out of school to take me—I was so embarrassed—and we went to this emergency room and saw someone, and the doctor came out and said there was nothing wrong with my heart.

Meichenbaum: What did you think of that?

Anna: Well, I knew there was something wrong with me. I mean, these were very physical feelings, racing up and down my arm, my heart beating like that. He suggested I see a psychiatrist.

Meichenbaum: And did you follow that up? Did you go to see a psychiatrist?

Anna: Yeah, I did. Well, the next day they did a battery of tests and I saw that the results of that were all negative. And I saw a psychiatrist the next day. He gave me some medication and it helped for a little while, but—

Meichenbaum: What was the medication for?

Anna: I don’t know. I think it was for depression.

Meichenbaum: Have you been depressed?

Anna: Well, I guess all my whole life I’ve kind of battled with bouts of depression.
Meichenbaum: Battling depression. Give me a—

Meichenbaum Commentary: Once again, I pick up on her image: this time, “battling depression.”

Anna: Like right now. Patrick is a lawyer and he’s busy all the time. People look up to him. My son Joe, he’s a teenager and busy. And Lizzie is entering that early adolescent stage where everything I do is wrong. I feel like I’m walking on eggshells around her. I just have these feelings of being completely worthless. I’m just, like, hopeless. I have no hope about anything.

Meichenbaum: So everything’s just bleak and there’s no—

Anna: Yeah, well, it’s like, my whole life is just a big glob of misery. It’s just a total personal tragedy.

Meichenbaum: So it’s not just now?

Meichenbaum Commentary: Anna’s reference to her “whole life” lets us shift the focus to the developmental background of her depression. Her metaphors “glob of misery” and “personal tragedy” reflect her current levels of depression and hopelessness. I’ll need to assess her suicide risk later in the session.

Anna: Well, you might find this interesting. When my daughter was my age—I mean, when I was my daughter’s age—my mother died of cancer, and I felt like my whole life was over. I loved her so much, and I think what it would be like now if—

Meichenbaum: If something happened to you?

Anna: Yeah.

Meichenbaum: What it would be—?

Anna: What it would be like for my daughter.

Meichenbaum: And you were the same age?

Meichenbaum Commentary: Could this anniversary have been a trigger for the onset of Anna’s panic attacks?

Anna: Yeah, I was just 13.

Meichenbaum Commentary: Or did these panic episodes occur before this coincident date?
Anna: Well, I think about what I had to do back then. I was the oldest of three and I had to take care of my father, and my brother and my sister.

Meichenbaum: What was that like? What is it that you had to do then?

Anna: Well, my father was very depressed and drinking a lot during that time, and he—so I had to take care of him. And I had to get up first in the morning and I had to get breakfast for them, my brother and sister. I had to wake up my father, which was very hard, and get him ready for work, and then I had to get myself ready to go, too. I had to make lunches for everybody, and during my lunch hour, I’d have to go and check on the kids sometimes.

Meichenbaum: How did all of this make you feel?

Anna: You see, in my family, we never dealt with these feelings. We just kind of stuffed them all down.

Meichenbaum: Stuffed them down? What is—?

Meichenbaum Commentary: Once again, I pluck and reflect the key phrase, “Stuffed them down.”

Meichenbaum: And what was going on with your dad? You say he was drinking and feeling depressed.

Anna: Oh, yeah.

Meichenbaum: What was involved in that?

Anna: Well, he was missing my mom, and I understood that. But I was the oldest, and he ended up taking it out on me.

Meichenbaum: Taking it out on you?

Anna: Oh, he would make jokes like I was too stupid to… I wanted to go to college—

Meichenbaum Commentary: Taking it out on Anna? Is this a signal that some form of verbal or physical abuse may have taken place? I’ll need to check this out.

Anna: I had a lot of responsibilities. I was taking care of—

Meichenbaum: And he would criticize you?

Anna: Yes, he would belittle—he would—I would say he would belittle

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me. And then I would get upset and he’d say, “Oh, I was only joking.” So—

**Meichenbaum:** And how would that make you feel?

**Anna:** Oh, it would make me feel awful, because you can’t really get mad at a joke. I just kind of took all the—I was confused—I took all those feelings and I just stuffed them down.

**Meichenbaum:** Stuffing down feelings, is that something you do now?

**Anna:** Um, Patrick kind of has that edge of criticism too, sometimes.

**Meichenbaum:** And when you have that kind of criticism, what kind of feelings does it have for you?

**Anna:** Well, I suppose it makes me very angry, and that I’m told it’s just a, “Oh, I was just joking,” or something like that, and then—

**Meichenbaum:** And when you get those angry feelings?

**Anna:** I just stuff them down. I just don’t deal with them.

**Meichenbaum:** And if you stuff them down in the way that you describe with Patrick, with your dad, what is the impact that has on you, Anna? What is the price you pay for stuffing it down like that?

**Anna:** I don’t know.

**Meichenbaum:** I don’t know, either. I think maybe that’s one of the things we need to talk about in future sessions.

**Anna:** Okay.

**Meichenbaum:** Anna, let me see if I’ve picked up on what you’ve been saying so far, and correct me if I’m wrong. On the one hand there’s a lot of the panic that you’ve experienced in these attacks that you’re having, and that’s all led you to even go to the emergency on a couple of different occasions. It seems to me that there are just a number of different things.

