

✓ **Treatments** *That Work*<sup>™</sup>

✓ **Coping Effectively  
With Spinal Cord  
Injuries**

A Group Program

*W o r k b o o k*

Paul Kennedy

# Coping Effectively With Spinal Cord Injuries

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# Coping Effectively With Spinal Cord Injuries

A GROUP PROGRAM

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Paul Kennedy

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One of the most difficult problems confronting patients with various disorders and diseases is finding the best help available. Everyone is aware of friends or family who have sought treatment from a seemingly reputable practitioner, only to find out later from another doctor that the original diagnosis was wrong or the treatments recommended were inappropriate or perhaps even harmful. Most patients, or family members, address this problem by reading everything they can about their symptoms, seeking out information on the Internet, or aggressively “asking around” to tap knowledge from friends and acquaintances. Governments and healthcare policymakers are also aware that people in need do not always get the best treatments—something they refer to as “variability in healthcare practices.”

Now healthcare systems around the world are attempting to correct this variability by introducing “evidence-based practice.” This simply means that it is in everyone’s interest that patients get the most up-to-date and effective care for a particular problem. Healthcare policymakers have also recognized that it is very useful to give consumers of healthcare as much information as possible, so that they can make intelligent decisions in a collaborative effort to improve physical health and mental health. This series, *Treatments ThatWork*™, is designed to accomplish just that. Only the latest and most effective interventions for particular problems are described in user-friendly language. To be included in this series, each treatment program must pass the highest standards of evidence available, as determined by a scientific advisory board. Thus, when individuals suffering from these problems or their family members seek out an expert clinician who is familiar with these interventions and decides that they are appropriate, they will have confidence that they are receiving the best care available. Of course, only your healthcare professional can decide on the right mix of treatments for you.

This workbook is designed for your use as you participate in a group program tailored specifically for individuals who have suffered a spinal cord injury (SCI). As a person with an SCI, you face many challenges in your daily life. The goal of this program is to teach you the skills you need to effectively manage these difficulties.

Over the course of several weeks, you will meet with other individuals whose lives bear the impact of a major trauma. Together, you will learn skills for coping with the stress caused by your injury. You will learn how to successfully appraise stressful or uncomfortable situations and choose the appropriate coping strategies. You will also learn how to manage intense emotions and challenge any negative thoughts you may be experiencing. In addition, you will be taught methods for successful problem solving and a relaxation technique to help relieve stress. This time-limited program will increase your capacity to cope, as well as your belief in your ability to manage your situation. It is designed to improve your quality of life and will help you look to the future with optimism.

David H. Barlow, Editor-in-Chief,  
Treatments *That Work*<sup>™</sup>  
Boston, MA

# Contents

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Chapter 1	Welcome!	<i>1</i>
Chapter 2	Session 1: Introduction to Stress and Coping	<i>5</i>
Chapter 3	Session 2: Assessing and Managing Stress	<i>13</i>
Chapter 4	Session 3: Problem Solving	<i>21</i>
Chapter 5	Session 4: Managing Emotions	<i>31</i>
Chapter 6	Session 5: Changing Negative Thinking	<i>41</i>
Chapter 7	Session 6: Maladaptive/Adaptive Coping	<i>47</i>
Chapter 8	Session 7: Social Support (Final Session)	<i>51</i>
	Appendix of Forms	<i>57</i>

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## **Overview of the Program**

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You are about to begin a group therapy program for individuals who have suffered from a spinal cord injury (SCI). SCI is a major trauma that presents a number of critical life changes that can cause stress. The goal of this program is to teach you ways of effectively managing and coping with this stress.

Over the next several weeks, you will meet with other SCI patients to talk about the stresses you face and the ways you deal with them. The name of this program is Coping Effectiveness Training (CET), and its main goal is to help you manage the stresses caused by your injury. As a person with an SCI, you face many challenges in your daily life. You may have trouble feeling in control or you may be confronted by people who have little knowledge of your disability. You may find yourself dealing with insensitive (or overly sensitive) family members and friends who don't know how to help. You may also be experiencing strong negative emotions, which can lead to depression and anxiety. Over the course of this program, you will learn how to appropriately handle stressful or uncomfortable situations, as well as ways of relieving stress and increasing your quality of life.

Each group meeting will last approximately 1 hr. You will meet with your group on a twice-weekly basis according to the schedule determined by your group leader. You may record the group schedule in the space provided.

The idea behind group therapy is to provide a safe and supportive environment where individuals facing similar issues can feel free to discuss their feelings in a non-biased forum. Use the space provided on the next page to record the names and contact information of your group leader and the other members of your group. If you have any questions or concerns prior to starting the program, please contact your group leader.

## Group Meeting Schedule

	Date and Time	Location
Session 1		
Session 2		
Session 3		
Session 4		
Session 5		
Session 6		
Session 7		

### Group Contact Information

My group leader is: \_\_\_\_\_

Phone/Email: \_\_\_\_\_

The members of my group are:

Phone/Email:

\_\_\_\_\_

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We hope that you find your involvement in this group to be worthwhile. We also hope it helps you explore new ways of managing your situation and builds up your confidence for the future.

## Using This Workbook

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This workbook is designed specifically for your use as you attend group meetings and participate in this program. It contains psychoeducational information that you can refer to in between sessions to reinforce what you learn in group. It also contains worksheets and forms necessary for participating in group exercises and for completing at-home assignments. There is space throughout to record notes, ideas, and any questions you may have and want to bring up to your group or group leader. Please be sure to bring your workbook with you to every group meeting.

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### Goals

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- To learn about the program and meet the other members of your group
- To learn about stress and stress reactions
- To discuss stress as it relates to SCI
- To review the cognitive model of stress and coping

### Introduction to the Program

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Coping Effectiveness Training, as briefly discussed in Chapter 1, is a group program aimed at helping people manage the demands of SCI. Over the next several weeks, you will be encouraged to think about the stressful situations you have experienced following your injury and find ways of dealing with them effectively in order to reduce your stress. Part of the process of managing stressful situations is about deciding where to focus effort. It is overwhelming to look at all the changes and difficulties all at once. The goal of CET is to build up your confidence in your ability to cope with the injury and manage your life.

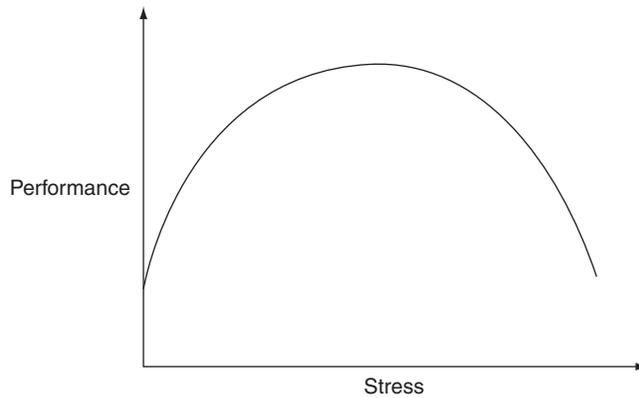
You will meet with your group for a total of seven sessions over the course of several weeks. You may record the program schedule in the space provided in Chapter 1 of this workbook. Because each session builds on the discussion of the previous one, it is important that you attend all sessions. You are encouraged to come to every meeting and to show up on time. The success of the program depends on group participation, including talking and listening to others, as well as the promise of confidentiality. Whatever is said in the group stays in the group.

