

WELCOME TO WEEK 8 OF SIMPLE

Introducing the third tool: holes or chain analysis

The physiological distress tolerance skills



week 1- orientation and overview- sessions 1 and 2 of simple manual.

week 2- introducing distress tolerance-p. 1-13 of dbt workbook and crisis plans-session 3 of the manual.

week 3- the theoretical foundations of the simple course. session 4, 6, and 8 of the manual.

week 4- distress tolerance p. 14-32 of dbt workbook. suicide prevention session 5 of the manual. our first practice- crisis plans.

week 5- distress tolerance p. 33-46 of dbt workbook. introducing holes diary cards- session 7 of manual.

week 6- distress tolerance p. 47-68 of dbt workbook. finding your diary card targets- session 9 of manual. our second practice- holes diary cards.

week 7- introducing personality- session 10 of manual.

week 8- distress tolerance p. 69-90 of dbt workbook. introducing holes (chain) analysis-session 11 of manual.

week 9- what shapes personality-session 12 of manual.

week 10-introducing mindfulness skills p.90-109 of dbt workbook. advanced chain analysis- session 13 of manual. our third practice-chain analysis.

week 11- attachment theory- session 14 of manual.

week 12- mindfulness skills p. 110-131 of dbt workbook. introducing rational mind remediation-session 15 of manual.

week 13- the dynamic-maturational model of attachment and adaptation- session 16 of manual.

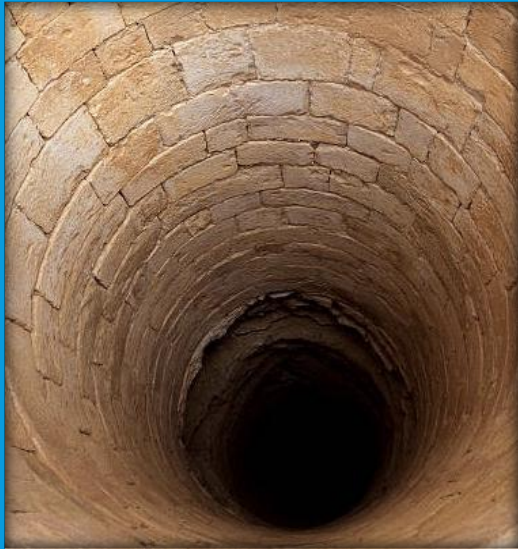
week 14-mindfulness skills p. 131-147 of dbt workbook. reviewing all the tools-session 17 of manual. our fourth practice-rational mind remediation.

week 15-stress-session 18 of manual.

week 16- what makes life worth living?. Introducing the goals diary card procedure-session 19 of manual.



Crisis plans holes



Holes diary cards steps



Use crisis plan tool and distress tolerance skills to get out of holes



Diary card toolbelt



Today the holes (chain) analysis magnifying glass



- In the crisis plans and when trying to find targets for our holes diary cards, we already explored some features of the holes we repeatedly fall into.
- Today we'll discuss how holes (chain) analysis deepen the exploration of the features of our holes by looking at them under a magnifying glass.
- An in-depth knowledge of the thoughts feelings and behaviors that make up our holes will eventually help us understand where the holes came from and will be a critical part of getting out of them faster and eventually avoiding them.



I walk down the same Street.
There is a deep hole in the sidewalk.
I see it is there.
I still fall in. It's a habit.
My eyes are open.
I know where I am.
It is my fault. I get out immediately. (using my tools,
skills and strategies)

I walk down the street.
There is a deep hole in the sidewalk.
I fall in.
I am lost... I am helpless.
It isn't my fault.
It takes forever to find a way out. (But I start
using holes diary cards and holes analysis)

I walk down the same Street.
There is a deep hole in the sidewalk.
I pretend I don't see it.
I fall in again.
I can't believe I am in the same place.
But it isn't my fault.
It still takes me a long time to get out.



I walk down the same Street.
There is a deep hole in the sidewalk.
I walk around it. (using my wise mind)

I walk down another Street."