**Anna:** Uh-hum.

**Meichenbaum:** One is what can we do about these attacks? And then there’s also the business of the stuffing of the feelings, and the kinds of impact that has.

**Meichenbaum Commentary:** As I reflect what Anna has told me so far, we’ll begin to develop goals for therapy and set an agenda.
Meichenbaum: I’d like you to start to notice when in fact you’re starting to have these attacks and when in fact you’re starting to stuff the feelings, and we’ll be able to talk about that next time.

Anna: Okay. All right.

Meichenbaum: Does that make sense?

Anna: Yeah, yeah, it does.

Meichenbaum Commentary: When a client presents with depression and marital distress it is critical for the therapist to ensure that the likelihood of self-injury or injury by the spouse is low. In the latter part of the session, I administered the Conflict Tactics Scale, the Marital Distress Scale, and probed for suicide risk. These measures indicated that the risk of self-injury or injury from others was indeed low. I’ll continue to conduct this assessment over the course of therapy.

Based on the initial session, two important clinical issues emerge. The first was to address the nature of Anna’s panic attacks, and to explore it in some detail and to develop a collaborative treatment plan since these were having a major impact on her life. Once these panic attacks were brought under control, we would be able to address the second clinical issue: that is, the nature and impact of the depression that she was experiencing.

SESSION TWO

Meichenbaum: In order that we can get a feel for what happened—

Meichenbaum Commentary: Following a detailed discussion of the nature and history of her panic attacks, we considered the worst incident.

Anna: Everyone had just left. The house was hectic that morning, and the kids had just gone to school, and Patrick finally got off to work. After they left I had this crying, crying and crying, and then somehow that ended, and I started to get ready for work. I got into the car.

Meichenbaum: Let me even suggest in order—could I just, in fact, ask you to sit back in the chair? And in fact, close your eyes?

Meichenbaum Commentary: After exploring Anna’s thoughts and feelings associated with this incident, I employed an imagery reconstructive procedure to help her attend to data she might otherwise not recognize. The goal is to
help Anna see the interconnection between her thoughts and feelings and the physical sensations of her panic attacks, especially the impact of her anticipatory fears.

**Meichenbaum:** You just left. You had a sigh of relief, and you were getting ready to—

**Anna:** Uh-hum. Getting ready to go to work, and I got into the car, and all of a sudden I felt faint throughout my whole body. And then I got scared, because I thought, Oh my God, this is going to happen again to me? This is going to happen again? And I started to breathe very heavily, and my heart started to race. I thought I was having a heart attack, and I thought, I’m going to have to go to the emergency room again? I’m not going to be able to go to work? Or else I’m going to die right here? I felt like I was suffocating, and I thought, I have to get help. I have to get help. I have to get out of the car and get somebody to help me. And I felt like everything was closing in on me.

**Meichenbaum:** You can really feel that again, right now?

**Anna:** Yes.

**Meichenbaum Commentary:** Listen to what Anna says to herself: “Is this going to happen to me? Am I going to have a heart attack? I’m going to die right here. I’m suffocating. I have to get help. Everything is closing in.” I want to help her see that she’s not merely a passive victim of these attacks. Her catastrophic appraisal of the situation actually exacerbates the panic. If Anna can learn to appraise both the situation and her ability to cope differently, she can alter the outcome.

**Meichenbaum:** There was a situation of when everybody left and you just had some kind of relief. And then there were the accompanying feelings that you had.

**Meichenbaum Commentary:** To help Anna see the interconnection between triggering events—her feelings, thoughts, and behaviors—I use a visual clock metaphor, 12:00 being the situation; 3:00, her feelings of apprehension, fear, and anxiety; 6:00, the automatic catastrophizing thoughts; and 9:00, the accompanying behaviors of hyperventilation and avoidance.

**Meichenbaum:** And then there were the thoughts that you had: “Oh my
God, is it going to happen again? I’m losing control.” And then there is just not being able to get to work, of going for help, of, “Who am I going to call?” I mean, as I listen to you it sounds to me as if it’s a kind of—

Anna: Cycle, it’s a vicious cycle.

Meichenbaum: Maybe that’s something we could look at.

Meichenbaum Commentary: With this understanding, we explored ways that Anna could begin to self-monitor.

Meichenbaum: One of the things I’m going to ask you to do is to note when in fact you’re having these feelings of anxiety. We’re going to be able to record the specific kinds of situations when you’re feeling anxious.

Anna: Um-hum.

Meichenbaum: What are the accompanying feelings that you have that we’ve talked about, when in fact you’re feeling tense and anxious? When in fact you can feel the hot and cold flashes; when you’re hyperventilating, the breathing in and out, and then the accompanying thoughts you’re having of “Oh my God, not again”? So that we can see how this vicious cycle comes into play.

Meichenbaum Commentary: The initial focus of treatment was to bring Anna’s panic under control. We would do this by providing Anna with information about the nature of panic disorder and the role of anticipatory fear; helping her develop symptom management skills, including noticing warning signs, interrupting her internal dialogue, diaphragmatic breathing to control her hyperventilation, and relaxation training; cognitive restructuring to help control her catastrophic misinterpretation of anxiety symptoms; graduated exposure to bodily cues that simulate panic attacks; and practice of coping techniques to regulate them. When the panic was under control our focus would shift to Anna’s depression.