### Introduction to Stress

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Stress is a normal response to demanding situations. Everyone experiences stress from time to time. It is a normal reaction to injury and the situations that may

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**Figure 2.1**  
Performance/Stress graph

result. Although the word “stress” is often used in everyday terminology and seems simple, it actually represents a complex interaction of thoughts, feelings, and behavior.

People usually respond well to the pressure and demands of life through the use of coping strategies, such as taking breaks from tasks, relaxing, watching TV, seeing friends, etc. However, problems may arise when demands are excessive or prolonged. In these situations, individuals may have trouble coping, causing them to become “stressed.” On the other hand, too few demands, or a lack of any stress, can lead to underarousal and boredom. The optimum amount of stress is when we perceive a situation as being demanding, but within our capability to handle it. Challenging situations improve our sense of competence, and successfully managing those situations leads to greater self-respect and self-worth. This idea is illustrated in Figure 2.1

There are always ways of managing the stresses of your injury. Part of the process of managing the situation is about deciding where to focus effort. There are a range of practical skills that you can use to tackle stress and its unpleasant effects. You will learn and practice these skills in group.

## Stress Reactions

Stress reactions occur when stress is excessive or overwhelming. Such uncontrolled tension can reduce an individual’s ability to enjoy life and place him or her at risk

for depression and anxiety, as well as physical disorders. Stress reactions are unique to the individual, but may include the following:

- Low mood
- Negative thinking
- Poor sleep
- Muscular tension
- General fatigue

Think about your own reactions to stress and talk to the other group members about theirs. Although stress can sometimes feel overwhelming, there are always ways to manage it, even after a major event or trauma.

## Stress and Spinal Cord Injury

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SCI is a major trauma that impacts many aspects of a person's life. Following SCI, people face challenges that they have not previously experienced. Because SCI is new to you, initially it can be very demanding. You will need to learn to cope with a variety of new situations. It is important to manage stress effectively, otherwise you may become overwhelmed and the stress will interfere with your ability to deal with certain situations.

There are different types of stress triggers. First, there are *external* factors, which are those situations or events that cause stress. Examples of external factors include:

- Anatomical changes that are difficult to discuss
- The impact of the SCI on the family
- Physical changes
- Physical pain resulting from the injury
- Requiring more time than before to complete tasks
- Irritation with self or with others

In addition to external factors, internal factors can also trigger stress. *Internal* factors are the thoughts and interpretations you make about external factors. Use

the space provided to create a list of external and internal factors that can lead to stress.

	External Stress Triggers	Internal Stress Triggers
1	_____	_____
2	_____	_____
3	_____	_____
4	_____	_____
5	_____	_____

## What Influences Stress?

---

Thoughts about a particular situation can influence whether or not a person perceives the experience as stressful. For example, think about receiving a promotion at work. Some people see a promotion as an exciting challenge, whereas others may be afraid of taking on a senior position. They may become extremely anxious about the prospect of having more responsibility and find it difficult to live up to someone else's expectations of them.

The same can be said of retirement. For some, retirement may be a chance to do all the things they never had time to do while they were working. Others may become depressed however because they can't do the job they loved anymore and they miss their colleagues.

## Cognitive Theory of Stress and Coping

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The cognitive model of stress proposes that by thinking about the ways in which a person deals with stress, he or she is able to improve the skills necessary for effective coping.

It seems that there are two factors that determine how people deal with stressful situations. We all go through these two processes even though we might not know it on a conscious level.

The first process is *appraisal*. Appraisal is your personal evaluation of a stressful situation. It is what you make of the situation or experience. Do you view the

situation as a challenge or as a threat? How does the situation relate to you? Is it important or not?

The second process is *coping*. Coping is a review of the coping strategies that you have and your belief in your ability to manage the situation. What skills do you have and which ones work the best? Examples of coping skills include the following:

- Relaxing
- Going out with friends
- Exercising
- Reading
- Watching TV

It is important to note that not all coping strategies are useful. When a person copes well, the way he thinks about the situation and what he does about it match up. The result of good or *adaptive* coping is decreased levels of stress and a greater sense of control over the situation. When coping poorly, thoughts about the situation and the actions taken are in conflict. The result of poor or *maladaptive* coping is an increase in stress-related symptoms.

As you progress through the program, you will be given the opportunity to strengthen your adaptive coping skills.

## Homework

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-  Think about your personal signs of stress and record them on the My Signs of Stress worksheet at the end of the chapter.



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## My Signs of Stress

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The purpose of this exercise is to look at your own personal signs of stress.

- What happens when you get stressed?

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- What do you notice?

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- How do you think and feel?

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- What do you do?

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- What bodily changes do you notice?

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### Goals

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- To begin appraisal skills training
- To learn how to break down complex stressors into manageable parts
- To learn more about adaptive coping

### Appraisal Skills

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Last week you were introduced to the concepts of appraisal and coping. This week you will learn how to effectively appraise stressful situations.

It is very important to identify exactly what is causing you to feel stressed. The first signs of stress are often emotional reactions and can include feelings of sadness, anger, fear, or anxiety. These emotions are normal as SCI causes a number of critical life changes and difficulties. They are the first signs that you could get stressed unless appropriate coping skills are employed. Whenever you feel these emotions, it should trigger you to search for the causes of stress—to appraise the situation.

### Breaking Down Complex Stressors

---

SCI is a complex stressor that has brought about major changes in your life. If you try to look at the injury as a whole, it can often seem too big and overwhelming to take it in at once. This is why it is important to break down your injury into the specific parts that cause you stress. In doing so, it is helpful to ask yourself the following questions:

1. Who is involved?
2. What is the situation/context?

3. Where are these situations likely to occur?
4. When did they last occur and are they likely to occur again?

If you notice, the question of “Why?” is not mentioned. The question of why can lead to speculation and not to the task at hand. It is best not to ask yourself, why me? Why now? Etc. “Why?” questions are not helpful.

The following example is an illustration of how to break down a complex stressor. Glenn is an SCI patient in the hospital. He sometimes needs assistance from the hospital staff, but oftentimes they ignore him.

Who is involved?	The staff on the ward.
What is the situation/context?	When I need some help with certain things, the staff claims they are too busy. They seem to make time for everyone else, however. I feel like they are ignoring me.
Where are these situations likely to occur?	On the ward mostly, when I need help with something.
When did they last occur?	This morning when I needed some help washing, and at dinner time when I needed assistance.
When are they likely to occur again?	It is most likely to happen in the morning and at mealtimes.