WARNING ABOUT MEDITATION

FEEL FREE TO SKIP IT. FOLLOWED BY A MOMENT OF SILENCE



CHECK IN REGULARLY WITH YOUR PERSONAL DASHBOARD

CRISIS RISK



WINDOW OF TOLERANCE



ENERGY RESERVES



RATING MY TARGETS

[illegible]

Spend a few moments checking in with yourself by asking:

- 1) What is the current risk that I'll experience a state of crisis ?
a) Low b) Moderate c) high d) very high e) extreme
- 2) Am I in the window of tolerance?
a) Yes b) I'm a little outside c) very outside
- 3) Where is my energy tank right now?
a) Full b) $\frac{3}{4}$ c) $\frac{1}{2}$ d) near empty
- 4) Have I been tracking my targets using the holes diary card ? how would I rate my targets right now?

5-MINUTE PROGRESSIVE MUSCLE RELAXATION SCRIPT

Begin by inviting everyone to settle.

“Take a comfortable seat, or lie back if you prefer.

Let your hands rest loosely.

If you’re comfortable, allow your eyes to close.

Take a slow breath in... and an easy breath out.”

1. Start With the Breath (30 seconds)

“Let’s begin by noticing the breath.

A gentle inhale through the nose...

and a slow, relaxed exhale through the mouth.

Imagine the breath softening your whole body from the inside.”

2. Hands and Arms (45 seconds)

“Now form a gentle fist with both hands.

Not too tight—just enough to feel the muscles activate.

Hold that tension... for 3... 2... 1...

and release.

Let your fingers relax, let your forearms soften.

Again—gently tighten the muscles in your arms,
as if you're slowly bending your elbows or bringing your hands toward your shoulders.
Hold... 3... 2... 1...
and release.
Let the arms grow heavier and looser.”

3. Shoulders and Neck (45 seconds)

“Now lift your shoulders slightly toward your ears—
just a small movement.
Feel the tension...
Hold... 3... 2... 1...
and let them drop and sink.

Next, lightly press your shoulder blades together,
as though opening the chest just a little.
Hold that mild tension... 3... 2... 1...
and release.
Let the whole upper body soften.”

4. Face and Jaw (45 seconds)

“Bring your attention to your face.

Gently scrunch the muscles around your eyes and forehead—
a light squeeze.

Hold... 3... 2... 1...

and release. Feel the smoothness return.

Now softly clench your jaw—just enough to notice.

Hold... 3... 2... 1...

and release.

Let your tongue rest wherever it wants.

Let the whole face loosen.”

5. Chest and Stomach (45 seconds)

“Take a slightly deeper breath in,

and gently tighten the muscles in your chest and stomach—
not forcing the breath, just a mild activation.

Hold... 3... 2... 1...

and exhale, letting the torso soften and settle.

Notice the warmth spreading as the muscles relax.”

6. Legs and Feet (45 seconds)

“Now gently tighten your thighs—just a small squeeze.
Hold... 3... 2... 1...
and release.

Then curl your toes downward or point your feet slightly.
Feel the calves and feet activate.
Hold... 3... 2... 1...
and release.
Let the legs become heavy and grounded.”

7. Global Release (30 seconds)

“Take one slow breath in...
and as you exhale, imagine the whole body letting go.
Arms loose, shoulders soft, jaw relaxed, legs heavy.

Feel the calm settling through the body.”

8. Closing (30 seconds)

“Take one more deep breath in...
and a long, easy breath out.

When you’re ready, gently wiggle your fingers and toes.
Let your eyes open whenever it feels natural.

Notice how your body feels right now—
a little softer, a little more settled.”

A stack of colorful sticky notes (pink, yellow, blue, orange, green) is piled on a brown corkboard. The topmost pink sticky note has the words "DON'T FORGET" written in bold, black, hand-drawn capital letters. A thick black horizontal line is drawn underneath the word "FORGET".