Initial treatment plan for panic:

- Understand nature of panic disorder and anticipatory fear
- Symptom management skills
- Cognitive restructuring
- Graduated exposure to panic cues
- Practice coping techniques
SESSION THREE

Anna: All right, there was one time on Tuesday last week when I walked into Lizzie’s room at 5:00 just to tell her it was time for dinner, and she started screaming at me about how—

Meichenbaum Commentary: Anna continued to monitor her anxiety, paying particular attention to her thoughts and feelings as situations developed.

Meichenbaum: Help me understand in more detail exactly what happened. You walked into her room, how were you feeling then?

Anna: Well, the feeling was that this is not my fault. This is unfair. It’s not anything I can do anything about. The thought was that I just can’t do anything right, ever, in this family.

Meichenbaum: What happened then?

Anna: Well, I just walked out of her room. I could see how I could get all worked up about it. I could feel these feelings coming on, like a vice closing in on my chest—

Meichenbaum Commentary: Anna tends to interpret various feelings, in this case irritation and anger, as tenseness and anxiety, and metaphorically describe them in physical terms, such as a vice closing on her chest.

Anna: I felt tense in my whole body, but I just held on.

Meichenbaum: Did you have a sense of this kind of, as you described it before, the racing heart?

Anna: Yes, the racing heart, the breathing, suffocating.

Meichenbaum: But this time, what happened?

Anna: I just walked out of the room.

Meichenbaum Commentary: After reviewing the rest of Anna’s feelings, thoughts, and behaviors, we focused on her hyperventilation. In order to regulate the bodily changes that accompany hyperventilation, and to provide Anna with a personal means of control, she learned to use diaphragmatic breathing as a coping tool.

Meichenbaum: When people have panic attacks, one of the things that
happens is they tend to breathe in quickly and exhale out [demonstrates]. That’s what they call hyperventilation. Now when people go through that kind of breathing in and out, that tends to make them more tense, so that a lot of the symptoms, the reactions you’re having—the hot and cold flashes, the feelings of tingling, of feeling dizzy and faint—all of those symptoms are somehow tied into the way in which you’re breathing, so that if we could work on learning to control the breathing, then that would give us one way to break into the vicious cycle that you describe. Could we take a moment now and just practice some of the relaxation?

Anna: Okay.

Meichenbaum: Good. This will give you a sense of ways that you can control. So what I’m going to ask you to do is sit back in the chair and get as comfortable as possible. And then what I’m going to do is ask you to close your eyes.

Meichenbaum Commentary: After a sequence of tensing and relaxing various muscle groups, we focused on Anna’s breathing.

Meichenbaum: I’m going to ask you to take a slow, deep breath, filling the muscles of the chest, holding… holding… And then I’m going to ask you to slowly let the air out. And as you let it out this time I want you to imagine you’re blowing on a spoon of hot soup so that you’re not spilling it. Feel the warmth and calmness. We’ve talked a bit about the way in which the tenseness contributes to this vicious cycle.

Meichenbaum Commentary: The next step was to focus on the cognitive aspect of panic attacks, examining Anna’s thoughts in the context of a specific anecdote.

Meichenbaum: Another piece to this cycle that we talked about were the kinds of—not only the feelings—but the kinds of thoughts you were having. And I was wondering if, in order for us both to get a better feel for that, could we go back to that situation that you described with Lizzie and look at the kinds of feelings and thoughts you had at each point?

Anna: Okay.

Meichenbaum: Let’s pick up at the point... you had just gone into the room, and what did she say?
Anna: Well, she started yelling at me about invading her privacy all the time, and I thought this was just completely unfair. I didn’t do anything. It wasn’t right.

Meichenbaum: She was attacking you out of the blue.

Anna: That’s right, and I hadn’t done anything. That’s what I thought. And then after I walked out of the room I thought, well, I never can do anything right, never for anybody in this whole family. I’m always wrong, I’m never right, I’m no good, I’m worthless.

Meichenbaum: And if you have these kinds of thoughts of “I never can do anything right, I’m unappreciated,” is that part of this cycle?

Anna: Yeah, yeah.

Meichenbaum: There are two aspects of this that I’d like to have us look at. One is, what it is that you can do to change these thoughts in your head. The other is, where did these kinds of thoughts and feelings come from? Let’s start with how we can begin to just break the cycle, and then we’ll move on to, perhaps, from where those feelings came.

Anna: Okay.

Meichenbaum: Take me back through what those thoughts were.

Anna: Well, at first I thought it was unfair, unfair of her to yell at me. I didn’t do anything. I just went in there to call her in for dinner. And then, as I was leaving, I thought, this is the way it always is. I never can do anything right. I’m always wrong, I’m always wrong, I’m always wrong. I’m just a total failure.

Meichenbaum Commentary: When Anna offers these automatic thoughts, we can explore data that is consistent or inconsistent with each automatic thought. In this way we can help her become an observer of her thought processes and behaviors and begin to rewrite her story.

Meichenbaum: Is it true that you’re a total failure?

Anna: No, it’s not. Not at all.

Meichenbaum: It’s not.