Breaking down global stressors helps you to identify coping strategies that will help you manage the situation effectively. The more detailed the description of the stressful situation, the easier it will be to establish the goals of coping and the more likely it is that the more appropriate strategy will be chosen. Getting a detailed concrete description makes it easier to start thinking about what needs to happen to cope better. It means you will be more able to make clear decisions about how to bring the situation back into your control and make it more manageable.

## Coping Realistically

---

Coping refers to what you can think or do in response to a stressor. Coping has two major functions:

1. To help you manage or alter the problems that are causing the stress
2. To help you deal with your emotional responses to the problem

As discussed earlier, in order to cope effectively, a detailed description of the stressful situation is needed. This makes it easier to establish goals of coping and leads to better decisions about how to cope. Emotional responses are fundamental. The way you respond emotionally to a stressful situation is very important and can influence both how you appraise the situation and your decision-making process. Part of understanding your emotional reactions to events is to consider what they represent for you. For example, do they represent loss or harm, a possible threat, or a challenge/opportunity for growth?

## Types of Coping

---

Coping is about what can be changed, either in the problem itself or in your reaction to it. There are two types of coping:

1. Problem-focused coping—managing or resolving the problems that are causing stress
2. Emotion-focused coping—changing emotional reactions to the problems

## Problem-Focused Coping

It is very important to identify and recognize exactly what aspects of a problem can be changed. It is helpful to ask the following questions:

1. What are the external aspects of this specific situation that can be changed?
2. What elements of the problem are amenable to change?
3. Is it possible to change or manage in a different way your behavior or your actions toward who, what, where, and when?

In the following example, problem-focused coping is applied to the case of Glenn, the patient who believed he was being ignored by the hospital staff.

What are the external aspects of this specific situation that can be changed?	The staff's behavior My behavior
What elements of the problem are amenable to change?	The staff could be more understanding I could change the way I ask for help I could change the way I react to not getting help
Is it possible to change or manage in a different way your behavior or your actions towards who, what, where, and when?	I will be more assertive with staff when I need help I will also arrange a time for them to see me in the morning and at dinner

## Emotion-Focused Coping

There are many occasions when it really is not possible to change external aspects of the problem. In these situations, you may need to accept certain losses. Think of some of the losses you have experienced due to your injury that cannot be changed (e.g., loss of mobility, loss of ability to participate in certain activities, or loss of friends who don't understand your disability). Certain situations may require an initial acceptance of things that cannot be changed but also require an attempt at reducing distress by changing emotional reactions to the situation. This can be done by changing approach, attitude, and thoughts, and by raising issues of acceptance. Thus, the emphasis is switched from problem-focused coping to emotion-focused coping.

There are a number of losses associated with SCI, including the loss of mobility and the inability to engage in certain activities that you used to enjoy. In order to progress, you must learn to accept these losses. It is important to note that acceptance is not about giving in to a loss but about accepting the reality of the loss so that you are able to refocus your energy on new goals.

## Adaptive Coping

---

As briefly discussed in Chapter 2, adaptive coping requires making an accurate appraisal of the stressor and then matching an appropriate coping strategy to that

appraisal. Remember, if your appraisal of the situation and the coping strategy you choose don't match up, coping will be ineffective. It is important that you are able to determine in which situations it is better to use problem-focused coping and in which, emotion-focused coping.

When elements of a problem *can* be changed, you should use problem-focused coping. This may include:

- problem solving
- active coping
- making decisions
- rehearsing solutions
- developing social and communication skills

In situations where change is *not* possible, you should use emotion-focused coping. This may include:

- relaxation
- changing the way you think about the problem/situation
- reevaluating the significance of an issue
- changing the meaning of something for yourself
- using humor

## Homework

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- ✎ Consider the stressors related to your injury and identify those that can be changed or altered and those that are unchangeable using the Changeability Chart at the end of the chapter.





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### Goals

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- To learn and practice the problem-solving method

### Problem Solving

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Problem solving involves deciding which aspects of a problem are changeable. This is accomplished through working out the specifics of the problem (the who, what, where, and when) and figuring out which ones can be changed. It is a logical step-by-step procedure for coming up with practical ways of solving problems. Problem solving is used after you have appraised a situation and established which aspects of the problem are changeable.

Problem solving involves the following steps:

1. Identify the problem—specifically describe the aspects of the problem to be addressed
2. Identify the consequences of the problem—work on addressing the new needs and new consequences that have resulted from the injury
3. Generate possible solutions—explore all solutions, regardless of how silly or outrageous some of them may seem
4. Choose the best solution—evaluate each solution’s advantages and disadvantages
5. Implement the solution—asking who, what, where, and when can be helpful here
6. Evaluate the success of the solution

Consider the following examples.

## Case Example 1

---

Mary is being ignored by the waiter in a restaurant

### Step 1: Identify the Problem

I am being ignored. My right to choose what I want is being denied. I am being treated as if I have no autonomy and as if I can't do anything. It's as if the waiter thinks I'm paralyzed in the head.

### Step 2: What are the Consequences of the Problem?

I won't get my best choice and I'm certainly not getting good service. I am being made to feel less valuable and unintelligent. There is also a danger that the waiter's views will be confirmed.

### Step 3: Generate Possible Solutions

I could be aggressive and tell the waiter to get a life. I could get upset. I could be submissive and just get by with it. Or, I could be assertive.

### Step 4: Choose the Best Solution

If I'm aggressive, I'll end up getting worse service and I'll spoil dinner for myself and everyone else. If I'm submissive, I'll end up losing my self-respect. But if I'm assertive, I can get my choice, maintain my self-respect, and the other person will learn something.

### Step 5: Determine to Implement the Solution

I will explain to the waiter that I would like to make my choices and will hold eye contact with him while I do this. I will act in control of the situation and will be polite without being submissive.

## Step 6: Evaluate Your Success

The waiter was a little rude at first and did not make eye contact with me, but after a while, he seemed to relax and was very friendly for the rest of the night. We all enjoyed dinner, and I felt as if I had done something to help change the waiter's views.

## Case Example 2

---

A person on the street is asked why he is in a wheelchair

### Step 1: Identify the Problem

This is an intrusion of my privacy. This person only thinks of me as a disabled person and is ignoring the rest of me.

### Step 2: What are the Consequences of the Problem?

I feel really disempowered and I also feel strange about being identified with a disability and not as myself.

### Step 3: Generate Possible Solutions

I could get angry and tell her that it's none of her business. I could ignore her completely. I could laugh it off and explain the cause of my injury. I could explain to her that she's being rude in asking this question and that I'm a person, not a disability.