**DON'T
FORGET**

SIMPLE COURSE SCHEDULE 2025-26

Week 1- October 1

Week 2- October 8

Week 3- October 15

Week 4- October 22

Week 5- October 29

Week 6- November 5

Week 7- November 12

Today Week 8- November 19

Week 9- November 26

Week 10- December 3

Week 11- December 10

Week 12- December 17

December 24 and 31 no course

Week 13- January 7

Week 14- January 14

Week 15- January 21

Week 16- January 28

Week 17- February 4

Week 18- February 11

Week 19- February 18

Week 20- February 25

Week 21- March 4

March 11 and 18 no course

Week 22- March 25

Week 23- April 1

Week 24- April 8

Week 25- April 15

Week 26- April 22

Week 27- April 29

Week 28- May 6

Week 29- May 13

Week 30- May 20

Week 31- May 27

Week 32- June 3

PRACTICE SESSIONS SCHEDULE

practice	preparation		
3. Week 10 December 3	November 26, 1:30	Holes Chain analysis	Dinko T.
4. Week 14 January 14	January 7, 1:30	Rational mind remediation	Helga H.
5. Week 18 February 11	February 4, 1:30	goals diary card	
6. Week 25 April 15	April 8, 1:30	IFS workbook 1	Elaine S.
7. Week 26 April 22	April 15	IFS workbook 2	Dinko T.
8. Week 27 April 29	April 22	IFS workbook 3	
9. Week 28 May 6	April 29	IFS workbook 4	
10. Week 32 June 3	May 27 1:30 PM	Wise mind remediation	

HOMEWORK FROM THE LAST SESSION

Submit

- Submit questions , comments, feedback to itssimple2023@gmail.com

Read

- Read skills training workbook p. 69-90. All of the physiological distress tolerance skills.

Read

- Simple manual session 11

Have

- have targets in your diary card and use it.

Continue

- Continue reviewing and practicing your crisis plans

Keep

- Continue practicing and tracking the skills you are learning.

HOMEWORK FOR THE COMING WEEK



- Submit questions, comments, feedback to itssimple2023@gmail.com
- Read simple manual session 12
- Do at least 2 holes chain analysis in the next week
- Continue reviewing and practicing your crisis plans and doing holes diary cards
- Continue practicing and tracking all the skills you've learned. use your skills list
- Keep it in your binder under the current week's tab and review the homework habits checklist each week. If there's an item you haven't checked on the list consider setting a goal to do it (you don't have to come to the homework group to do that)
- We will repost this slide at the break if there's anything that's not clear please ask us.



HOMework HAbits CHECKLIST

Circle or check what you will try this week.

1. Preparation habits

- I schedule a specific time for homework.
- I choose a consistent location with minimal distractions.
- I gather what I need ahead of time (notebook, worksheet, pen).

2. Focus & pacing habits

- I start with a tiny step (2–5 minutes).
- I use a timer (10–15 minutes).
- I remove distractions (phone away / Do Not Disturb).

HOMework HABITS CHECKLIST

3. Tracking & organization habits

- I keep materials in one place (binder / folder / notebook).
- I write down insights right after doing the homework.

4. Self-compassion habits

- I aim for progress, not perfection.
- I notice resistance without judgment.

5. Accountability habits

- I review my week: What worked? What didn't?
- I share honestly with my buddy — even when I didn't do it.

Micro commitment:

This week I will focus on: ■ Time ■ Place ■ Tiny step ■ Timer ■ Other please specify:



REMINDER PARTICIPANT AGREEMENTS

- If you have questions, comments, or feedback, please save them for the two question periods. You can put them in the chat box or raise your real/virtual hand.
- Keep comments, questions, and feedback relatively brief so everyone has a chance to participate.(one breath sharing)
- If you're on zoom, make sure no one can overhear what is being said
- For reasons that will become clear later in the course please avoid giving advice to other participants about what they should or should not do. Validation, encouragement , and understanding are however very much appreciated.

BE ON TIME Late entries to the video conference interrupt the lesson. 	MUTE YOUR MICROPHONE This helps reduce background noise and allows everyone to hear the speaker. 
TURN ON YOUR VIDEO Please make sure you are dressed appropriately. 	JOIN FROM A QUIET PLACE Try to avoid places with a lot of activity and distractions. 
BE PREPARED It is difficult to participate or ask for help if you are behind with your work. 	RAISE YOUR HAND Let your teacher know if you have a question or want to comment. 
USE THE CHAT FEATURE RESPONSIBLY Remember – a record is kept of everything you post in the chat. 	BE RESPECTFUL Everyone deserves to have a safe learning environment. Be kind in everything you say, post, and do online. 
USE YOUR FIRST AND LAST NAME Please rename yourself in Zoom with your first and last name.	