Anna: No, I’m not.
Meichenbaum: You’re not a total failure.
Anna: Not at all.
Meichenbaum: In what way are you not a total failure?
Meichenbaum Commentary: I’ll challenge Anna to find data that she is not a failure.
Anna: Well, I’ve done a lot. I had to raise my brother and sister. My father told me I couldn’t go to school—I was too stupid—and I went anyway. I paid my own way.
Meichenbaum: You paid your own way.
Anna: Yes. I worked my way through.
Meichenbaum: Uh-huh. Let me check it out. So when your mother died, right, you had to take care—
Anna: Of my father and the two kids.
Meichenbaum: And you went to school.
Anna: And I went to high school, and my father was drinking and depressed and mean and told me that I wasn’t smart enough to go to school. And I wanted to go on to study interior design, but I did anyway.
Meichenbaum: You did it, in spite of what he said.
Anna: Um-hum.
Meichenbaum: Are there other examples that you’re not a total failure?
Anna: Joe is about to go into college, so that’s a good thing.
Meichenbaum: Uh-hum.
Anna: The kids are okay. Lizzie is a big problem right now, but—
Meichenbaum: And what about at work? Are you a total failure there, too?
Anna: No, I’ve been working there for two years.
Meichenbaum: So that the notion that you are a total failure, on the one hand, does that fit with someone—?
Anna: Who’s done those things?
Meichenbaum: Yeah.
Anna: Um, I guess not.
Meichenbaum: You guess not.
Anna: You think I should try to say something else to myself?
Meichenbaum: No, well, are you a total failure?
Anna: No, I’m not.
Meichenbaum: You’re not.
Anna: I’m not.

Meichenbaum Commentary: Our discussion of the facts, which are inconsistent with Anna’s vision of herself as a total failure, has given her a glimmer of hope. I think that her tears indicate the intensity of this emotion.

Meichenbaum: Huh?
Anna: I do. I mean, I have to try something, because I can’t go on like this.
Meichenbaum: So that the notion that you are a total failure, that you’re worthless, that you’re a nobody, does that fit the data of who Anna is?
Anna: No.

Meichenbaum Commentary: At this point, I decide to help Anna appreciate that her feelings were normal and appropriate, given her experience with her father and her relationship with Patrick, to validate her reactions.

Meichenbaum: The tears that I see?
Anna: Yeah?
Meichenbaum: The welling up?
Anna: Uh-huh?
Meichenbaum: Are signs of how much you’re in touch with your feelings.

Meichenbaum Commentary: Perhaps it would have been better to help Anna put into words the feelings behind the tears before rushing to validate her experience.

In the next three sessions, we were able to use a variety of cognitive behavioral procedures in order to help Anna develop some control over her panic attacks. She was able to use diaphragmatic breathing in order to control
the hyperventilation and to handle the anticipatory fear that she was experiencing. We used self-instructional training procedures in order to combat her tendency to misinterpret bodily signs and to catastrophize. We also employed simulated panic attacks in the clinic so that she could learn and use various kinds of coping techniques. Anna was also encouraged to use these kinds of coping skills everyday in the form of personal experiments.

SESSION SEVEN

Anna: Well, I didn’t have any attacks this week, and—

Meichenbaum Commentary: By the seventh session, Anna reported that she had been able to use coping techniques to manage her anxiety.

Anna: Well, there was one time this week, again with Lizzie, where she got some mail that was done something to or opened by the post office or something, and she came screaming at me again that I had opened her mail and invaded her privacy, and I started to get those feelings of—

Meichenbaum: What kinds of feelings did you start to get?

Anna: Well, I started to get anxious and tense and I couldn’t breathe and I can’t do anything right. I can’t do anything—

Meichenbaum: What happened this time?

Anna: Well, I started to breathe. I made myself become aware of my breathing. I forced myself to take deep breaths.

Meichenbaum: Fill me in. What did you do?

Anna: Well, I just started to breathe and concentrate on the breathing.

Meichenbaum Commentary: I’ll focus heavily on the ways in which she interrupted this incipient panic attack in order to reinforce this new pattern. Later, I’d like to explore her sensitivity to her daughter’s criticisms.

Meichenbaum: What happened when you heard that—

Anna: Well, I heard that a couple of times and I thought, I have to change this, so I just said to myself, I said, “This isn’t my fault. I didn’t do this.”

Meichenbaum: You mean, open the letter for Liz.

Anna: Right. I didn’t do this. It isn’t my fault.
Meichenbaum: And when you said that to yourself, what happened? How did that make you feel?

Anna: Well, um, it seemed to kind of relax me in a way, with the breathing and the—

Meichenbaum: Anna, are you saying that you actually could notice when you were getting worked up?

Anna: Yeah, I did, because—

Meichenbaum: And did you sort of catch yourself and interrupt it this time?

Anna: Um-hum, I did.

Meichenbaum: What did you say this time that was different?

Anna: I said it wasn’t my fault. It wasn’t my fault. I didn’t do anything wrong.

Meichenbaum: And when you repeated that to yourself, how did that help you?

Anna: Well, it seemed to kind of go away.

Meichenbaum Commentary: It’s not only important for clients to change, they must also take credit for the change, and see the instrumental actions they took to bring about that change.

Anna: The physical didn’t happen. I guess, I guess it just stopped. It didn’t happen.

Meichenbaum: What you did about noticing and the way in which you can sort of catch yourself, and this kind of thing, are there ways to do this with people at home? Is there any way to do what you did with Liz, say, with Patrick?

Anna: Oh. Um, well, I don’t know.