### Step 4: Choose the Best Solution

I can't just block this out. I need to say something. If I get angry, I'll just make both of us upset. If I laugh it off then I'm being submissive and I'll disempower myself. But, if I explain to her that she's being rude and show her that I'm a person and not a disability, then I'll preserve my dignity and I'll be able to help her understand why she's being rude.

## Step 5: Determine to Implement the Solution

I will politely tell her that she asked me a very rude question and I will tell her that just because I am in a wheelchair it does not make me a disability. I will also explain that she should not ask people that question in the future.

## Step 6: Evaluate Your Success

She was really shocked and seemed quite offended that I should take offense at what she had just asked me. I needed to challenge her views and I am glad that I did. I just hope that she is more tactful if she meets a person with a disability in the future.

## Problem-Solving Scenarios

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The sections that follow list different problem scenarios that you may encounter as an individual with SCI. Use the Problem-Solving Worksheet at the end of the chapter to apply the problem-solving method to each of these situations. Additional copies of the worksheet are included in the appendix.

### Relationship Scenarios

- Your partner (wife, husband, boyfriend, girlfriend, etc.) seems nervous around you and afraid to touch you. What is going on? What do you do about it?
- Your partner (wife, husband, boyfriend, girlfriend, etc.) is visiting you in the hospital every night and neglecting all his or her other responsibilities and needs. You feel he or she should visit less. How do you handle this? What are some of the problems in this situation?
- Your family members are always trying to do everything for you. What do you do?
- What do you think you need to tell a future sex partner about your disability?
- Certain family members come to visit you every night and always leave you feeling lousy. How can you change this?

- Every time you mention sex, your partner seems nervous and changes the subject. What is happening?
- You have been dating someone for a while and wish to become sexually involved. How do you handle this situation?
- Your partner says he or she doesn't mind that you're in a wheelchair, but he or she doesn't kiss you goodnight when leaving. What's going on?
- A friend has invited you to a party and you are enjoying yourself there. Halfway through the party, you have a bladder accident. How do you feel? What do you do?
- You are single/unattached but are afraid of how others will react to you being in a wheelchair. How do you deal with this?
- You made holiday plans prior to your injury. Now you are at the treatment center and your partner/spouse wants to go without you. What do you do?
- You are out with your friends and all they talk about is sports and the activities they are involved in. How does this make you feel? What do you do?
- One of your best friends calls and keeps promising to visit, but then he or she always has an excuse at the last minute. What's happening? What do you do?
- Your friends and family keep saying, "Work harder in physical therapy and you'll get better." What do you say or do?

### **Wheelchair-Access Situations**

- You register for a class at the local university and the day you arrive you find out that the class has been moved to the second floor. There is no elevator. What do you do?
- You've gone to the movies with a friend (you've checked ahead of time that the theater is wheelchair accessible), but when you arrive, the manager insists that you sit at the very back beside the fire exit. How do you feel? What do you do?
- The store that you want to go into has a steep curb in front of it. What do you do?

- It's raining outside and you're at home. You need milk and other important items. What do you do?
- You are going for a job interview. You arrive at the company building and there is a flight of steps in front of you. What do you do?
- You go to see a movie and the usher at the theater tells you that no wheelchairs are allowed inside. What do you do?
- Your friends are having a party in a third-floor walk-up apartment in a building without elevators. What do you do when you receive the invitation?

### **Others' Reactions to Your Disability**

- You are at a party and have met three new people. All have asked you why you are in a wheelchair. How do you answer them? How do you feel?
- You are sitting in the kitchen with your brother discussing what to buy for your mother's birthday. You ask him for a ride to the mall, but he insists on buying the present for you. What do you do?
- You are with a friend at a restaurant. The waiter asks your friend what *you* would like to eat. What do you do?
- You're putting the wheelchair into the car and a passerby insists on helping. What do you do?
- You are waiting in line at the bank and someone cuts in front of you. What do you do?
- You are out shopping and a person on the street is staring at you. What do you do?
- You are out when a small child runs up to you and asks, "What's wrong with you?" How do you respond?
- The child's mother runs up and drags the child away. What do you do now?
- You are seated at a table in a restaurant. After 20 min, no one has come to take your order. What do you do?

- You are confronted by three people on the street who try to rob you. What do you do?
- You come to an intersection in your wheelchair and a pedestrian grabs your chair to push you across the street. How do you react?
- Your employer comes to visit you in the hospital and “hints” at the possibility that you may not get your job back. What do you do?

## Homework

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-  Use the problem-solving method and the Problem-Solving Worksheet (additional copies can be found in the appendix) to work through as many sample scenarios as you can.
-  Be sure to note which aspects of each particular problem are changeable and which ones aren't.



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## Problem-Solving Worksheet

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1. Identify the problem: \_\_\_\_\_

2. List the consequences of the problem:

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3. Generate possible solutions:

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4. Evaluate each solution:

Pros

Cons

_____	_____
_____	_____
_____	_____
_____	_____

5. Choose the best solution: \_\_\_\_\_

6. Evaluate the success of the solution:

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## Goals

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- To review the cognitive model of emotions
- To learn about pleasant activity scheduling and how to use it as a way to combat negative thoughts
- To practice autohypnotic relaxation

## Emotional Reactions

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SCI can bring about many emotions. Most people have a very normal emotional response to an SCI. They may feel depressed because of the losses they have experienced, feel anxious because of their fears and doubts about the future, or may feel angry and experience a sense of injustice. These emotions are likely familiar to you and you have probably experienced them yourself.

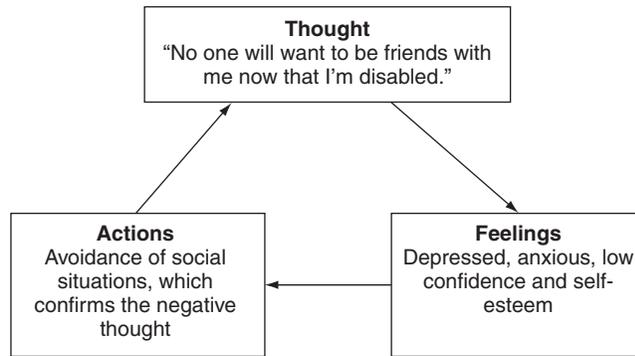
Some of the emotions you are experiencing may be very new to you. They may also be very intense. Strong emotions are not a problem unless they are managed improperly.

## Cognitive Model of Emotions

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When people feel depressed, they often have negative thoughts about themselves or the world in general. These thoughts lead to increased feelings of depression and further increase negative thoughts. This is called a “negative spiral” and is illustrated in Figure 5.1.

Emotions don’t just come out of the blue. They tend to be triggered by what we are thinking and what assumptions we make about ourselves, the world, and relationships. For example, if you are feeling vulnerable, you may be having gloomy or sad thoughts. These negative thoughts can make you feel even more vulnerable, creating a negative spiral.