WEEKLY ANNOUNCEMENTS



- We're having a holidays get together
- December 22, 12:30-2:30
- Board room of Stratford family health team 444 Douro st. 2nd floor
- Pizza and drinks provided.
- There will also be a gift exchange. (crafts, poems and regifts encouraged)
- There will be games, music and merriment for everyone.
- Unfortunately, the room can only accommodate about 20 people so we'll invite the first 20 people that email us at itssimple2023@gmail.com. We'll send you a confirmation.
- Reminder: there is no homework group Dec. 2 from 12:30 to 1:00. The boing group will be held as usual on that day from 1 to 2:30 pm

WEEK 7 POLL RESULTS

Week 7 Poll- RESULTS

1. For each of the 5 OCEAN or big 5 traits please rate yourself high, low or intermediate. Start with openness (Single Choice)

- a) High 28%
- b) Low 22%
- c) Intermediate 50%

2. Conscientiousness (Single Choice)

- a) High 56%
- b) Low 11%
- c) Intermediate 33%

3. Extroversion (Single Choice)

- a) High 28%
- b) Low 56%
- c) Intermediate 17%

4. Agreeableness (Single Choice)

- a) High 61%
- b) Low 0%
- c) Intermediate 39%

5. Neuroticism (Single Choice)

- a) High 33%
- b) Low 11%
- c) Intermediate 56%

6. Some researchers think “Sensitivity” as in highly sensitive people should also be considered along the big 5 traits. Rate yourself on sensitivity (Single Choice)

- a) High 94%
- b) Low 0%
- c) Intermediate 6%

SESSION 7 SUMMARY



Personality: The characteristic set of behaviours, thoughts, and emotional patterns that are present in an individual and evolve from biological and environmental factors.

So, repeatedly falling into holes is a part of personality, and AVOIDING holes involves changing aspects of your personality.

Psychodynamic Theory of Personality: People are viewed as struggling between their animal Instincts and the pressures of socialization. The emphasis is on childhood experience and the unconscious mind.

The interaction between emotional, rational, and wise mind creates a dynamic system that influences behaviour.

Conflicts among these three components can lead to anxiety, depression, and other forms of psychological distress.

NATURE VS. NURTURE

Nature: what is innate to the individual at birth

Nurture: what is learned and due to the environment or circumstances after birth

DUAL PROCESS THEORY

SYSTEM 1

Emotional mind
Accelerator pedal
Limbic system and brain stem
Evolutionarily old
Fast, auto-pilot, non-verbal
Hard to control, no self-awareness

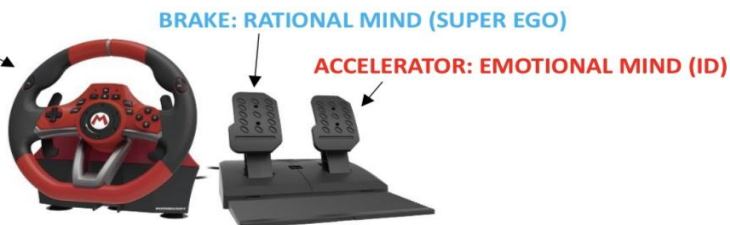
SYSTEM 2

Rational mind
Brake pedal
Cerebral cortex
Evolutionarily recent
Slow, effortful
Linked to language and intelligence

This theory holds that we SIMULTANEOUSLY process information in these two parallel, but very different ways. So, we have two minds figuring things out at the same time, coming to different conclusions, and making different decisions about what to do.

WISE MIND (EGO):

Is a very skilled driver that intimately knows how to use the accelerator and brake to navigate the road of life, avoiding potholes and accidents.



The emotional SYSTEM 1, and the rational SYSTEM 2 aren't very aware of each other, and don't communicate well because they don't speak the same language.

BUT, the language that they do share is symbolism or imagery.

Guess what?!?! WISE MIND THINKS SYMBOLICALLY! It can communicate with both the rational and emotional minds.

If we want to change the balance between the emotional and rational systems, we need to develop our wise minds. We can foster this development, and the Simple Course helps us to do just that!

A woman with her hair in a bun, wearing a long, patterned dress with orange, brown, and white geometric designs, stands in a lush green field. She is looking out over a vast landscape of rolling hills and mountains under a dramatic, cloudy sky. The text "E-MAILED QUESTIONS, COMMENTS, FEEDBACK HOUSEKEEPING" is overlaid in white, bold, sans-serif font on the right side of the image.