Meichenbaum: When I asked about Patrick, you sort of looked away. Tell me a little bit about Patrick and you, and how you’re getting on with each other.

Anna: Well, not too good lately, actually. Um, I guess it’s been since I’ve gone to work. The past couple of years, things have been getting more difficult.
Meichenbaum: So that when you went to work—
Anna: I guess that’s when the tension started to come in.
Meichenbaum: Hm, that’s interesting. What do you think was going on with you going to work and the tension increasing? What happened?
Anna: Well, I don’t know. Maybe I was finding some independence. Maybe he resents that.
Meichenbaum: What gives you the notion that somehow the independence and resentment go together? Has Patrick ever said anything to you about the work?
Anna: No, he hasn’t. He just is kind of belittling, you know, about it. But he hasn’t really said anything.
Meichenbaum: So he belittles the work?
Anna: Oh, he makes fun of it. “Your little job,” he calls it, “your little job.”
Meichenbaum: And when he calls it that “little job,” how does that make you feel?
Anna: Um, it makes me mad.
Meichenbaum: What, does he have the big job and you have the little job?
Anna: Yeah.
Meichenbaum: Hum?
Anna: Yeah, I think so.

Meichenbaum Commentary: At this point, we discuss whether Anna would find it useful to invite Patrick to join us for a session, and whether she should consider couples therapy. Anna was quite firm that she looked upon our therapy meetings as her time and didn’t want to include Patrick, at least not at this point. The discussion then turned toward her developmental background and the relationship with her father.

Meichenbaum: Have there been other people in your life who have also, as you’ve described it, belittled you?
Anna: Um…
Meichenbaum: Criticized you like that?
Anna: Well, Patrick’s been the person in my life for the past 18 years.

Meichenbaum: What about before Patrick? Were there—

Anna: Um… well, I guess my father. He was like that to me, too.

Meichenbaum: He also—

Anna: Belittled me, yes.

Meichenbaum: Criticized you?

Anna: Yes.

Meichenbaum: Sarcastic?

Anna: Um-hum. Cold.

Meichenbaum: Told you, you couldn’t go on? Cold?

Anna: Right. Told me I couldn’t go to school. I wasn’t smart enough to go on to school.

Meichenbaum: Then perhaps it would be useful for us to sort of talk about what went on then? What was the impact?

Meichenbaum Commentary: With this discussion we began to uncover Anna’s story of how her core schemas, or beliefs—that she is worthless and a total failure—had developed, and how she learned to engage in depressive forms of thinking, such as seeing things as black or white, and magnifying negative events.

In the eighth session, Anna continued to discuss the relationship she had with her father and its ongoing impact. She was able to put into words, perhaps for the first time, her anger toward him.

SESSION NINE

Anna: Well, it’s been better this week, I think. I haven’t had any panic attacks. But I don’t know why I feel kind of worse, actually.

Meichenbaum: Worse in what way?

Anna: Well, more depressed. I’ve been thinking about a lot of things, and it just kind of makes me feel terrible.

Meichenbaum: What kinds of things have you been—?
Anna: Well, like, we’ve talked, and I’ve been trying to think about my father and that time of my life, and why I’m depressed now, and I haven’t been then, or in the past many years. Why now am I having these attacks and these depressions?

Meichenbaum: You mentioned something in one of our earlier sessions that this was the time now—how did you put it? This is the time that your daughter was the age of—

Anna: Oh, that’s right. I was my daughter’s age when my mother died of cancer.

Meichenbaum: Just about this time?

Anna: Exactly. I was 13, just like Lizzie is now.

Meichenbaum: What was it like back then when you were 13?

Anna: My father was depressed and drinking a lot. He had been drinking before my mother died, but not as much as now. He had always been kind of mean to my mom. Like, there were a lot of fights, and he had an explosive personality. He never hit her or anything like that, but there were a lot of fights. He was mean, sarcastic.

Meichenbaum: And you would see this?

Anna: Yeah, I would see it. Mostly I could hear it a lot. I’d listen to it. I’d be lying in bed at night, listening to these fights. I’d always lie there, and I wish she had more fight to her. I wish she would just stand up and have some guts. I always wished she had some moxie.

Meichenbaum: What did you see in your mom?

Meichenbaum Commentary: I want to explore whether Anna sees any positive characteristics in her mother.

Anna: It always made me feel very sad and depressed for her. I don’t know. I just wish she could stand up to him.

Meichenbaum: What could she have done?

Anna: Hmm, I don’t know what she really could have done, being the kind of man he was. I don’t know. Um, I guess she did the best she could. She kind of stood between him and us, when she was alive. She kept the barriers there. I think if it hadn’t been for her, he probably would have
come after us that way.

Meichenbaum: So she was—you use the word “barrier” between you and—

Anna: Yeah. He would yell at her and not at us. He didn’t ever yell at the little kids. When she died he would yell at me. Kind of, I took the place of her.

Meichenbaum: When you did that, when you took the place of her—

Anna: Yeah, after she died?

Meichenbaum: What kind of impact did it have on you?

Anna: Well, um, I just kind of took it all in, and kept busy, and took care of the kids, and went on about my business, and—

Meichenbaum Commentary: Perhaps we can help Anna appreciate the rest of her story.

Meichenbaum: Was there any way that you acted as a barrier?

Meichenbaum Commentary: She was more than just a dumped on daughter. She was also a protective sister.