**Figure 5.1**  
Negative Spiral of Thoughts, Feelings, and Actions

One of the major problems with this scenario is that people often focus on the emotions and not the negative thoughts. This chapter describes two ways of managing strong emotions that can lead to negative, unhelpful thoughts.

## Pleasant Activities

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When you are feeling low and depressed, you are less motivated to do things, especially pleasurable and interesting things. Reengaging in activities that bring pleasure is a good way to manage emotions. The less you get involved in pleasurable activities, the more you get caught up in negative thoughts and emotions and the more likely you are to remain depressed. However, knowing that there is a negative relationship between pleasant activities and depression gives you access to a powerful tool to control your mood. It is important to balance out unpleasant activities with pleasant ones.

There are three types of pleasant activities.

1. Pleasant social activities—dining out, sightseeing, visiting cultural attractions, going to the movies, etc.
2. Competency activities (activities in which a goal is achieved, leading to a sense of competency)—putting together a jigsaw puzzle, solving a crossword, learning to speak a foreign language, playing a musical instrument, etc.
3. Activities that are incompatible with emotional distress—going to the spa, playing with a pet, meditating, hearing and telling jokes, etc.

Engaging in pleasant activities may be especially hard when you are feeling down and like you can no longer do enjoyable things. The following three steps will help you plan and introduce pleasant activities into your life.

1. Decide what, when, how, and with whom
2. Set realistic goals
3. Commit yourself to doing it—and do it!

## Scheduling Pleasant Activities

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People are not born with certain interests; instead, interests develop through experiencing activities and developing competence. It is important to recognize how pleasant activities can impact how you feel and to develop a plan for increasing the number of pleasant activities in your life.

A simple yet effective way of scheduling activities is to generate a list of pleasant activities through brainstorming. Think of activities that you enjoy and that you are capable of doing, and record your ideas on the blank pleasant events schedule on the next page. Some examples of pleasant events you may wish to include on your list are shown in Table 5.1. Although some of the activities listed may be difficult for people with higher spinal cord injuries, most are accessible regardless of the level of injury.

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**Table 5.1 Sample Pleasant Events Schedule**

Going to a rock concert	Planning trips or holidays	Taking a cooking class
Doing art work	Going to a sporting event	Going to the races (car, boat, horse, etc.)
Breathing clean air	Writing or arranging a song	Setting goals
Thinking about something good in the future	Playing cards	Laughing
Solving a puzzle, crossword, word jumble, etc.	Having lunch with friends	Playing with pets
Learning a foreign language	Spending time with family	Taking a bubble bath
Playing a board game	Reading a book	Wearing a new outfit
Sitting in the sun	Playing videogames	Meeting friends for a drink
Discussing religion or philosophy	Listening to the sounds of nature	Listening to the radio
Getting a massage	Writing letters or cards	Hearing and telling jokes
Lifting weights	Doing woodwork	Playing a musical instrument
Playing darts	Keeping a journal	Knitting, sewing, crocheting, etc.
Talking on the telephone	Going to a museum or exhibition	Going to the movies
Meditating	Reading magazines or newspapers	Going to the library
Going shopping	Attending a play, opera, ballet, or concert	Traveling

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## Relaxation Training

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Relaxation is a skill that can be of benefit in a number of situations. Relaxation is particularly important when you are feeling stressed or anxious or when you are experiencing physical pain. There are many different things you can do to relax, many of which have been discussed throughout this workbook. Autohypnotic relaxation provides a structured way to help you learn to relax your body and mind. It is a simple technique but does require practice in order to master. The more you practice, the easier it will become.

Before you begin relaxation, get yourself as settled and as comfortable as you can. Then, read the script that follows. You may wish to tape-record yourself reading the script aloud so that you can play it back any time you wish to practice the technique.

### Autohypnotic Relaxation Script

*To start this relaxation process, concentrate first on your breathing. Breathe slowly in . . . and slowly out. Deeply in . . . and deeply out. Not too vigorously, just deeply, gently breathe in . . . and out. The more you continue practicing this breathing, the more tension and discomfort you will breathe out. Concentrate on the feelings of relaxation and begin to allow yourself to let go, to relax. Notice how your body is slowly becoming very heavy and very comfortable.*

*Now, fix your gaze on a spot in front of you. Try to find a spot on the wall or on the ceiling that you can concentrate on. Fix your eyes on that spot—concentrate—look at the spot. Try to resist blinking and imagine your eyes are connected by an imaginary line to the spot. Concentrate on the spot for a short while.*

*Meanwhile, continue to slowly breathe in . . . and slowly breathe out. Notice how comfortable it can be by allowing yourself to become more relaxed. Just allow yourself to become more relaxed. Concentrate on the spot and try to resist blinking. Notice that your eyes are becoming tired and a little heavier. Try to resist the temptation to blink. Breathe slowly in, and visualize your lungs filling with air and the air leaving your lungs totally when you breathe out.*

*You are beginning to regulate your breathing. Keep concentrating on the spot . . . your eyes are becoming very heavy and you are finding it difficult to keep them open. The spot is becoming hazier and you feel your eyes and your body becoming heavier. Now it is very difficult to keep your eyes open. Again, try to concentrate, try to resist blinking, but allow yourself to fall into a deeper state of relaxation. Your eyes are*

*becoming very tired and very heavy. Imagine your lungs filling with air as you breathe in and the air leaving your lungs totally as you breathe out.*

*Close your eyes now and notice that feeling of heaviness. Your eyelids feel very heavy, and the heavier they become, the more relaxed you feel. Feel the relief in your eyes and encourage that relief and relaxation to spread from your eyes to the rest of your body. Continue to allow the feelings of heaviness and relaxation to spread, and allow yourself to fall into a deep level of relaxation and comfort, falling deeper and deeper through the three stages of comfort and relaxation.*

*In the first stage, let your body relax. Think of your hands . . . now think of relaxing them, letting go. Think of your arms . . . relax them . . . let go. Allow them to become heavy. Now think of your shoulders . . . relax them . . . let go and relax. Now think of your feet . . . think about what they look like and think about them becoming relaxed by letting go of any tension and anxiety. Think of your legs, think of your lower legs, think of your thighs . . . let go . . . and relax. Breathe slowly in . . . and slowly out. Now think of your back, the lower back, the abdomen . . . and relax, let go, relax deeply. Again, remember to breathe slowly in . . . and slowly out. Think of the muscles in your upper back, your chest . . . relax . . . let go, breathing slowly in . . . and slowly out. Now, move on to the muscles around your neck. Think about them becoming very relaxed as you let go, more comfortable, your body becoming heavier. You are still breathing slowly in . . . and slowly out. Now think of the muscles in your head and on your face . . . now let go, and allow yourself to fall into a very deep state of relaxation.*

*Now you are passing through the first stage of relaxation. Discomfort and tension in your body fall away and you fall into a very deep state of relaxation. This relaxation enables your body to become very relaxed. You are becoming very heavy, sinking deeper and deeper into a comfortable state. Try not to resist these feelings, just allow them to happen.*

*Your body has become very relaxed and comfortable as you have completed the first stage.*

*If you have any discomfort, try and visualize this discomfort as a block of ice in a very warm room; the ice very slowly melts. At first you can't see it melting, but gradually the ice and the discomfort slowly fade away. Although you can't see the ice melting, you don't try to resist it and you allow yourself to fall deeper and deeper into the second stage of relaxation.*

*In the second stage, think of your mind being relaxed. Think of letting go of any concerns or worries, things that are pushing themselves into your mind, thoughts that*

*you feel need attention. Let go of them and concentrate on being relaxed. Your body is relaxed, your body has become relaxed, and your body is becoming even more relaxed.*

*Now, allow yourself to become relaxed in your thoughts. Your body is relaxed, and your body is becoming even more relaxed. Concentrate on becoming more relaxed in your mind. If you have any concerns, just allow these concerns to become very light and allow them to float away. Put them to the side. You can come back to them, but now you have to let them go and relax. Imagine your mind becoming bigger and bigger, and this allows you to let go of any anxiety, worries, or concerns. Concentrate on the word “relaxation,” what it means, then allow yourself to move through the second stage of relaxation.*

*Visualize yourself entering the third and final stage of relaxation. In this third stage, you are bringing your body and your mind together; bringing them together both very comfortable and very relaxed. You are comfortable. You have let go of your physical discomfort. You have let go of the physical tension. You have let go of the worries and concerns in your mind. You are going to allow yourself to fall deeper and deeper into a state of comfort and relaxation—breathing slowly in . . . and slowly out. Your body has become very heavy and your mind is becoming very clear. Let go of them together—mind and body.*

*Just concentrate on your breathing now, and this time when you breathe out, you are breathing out more of this discomfort, becoming more settled, much heavier, and just notice the sensation of becoming a little bit warmer, very slowly at first, but you are becoming warmer.*

*Now allow yourself to settle in this relaxed, comfortable, and heavy state. Your mind is clear and your body is heavy. Just allow yourself to enjoy these feelings, breathing slowly in . . . and slowly out. Imagine the tension continuing to drain from your body as you breathe out. Breathe in through your nose . . . and out through your mouth.*

*Establish yourself now on this pleasant pattern of breathing.*

*Use the clearness that is in your mind at the moment. Your body and mind together have moved you through the third stage. Your mind is clear, you have let go of the discomfort, of the tension and concerns. If they come through, just put them away, put them to the side, think of the clearness in your mind and how relaxed you have become.*

*Imagine yourself now . . . just imagine yourself moving into a different place. In your mind’s eye imagine feeling very warm. Imagine going down a long passage into somewhere that is very safe. Just imagine yourself in a garden, the sun shining, and a*

*gentle breeze. Just visualize being there. It doesn't matter how you feel, it doesn't matter what state you are in. Just imagine being there, with the sun shining and a gentle breeze.*

*There is a small wall around this garden. Inside this wall you are content and comfortable. Outside the wall . . . is outside the wall, and you want to let go of this for the moment. So just allow yourself to settle, comfortable and relaxed. Think through times when you were very content and happy. Just allow yourself to move through these thoughts, feelings, and places. You are now safe, settled, and relaxed. Imagine times when you were very content. Wander through these images, through these thoughts, and experience those feelings.*

*Just allow your mind to do this for a few moments.*

*Think of feelings of warmth, comfort, safeness, and heaviness.*

*Enjoy the feelings of relaxation.*

*Remember that you have created this relaxation, and the more you practice, the deeper, more comfortable, and more relaxed you will become.*

*Now, think of becoming a little bit more alert. Hold on to the relaxation. Hold on to that feeling. Hold on to the sense of safeness. Imagine yourself now moving through the stages. You remain comfortable and relaxed, but a little bit more alert. When you become alert, you will think clearer, you will be relaxed and you will feel relaxed.*

*Move from the third stage through to the second stage. Again, you're comfortable, relaxed, and becoming more alert. Your mind is taking control again. Your mind is becoming clearer. You are becoming more awake.*

*Move into the second stage; your eyes slowly opening, becoming more awake, more alert.*

*Now into the first stage; you're becoming fully awake and fully alert. You have held onto the feelings of relaxation and comfort. You are fully awake and fully alert.*

## Homework

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-  Choose three pleasant activities from your Pleasant Event Schedule and engage in them over the next week.
-  Begin practicing autohypnotic relaxation.



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### Goals

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- To define negative automatic thoughts and review common thinking errors
- To learn the steps for challenging negative thoughts

### Negative Beliefs and Expectations

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Thoughts are very powerful in influencing mood and behavior. We all have some negative beliefs about ourselves and the world that lead us to the conclusion that a situation is hopeless, when in fact we could do something about it. These beliefs generate negative thoughts which influence our emotional reactions to events, often to a greater extent than the event itself.

Although most people do not view their negative thoughts as being unrealistic, these thoughts often contain what are called “thinking errors.” The following is a list of some of the most common thinking errors people experience.

*Overgeneralization.* Taking one unfortunate situation and drawing sweeping, generalized conclusions from it.

Example: “My mother couldn’t visit me today. She can’t deal with seeing me in a wheelchair.”

*Discounting the positive.* Ignoring positive aspects and focusing only on the negative.

Example: “My physical therapist says I am making progress, but I still can’t walk, so what does it matter?”

*Black-and-white thinking.* Thinking of things in absolute terms, like “always,” “every,” or “never”.

Example: “I will never be able to work again.”

*Catastrophizing.* Predicting the future negatively without considering other, more likely, outcomes.

Example: “I won’t be able to run my house or take care of my children. My husband/wife will leave me and my kids will resent me, and my life will fall apart.”

*Personalization.* Holding yourself personally responsible for an event that is not entirely under your control.

Example: “If I hadn’t gone shopping that day, I wouldn’t have gotten in the accident and I wouldn’t be in a wheelchair.”

*Jumping to conclusions.* Assuming something negative where there is actually no evidence to support it. Two specific subtypes are also identified:

- *Mind reading*—Assuming the intentions of others. Arbitrarily concluding that someone is reacting negatively to you.  
Example: “My partner went to bed early. He no longer finds me attractive because I’m in a wheelchair.”
- *Fortune telling*—Predicting future events will turn out badly despite the lack of evidence to support this.  
Example: “My friends won’t invite me to their annual house party now that I’m disabled.”

*Emotional reasoning.* Assessing a situation solely in emotional terms.

Example: “My parents are desperate for me to walk again. I’m letting them down.”

*Shoulds, musts, and oughts.* Expecting that yourself or others should, must, or ought to be a certain way.

Example: “My friend should understand what I’m going through.”