Anna: Well, yeah, I guess. I kind of took in all his stuff, and he could yell at me and tell me I was a total failure, and then he left them alone.

Meichenbaum Commentary: It’s interesting to note Anna’s comment that she took in all her father’s stuff, in light of her metaphor of “stuffing” her own feelings.

Meichenbaum: In that way, are you in any way like your mom?

Anna: Well, there was one time that, I don’t know, I had done something. I can’t even remember what it was; I just remember the situation that he told me I was just stubborn. I was just so stubborn. And she took me aside and she said, “No.” She said, “Don’t listen to him. You’re not stubborn. You’re tenacious. That’s what you are.”

Meichenbaum: Tenacious?

Anna: Uh-hmm. That’s what she said. So I guess in a way she was more than a barrier against him. She was really a wonderful person. I wish you could have known her.
Meichenbaum: She was really special.

Anna: Yeah, she was. I guess she just knew things about me. That’s kind of why I miss her so much.

Meichenbaum: Especially at this time?

Anna: Yeah.

Meichenbaum: There seems to be a coincidence between when your mom died, when you were 13, and the age that your daughter’s at. That kind of timing might help us better understand about… You said you didn’t quite grieve the loss of your mom.

Anna: Hmm. No.

Meichenbaum: Is it possible that somehow the panic attacks, these attacks that you’re having, especially at this time, isn’t something tied to that same grieving process?

Anna: I hadn’t really thought about it like that. But actually, well, the attacks… Well, this is kind of strange, they really kind of started on Lizzie’s 13th birthday. I guess there is a strong connection to that.

Meichenbaum: And if you could find some other way to grieve for your mom, if you could find some other way to take that person you cared for so much and so deeply for, the special relationship you had with her, if you could find a way, besides the depression, besides the anxiety, the concern that you have, would that help?

Meichenbaum Commentary: These questions would soon enlarge to, Could Anna learn to have her own voice, write her own script, instead of repeating the script authored by her father and by Patrick?

SESSION 10

Anna: Um, there was something that happened with Patrick that was kind of surprising to me, actually.

Meichenbaum: Oh, really? What happened?

Anna: Well, it was on Saturday. Everybody was busy. It was hectic, as usual, and he had done some work, met with some clients, even though it was Saturday. And he came in acting very important. He had so many
things to do. And he just kind of brushed me off, and I started to get really angry again, and feel those feelings. And I waited until he got off the phone, and I went into the room, and I went up to him and I said, “Patrick, you are such an asshole.”

**Meichenbaum:** [laughing a little]

**Anna:** And I never use any language like that with him, at all, with anybody.

**Meichenbaum:** And what happened?

**Anna:** I don’t think he knew whether to be angry or shocked or what. So he just kind of ignored it. The funny thing about it is that the rest of the day we kind of had a, we had a really nice time, and we went out that night.

**Meichenbaum:** So it takes calling him an asshole to get that kind of reaction?

[Laughter]

**Anna:** I hope not. But it seemed like in this situation it kind of got a reaction that I wouldn’t expect. I mean, I wouldn’t expect it from myself, either.

**Meichenbaum:** So on the one hand, when the feelings build—

**Anna:** I could take them all in and turn them against myself, but in this case, I just, I guess I turned them against him.

**Meichenbaum:** Yeah. So sometimes you just stuff them, stuff them down. And sometimes it comes out?

**Anna:** Well this time it came out. “Patrick, you are such an asshole.”

**Meichenbaum:** Could you believe you said that?

**Anna:** No.

[Laughter]

**Meichenbaum:** Huh?

[Laughter]

**Anna:** No.

**Meichenbaum:** How’d you feel about saying that?
Anna: Well, when I said it I was angry. I was beginning to get anxious. But then after, I stormed out of the room—I said that to him and I stormed out of the room—and I got back into the kitchen and I waited to see if there was a reaction, and there wasn’t. I guess I kind of thought it was funny. But I certainly felt the tension go. I felt like yelling at everyone.

Meichenbaum: Hmm, what, you have a backlog of people?

[Laughter]

Anna: Lizzie, Joe…

[Laughter]

Meichenbaum: All these assholes, you want to kick around, huh? Huh?

Anna: I guess.

Meichenbaum: What, you keep a list? Huh? Let’s take a moment and see what you could do besides stuff it down versus explode and call people assholes [laughter]. What could someone do besides… what’s in the middle? What’s the gray area? What do people do with their feelings?

Anna: What else could I have done, Dr. Meichenbaum? What would a normal person do?

Meichenbaum Commentary: The rest of this session was devoted to discussing and practicing assertiveness skills that Anna could use in place of either aggressive confrontations or stuffing her feelings.

Anna: I should have you tell him. You say it better than me.

Meichenbaum: Let’s try and see if you could say it. Could you imagine that I was Patrick, and that this was that Saturday?

Anna: I could try.

Meichenbaum: I’ve just been on the phone. I’ve walked through. I’ve just given you orders. I’ve asked you questions and I’ve walked away. And now, what are you going to say?

Anna: “Patrick, I’m tired of you ignoring me all the time. I think you should stop.”

Meichenbaum: If I say, “Anna, you did this. You did this,” how will that make you feel if I kept telling you, “You did it. You did this?”
Anna: Hmm… guilty.