Negative, unhelpful thoughts can lower a person’s mood. They can make you feel depressed, scared, and demoralized. This in turn affects your actions, which can further confirm the negative thoughts. This creates the negative spiral described in Chapter 5. Consider the following example:

Kevin feels that no one wants to be friends with him since his injury

Thought: “I didn’t speak to people with disabilities before the injury, why will people want to be friends with me now?”

Feelings: Low confidence, worthlessness, depression, anxiety in social situations

Actions: Avoidance of social situations, which confirms the negative thought

## Changing Negative Thoughts

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The first step in changing negative thoughts is to learn to discriminate between realistic and irrational thinking. This is not simply an issue of thinking positively, but looking at how irrational thinking can be replaced by more realistic thinking.

To recognize unhelpful and negative thoughts, you need to deliberately think about what your thoughts are and look for what keeps these thoughts going. One way to identify your negative thoughts is to notice the next time you feel low or scared and try to catch the thoughts that go through your head. Once you identify the thoughts, you can begin to challenge them.

The first step in challenging your negative thoughts is to ask yourself, what is the evidence that the thoughts are true? Then, explore the evidence for and against your thoughts. Ask yourself, am I making thinking errors? Would others accept these thoughts as true? Finally, come up with alternative, more rational thoughts. Ask yourself, what advice would I give to a friend who was having these types of thoughts? What explanation would be most helpful?

Review the following list of SCI-related negative, automatic thoughts. Consider each example and identify the common thinking errors represented. Then, follow the steps just described and use the Thought Record at the end of the chapter to replace the negative thoughts with more realistic ones. Additional copies of the Thought Record are included in the appendix.

- “I won’t be able to run the house now. I can’t do anything.”
- “My partner won’t be able to cope with me being a burden. He will leave me.”
- “I used to be a professional athlete. I’ve never had another job. I’ll never be able to work again.”
- “No one will want to be with me now that I’m disabled.”
- “I’ll never be able to look after myself. What’s the point in carrying on?”
- “My hands don’t work, my legs don’t work, nothing works. I’m useless.”

- “I can’t look after my kids if I’m in a wheelchair.”
- “With my level of injury, I’m always going to have to rely on other people, so what’s the point of rehab? I may as well give up.”
- “I’m not progressing fast enough with my rehab.”
- “No one will find me attractive now.”

## Homework

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- ✎ Think about the relationship between strong emotions and thinking. When you experience strong emotions, use the Thought Record to identify the thoughts that accompany them and then replace them with more rational thoughts.
- ✎ Continue practicing autohypnotic relaxation and engaging in pleasurable activities.



## Thought Record

Use the following form to challenge your negative thoughts. Identify your thoughts in the first column and rate the intensity of your mood on a scale of 0–100. Use the remaining columns to list the evidence for and the evidence against the thought. Then, generate an alternative, rational thought and rerate your mood. See the first row for an example.

Thought	Mood and Mood Intensity Rating	Evidence For Thought	Evidence Against Thought	Alternative Thought	Mood and Mood Intensity Rating
My life is over now that I'm in a wheelchair.	Hopeless (95)	I am paralyzed and can't do anything that I enjoy. I always need someone to help me. I can't fend for myself.	Well, last weekend I did play catch with my kids at the park. I even went to the corner market on my own to pick up a few groceries.	I may be paralyzed, but that doesn't mean I can't participate in fun activities and live a full life.	Hopeful (75)

### Goals

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- To review general information about stress, appraisal, and coping
- To revisit coping strategies
- To learn more about maladaptive coping

### Review of Stress, Appraisal, and Coping

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This chapter serves as a summary of the main themes the group has covered thus far. As discussed early on in the program, stress is a normal response to pressure and the demands of life. Normal levels of stress are manageable, but when stress is elevated, it becomes harder to handle. The first step in coping with stress is appraisal.

Appraisal is the process of analyzing a stressful situation and evaluating whether it represents a threat or a challenge. This can be accomplished by breaking down the situation into its main components—namely, the who, the what, the where, and the when. This helps you determine your coping strategy. Refer back to Chapter 3 for more details.

Coping is the process of using available resources and skills to manage the stressful situation. Remember, you can either change the situation itself or your reaction to it. Depending on what can be changed, you will either use problem-focused coping or emotion-focused coping. Refer back to Chapter 3 for a review of these two types of coping. Also, review information on adaptive coping, which is when your analysis of the situation and the coping strategy you choose to use in that situation complement each other, resulting in a decreased level of stress and a feeling of being in control. Maladaptive coping has the opposite outcome and is discussed in more detail later in the chapter.

## Review of Coping Strategies

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Some coping skills that are helpful that have been discussed in previous chapters include problem solving (useful for those stressful situations that are amenable to change) and relaxation and engaging in pleasurable activities (useful for those stressful situations that are more resistant to change).

Coping is a constantly changing process, and at certain times, some strategies work better than others. This is why you need to practice a range of coping strategies. The following additional strategies can also help you cope with stress:

- Acceptance—accepting that you have a SCI and the consequences it brings to your lifestyle
- Positive reframing—looking at new ways of learning from the experience
- Active thinking and planning—figuring out the best ways to deal with certain situations
- Humor—laughing and joking in order to deal with life’s frustrations
- Prioritizing—focusing your resources on the issues that really matter to you at the moment
- Confrontation—confronting stressful situations and using problem solving
- Social support—seeking and receiving support from others

Remember, appraisal is the key to choosing the appropriate coping strategy for a particular stressful situation. If the situation changes, you may need to choose a new coping strategy. Changes may occur because of the emergence of new information, the occurrence of new events, or a shift in your beliefs or perceptions. When a change occurs, the situation needs to be reevaluated and a new coping strategy chosen.

## Maladaptive Coping

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There are many different ways to respond to stress. During the program, your group has learned about and discussed some of the more effective strategies associated with stress management. These adaptive coping strategies are your best bet for managing stressful situations. However, at times, you may find yourself

using a maladaptive coping strategy to deal with stress. As previously mentioned, maladaptive coping is when your appraisal of the situation and the coping strategy you choose do not match up. Engaging in maladaptive strategies will result in poorly controlled stress and feeling more out of control. If you use a maladaptive coping strategy, it is almost a sure bet that the situation will not improve.

Come up with some examples of unhelpful coping strategies that are likely to lead to increased levels of stress. Add your examples to the following list.

- Doing nothing about the problem
- Avoiding thinking about your injury and what it means to you
- Denying that you have an injury and not doing the things you need to do (e.g., physical therapy)
- Expressing extreme emotion (e.g., constantly talking about how bad you feel)
- Thinking about using drugs or alcohol
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

## Homework

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-  Think about the coping strategies you generally use and consider whether they are adaptive or maladaptive.
-  Pick one adaptive strategy to continue to use and one maladaptive strategy to discontinue.
-  Continue practicing autohypnotic relaxation and engaging in pleasurable activities.