Meichenbaum: Is that going to make you a sympathetic listener?

Anna: No.

SESSION 11

Anna: Well, it was a pretty normal week, but there was one incident this week that I was able to try to use the skills that we talked about.

Meichenbaum: What happened?

Anna: Well, I was at work, and I had ordered a tapestry to be delivered to a client for a showing. And the tapestry didn’t get there. I was very clear about the directions and where they were supposed to be and what time, and it just didn’t make it in time for the showing. So the clients got very angry and came back to the boss and yelled at him, and the boss came and yelled at me.

Meichenbaum: And then what happened, when they yelled at you?

Anna: Well, I took it all in, and the boss went back into the room, and I started to get very upset, and I thought, well, this is the time when I could try to use what we talked about last week. So I thought about it for a minute and I went into the boss’ room, and I said, “You know, um, when something like this happens and you yell at me it makes me feel very bad, and it’s not any kind of way to work, because this just wasn’t my fault. Everything I did about getting the tapestry there was right. It wasn’t my fault, and you really have no right to yell at me about that, and I don’t think it’s a good way to work.”

Meichenbaum: You told him that?

Anna: Yeah, I did. I did.

Meichenbaum: And what happened after you told him?

Anna: Well, by that time he had kind of calmed down a little, and so I think he understood.

Meichenbaum: How did that make you feel, that you could take it in, sit out there, and then decide to go in and—

Anna: Well, actually the amazing thing is that he kind of apologized for
yelling at me like that. And it made me feel really good.

**Meichenbaum Commentary:** *I’ll help Anna to use the data from her personal experiments as evidence to unfreeze the beliefs she holds about herself and the world.*

**Anna:** Well, I felt kind of proud that I had taken a situation into my hands and acted upon it.

**Meichenbaum:** Are you saying that you could actually notice when you’re starting to simmer, take it in, stuff it down? That you could actually notice that happening?

**Anna:** Yes, yeah, I could notice those situations, and I think sometimes I can even begin to, like in this case, I can start to notice those situations even before they begin.

**Meichenbaum:** Hmm.

**Meichenbaum Commentary:** *In addition to taking ownership of her changes, Anna also needs to be able to describe the process that led to such change. Note her self-directing language: “taking the situation into my hands,” “acted upon it,” “start to notice before it begins.”*

**Anna:** Well, I did consciously try to make an effort to talk about, to go and confront the person with what had happened.

**Meichenbaum:** Are you saying that you’re in the process of finding the middle ground? That there’s something besides just stuffing it down versus exploding or withdrawing?

**Anna:** Um-hmm. Yeah, I guess, I guess I am saying that.

**Meichenbaum:** Were there any other instances of when this occurred?

**Anna:** No, this was the time that I had done it this week. I know we had talked about doing it with Patrick. I didn’t try it with Patrick yet.

**Meichenbaum:** Yet?

**Anna:** Yet.

**Meichenbaum:** What does that mean, “Yet”?

**Meichenbaum Commentary:** *I chose to latch onto Anna’s use of the word “yet” to elicit a commitment statement and reinforce the hopefulness that she*
would try her skills with Patrick.

Anna: I really think I could maybe try it with Patrick.

Meichenbaum: You could try what? The—

Anna: This—

Meichenbaum: Telling him how you feel?

Anna: —talking. Yeah.

Meichenbaum: Instead of the stuffing?

Anna: Yeah.

Meichenbaum: Instead of the exploding and withdrawing?

Anna: Yeah. I think I’d like to try it with Patrick.

Meichenbaum: It might take some courage, huh?

Anna: Oh, yeah.

Meichenbaum: Hmm?

Anna: Yeah, I didn’t have the courage to do it this week.

Meichenbaum: And what’s going to be different about next week?

Anna: Well, I did it once with the boss.

Meichenbaum: And how did it turn out?

Anna: It turned out well.

Meichenbaum: So you think you’re getting close to that point?

Anna: I think I actually would like to try it with Patrick.

Meichenbaum: What might get in the way of you trying this?

Meichenbaum Commentary: I’m anticipating any possible obstacles to Anna’s following through on what we’ve discussed.

Meichenbaum: Barriers or obstacles that you can envision? Anything that might convince you not to try it?

Anna: Not to try it?

Meichenbaum: Yeah. You think you could actually go ahead and do it?

Anna: I think I could, yeah.
Meichenbaum: Okay.
Anna: Okay.

Meichenbaum: I’m eager to see what happens. I suspect you are, too.
Anna: Me, too.

Meichenbaum: What if you try these kinds of things with people—with your boss, with Patrick—and it doesn’t work?

Meichenbaum Commentary: The next step was to engage in relapse prevention by having Anna anticipate and prepare for possible setbacks. Not all of Anna’s personal experiments will work, and we want to decrease the likelihood that she will catastrophize, sliding back into her black or white, depressive-thinking pattern.

In the remainder of the session, I explored with Anna how does it feel to relate differently, no longer in an anxious and depressive fashion? We explored what were the conclusions she can now draw about herself given this new style of interacting? What did her mother mean when she said that she was tenacious? Was she right? An exploration of these questions would help Anna to begin to rewrite the script to construct a new narrative. Given the progress that she was making in this area, I suggested that we take two weeks between now and the next session, so she could continue practicing some of her coping skills.

SESSION 12

Meichenbaum: Anna, it has now been two weeks since I’ve seen you last. I was wondering if you could fill me in on how things have gone these last weeks.

Anna: Well, actually they’ve been a little better.

Meichenbaum: Hmm. Fill me in. In what way?

Anna: Well, there were a couple of incidents this week that I think went differently, one with Patrick. Patrick and I had a plan to have dinner together. The kids were gone that night. And I rushed home from work early to make dinner, and he, again, came breezing in about an hour late and said, “Oh, I’m sorry. I forgot. We’ll have to do it some other time.” I started to feel really badly about that, and I started to walk upstairs, and I thought—I don’t know what I thought. But then I decided to go and tell
Patrick. So I went to him and I said, “You know, Patrick, when we have a plan, and you just kind of breeze through and blow me off like that, it makes me feel really bad. I feel really kind of awful about it.” And you know, for once he really heard that. He was really listening, and apologized to me for doing that.

Meichenbaum: And did you end up having your dinner?

Anna: Yeah, we did. And we talked a little. It turned out to be a nice evening.

Meichenbaum: Hmm… How’d that make you feel?

Anna: Well, it made me feel really good.

Meichenbaum: That you told him?

Anna: That I told him, yeah.

Meichenbaum: And that he heard you?

Anna: Yeah. That he really listened and he seemed to take it in.

Meichenbaum: So you are finding that middle ground.

Anna: I guess. I guess I am.

Meichenbaum: You’re finding that you don’t have to stuff it.

Anna: Yeah, yeah, in that case. I found that I didn’t… that it was much better, it felt much better, to work up the whatever, moxie, to say something to Patrick instead of just stuff it or let it go by.

Meichenbaum: You mentioned that that was one incident with Patrick. When you started off you said there were a couple of incidents. I’m kind of curious what else has happened. It sound like a—

Anna: Well, there was one other one. I don’t know if it’s the same kind of thing, but with Lizzie, this week. I was thinking about my mom a lot this week, and one evening I took out all the old pictures of all the relatives, and a lot of pictures of my mom. And I saw a picture from her wedding that I hadn’t seen in a long time. And so I was just looking at it, trying to imagine about my mom at that time in her life, and Lizzie, I guess, walked by the room and saw me looking very strange, and so she came in and wanted to know what was going on. And I had just discovered this picture, or rediscovered it, and I was able to explain a little to Lizzie about her
grandmother, my mother; what she was like.

**Meichenbaum:** And how did she receive all that?

**Anna:** Well, actually, she was a lot more interested than I thought she would be. And we spent the rest of that evening talking about my mother.

**Meichenbaum:** You mean the whole evening, with Lizzie?

**Anna:** Yeah, actually. It made me feel good to be giving something of my mother to her, giving something of my life to her that she seemed to need.

**Meichenbaum:** It sounds like it was a very special moment.

**Anna:** It was, actually.

**Meichenbaum:** As I listen to you describe these incidents with Patrick, the sharing with Liz, I’m struck with these incidents as compared to what you were like when you first came in. Can you think back to those first sessions?

**Anna:** Oh, yeah. I can.

**Meichenbaum:** When you were the “glob of misery,” the “personal tragedy”?

**Meichenbaum Commentary:** It is useful to contrast Anna’s present level of functioning with what she was like when she first came in. Clients sometimes lose perspective of the nature and degree of change that they have brought about.

**Meichenbaum:** The person who had the panic attacks and the depression?

**Anna:** Uh-hmm, uh-hmm.

**Meichenbaum:** Do you see those differences? Am I misreading it?

**Anna:** No, not at all. I can definitely see some differences in the person I was then and the person I am now.

**Meichenbaum:** What is it that you’ve taken away from the sessions? What has happened in your life that has led to these kinds of changes?

**Anna:** Well, um, I guess one of the things is that now I can begin to see when one of these attacks is coming on, is forming, and I can maybe change what I’m thinking, or the voice that’s running through my head into something else to make it stop or get control of it. When I’m starting
to feel like I have the choice of stuffing the feeling or not, I can try to talk to somebody, talk to the person about it—tell about it—and that will help me to get it out in another way than stuffing it.

**Meichenbaum:** And you also, you use the word “the voice,” or something that was going on—

**Anna:** Voice.

**Meichenbaum:** In what way has that voice changed? In what way has the CD that you described changed from where you began?

**Anna:** Well, I can change it. I don’t think it has really changed, but when I hear it I can change it and make it play a different voice, a different thing to say. I can change it into my voice.

**CONCLUSION**

**Meichenbaum Commentary:** At the one-month follow-up, Anna continued to make progress. She had two bouts of anxiety attacks, but she was able to control these by managing her breathing and her thoughts. She continued to experiment in sharing her feelings. Anna and Lizzie even visited her mother’s gravesite. In the brief twelve sessions, we were not able to address the underlying vulnerability to depression, but Anna had learned a variety of coping skills. She was now able to notice when she was becoming depressed and interrupt this cycle so the sadness did not escalate. She no longer jumped to conclusions and personalized failures. She even inoculated herself to criticism. She took pride in her work and in her relationship. As Anna noted, “My mother was right. I am tenacious.” We concluded by my commenting to Anna that, while there may be ups and downs down the road when she becomes anxious and depressed, she would never be the same person again, for what we had been through in therapy together was irreversible. Just irreversible.
Video Credits

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