### Goals

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- To discuss social skills and ways to deal with people without a disability
- To realize the importance of being assertive
- To discuss social support
- To look toward the future

### Social Skills

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As a person with an SCI, you need to learn how to deal with people without a disability. They may have problems understanding what an SCI means and be unsure of how to relate to you. It is important that when you are faced with such people, you are able to deal with the ignorant views they may have and help to educate them.

There are three common ways of managing various situations in which you find yourself interacting with people who are not disabled. These are discussed in the following sections.

### Aggression

When people behave aggressively it gives the message that others matter less than they do. Aggressive behavior is defined as being prepared to harm others and being frequently rude, abusive, and sarcastic. Although people who behave aggressively might get what they want in the short term, persistent aggressive behavior can result in hostile reactions from others, social exclusion, and reprisal.

### Submission

When people make submissive responses, they give the message that they do not matter or that other people's needs are more important than theirs are. Submissive

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behavior is defined as requiring the repression of feelings. Being submissive may help you to avoid conflict, but it can also end up making you feel bad because you did not stand up for yourself or the things that you want.

## Assertion

Someone who is being assertive communicates self-respect and a wish to have their own needs met, whilst according equal status to others. Assertive behavior is defined as a person's ability to express how he feels and what he wants, as well as acknowledging that his own rights are as important as anybody else's.

Review the following situations and come up with examples of aggressive, submissive, and assertive ways of dealing with them. Think through three different types of responses for each scenario and record them in the spaces provided.

Situation	Aggressive Response	Submissive Response	Assertive Response
You are putting your wheelchair into your car and managing okay, but a passerby insists on helping.			
The person who helps you (spouse/partner, friend, family member, etc.) keeps doing things that you are capable of doing yourself.			
Your mother and her friend come to visit you. Rather than asking you, your mother's friend says to your mother, "Do you think he wants a drink?"			

## Assertive Rights

It is important, as an individual with an SCI, that you learn to be assertive, especially when dealing with ignorant or biased individuals. Assertiveness can be confused with aggression, so it is important that you understand the key

difference between the two. Assertiveness does not violate the rights of others. It is about finding a situation in which all parties win.

Assertiveness involves

- Developing the ability to express thoughts and feelings honestly
- Being open to taking risks
- Showing respect
- Being sensitive to others
- Being responsible for one's own behavior

It is also important that you understand your assertive rights.

You have a right to

- Be independent
- Change your mind
- Say you don't know
- Say you don't understand
- Say you don't care
- Make mistakes
- Express anger
- Have an opinion that is different from others

Refer back to the two examples of how to be assertive given in Chapter 4. By asserting their own rights and needs, each individual in the examples was able to achieve what he wanted from the situation.

## **The Importance of Social Support in Coping**

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Most people need social support, and having and maintaining good, supportive relationships is helpful in managing your adjustment and coping with the future. We often take social support for granted and think of it as something that is either there or not. We need to learn how to choose and get the right kind of support and look after the support that we have.

## Types of Social Support

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There are different types of social support that serve different functions. There is practical support, which takes the form of information and advice from a variety of people, including your doctors, the other members of your group, etc. There is also emotional support that comes from the people with whom you are very close, like your friends and family.

The appraisal process will help you understand the type of social support that will be helpful in any given situation. Once you have identified the type of social support that you require in a particular situation, you will be able to identify the people in your social support network who are able to provide it.

## Obtaining Social Support

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It is important to inform the people in your lives of the type of support that you require from them. You must also allow the support giver the opportunity to say no. This may not be a personal rejection but a statement of their inability to respond to the demand. This can be helped by making clear your request by specifying the extent and duration of support required.

For example, there may come a time when you need to ask a friend to take you shopping the next time he goes. It may be important to let your friend know that you only need him to take you shopping this one time because your spouse, who normally takes you, has his car in for repair.

## Maintaining Social Support

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Support is an exhaustible resource, and if it is not taken care of or used wisely, it can become less helpful or disappear entirely. You should **always** acknowledge the help and support you receive from others. Also, it is important to recognize that the people who support you may need support themselves at times.

## The Future

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Now that the program is ending, we'd like you to take some time to think about the things you have learned. It is hoped that the skills you've acquired in this

course will increase your ability to cope and manage your life in the future. The next tasks for you are to develop new life goals, continue working on those goals you've already established, and plan for your future.

This program highlighted some of the coping skills that will help you maintain your psychological health. Research indicates that people with SCI can obtain a level of life satisfaction at least as high as, if not greater than, their life satisfaction before the injury. We hope that as a result of participating in this program, you will be more aware of your stress and the techniques you can use to manage it, informed about helpful coping strategies, able to identify and reduce coping strategies that don't help, and able to deal with the consequences of your SCI and look to the future with optimism.

If you find yourself feeling down at some point in the future, refer back to the skills you have learned and practice them. The more you use these skills, the more effective you will become at managing any difficulties that may arise.



# Appendix of Forms

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## Problem-Solving Worksheet

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1. Identify the problem: \_\_\_\_\_

2. List the consequences of the problem:

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3. Generate possible solutions:

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---

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---

4. Evaluate each solution:

Pros

Cons

_____	_____
_____	_____
_____	_____
_____	_____

5. Choose the best solution: \_\_\_\_\_

6. Evaluate the success of the solution:

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## Problem-Solving Worksheet

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1. Identify the problem: \_\_\_\_\_

2. List the consequences of the problem:

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3. Generate possible solutions:

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4. Evaluate each solution:

Pros

Cons

_____	_____
_____	_____
_____	_____
_____	_____

5. Choose the best solution: \_\_\_\_\_

6. Evaluate the success of the solution:

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## Problem-Solving Worksheet

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1. Identify the problem: \_\_\_\_\_

2. List the consequences of the problem:

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3. Generate possible solutions:

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4. Evaluate each solution:

Pros

Cons

_____	_____
_____	_____
_____	_____
_____	_____

5. Choose the best solution: \_\_\_\_\_

6. Evaluate the success of the solution:

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## Problem-Solving Worksheet

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1. Identify the problem: \_\_\_\_\_

2. List the consequences of the problem:

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3. Generate possible solutions:

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4. Evaluate each solution:

Pros

Cons

_____	_____
_____	_____
_____	_____
_____	_____

5. Choose the best solution: \_\_\_\_\_

6. Evaluate the success of the solution:

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## Problem-Solving Worksheet

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2. List the consequences of the problem:

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3. Generate possible solutions:

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4. Evaluate each solution:

Pros

Cons

_____	_____
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## Thought Record

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Use the following form to challenge your negative thoughts. Identify your thoughts in the first column and rate the intensity of your mood on a scale of 0–100. Use the remaining columns to list the evidence for and the evidence against the thought. Then, generate an alternative, rational thought and re-rate your mood.

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