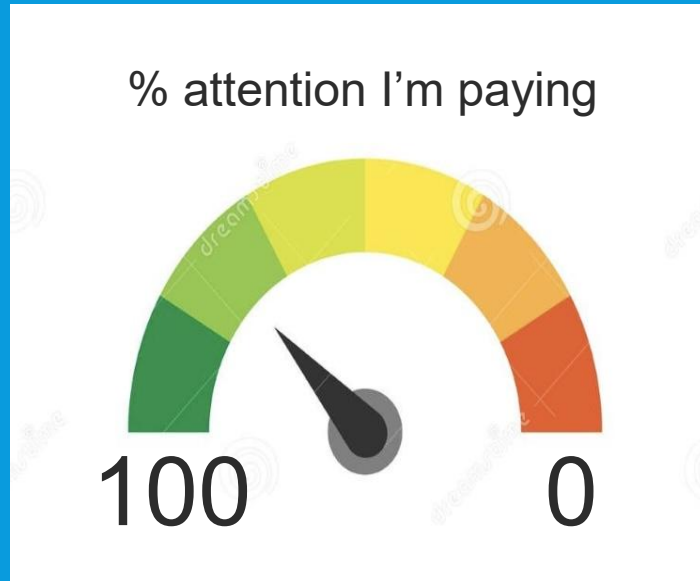
E-MAILED QUESTIONS, COMMENTS, FEEDBACK HOUSEKEEPING

WHAT IS THE DIFFERENCE BETWEEN HEALTHY AND UNHEALTHY GIVING?

- When we talk about healthy giving, caring, compassion, and generosity, we're not just talking about the act itself. We're talking about its overall effect on your system over time.
- A simple way to look at it is through the green–yellow–red model:
- With healthy giving you often start in green (in the window of tolerance, well regulated, grounded, resourced). When you give to others you briefly dip into yellow or red because giving takes effort, however over the long term you return to green or even deepen your green. This pattern suggests the giving is sustainable, reciprocal, and aligned with your values. It nourishes both you and the relationship.
- With unhealthy giving you may start in green yellow or red, but giving repeatedly, over the long term puts you deeper into yellow or red. The pattern stays this way, giving, over the long term depletes, overextends, makes you anxious or resentful and disconnected from yourself. This suggests the giving is costly, unsustainable, or tied to deeper patterns such as guilt, fear, people-pleasing, or old relational wounds. This kind of giving becomes a good target for understanding and change.
- It's not the act of giving that determines whether it's healthy or unhealthy, it's the pattern over time and the state you end up in. If the long-term outcome is green, the giving is likely healthy. If the long-term outcome is yellow or red, it's worth exploring what's driving it.

I'M HAVING TROUBLE FOCUSING OR CONCENTRATING ON WEDNESDAY MORNINGS SO I MISS A LOT OF WHAT'S BEING SAID. WHAT CAN I DO?

OPTIONAL DASHBOARD ATTENTION GAUGE



- It's so important that you have noticed that your mind is racing, you're distracted and can't focus during the sessions. That's a very human experience, and it fits directly into what we're learning. The material in this course is best absorbed when your body is in a state of calm or alert, inside your window of tolerance. When the mind is racing, that's usually a sign you're outside that window, which makes it much harder to take in new ideas. In those moments, the first step isn't to push yourself to concentrate, but to bring yourself back into your optimal range using the skills we've already covered: grounding, breath and body-based regulation, distress-tolerance strategies, self-soothing, distraction and refocusing, and checking your personal dashboard. These aren't side skills, they're what allow learning and reflection to happen.
- There's also a second piece: while we try to make the course as engaging as possible, part of the work is learning to train your attention. Whether the challenge is ADHD, anxiety, rumination, or simply a wandering mind, the practice is gently bringing your attention back, again and again, just like in mindfulness. The course itself becomes a training ground. If this is a recurring pattern, you might add a target like 'Ability to absorb material / ability to refocus attention' to your holes diary card, especially on course days. The goal isn't perfection; the goal is practice, notice, regulate, and return to the present moment and the course material with kindness.

- You've mentioned different types of therapeutic approaches; cognitive behavioral therapy, dialectical behavioral therapy and internal family systems. Don't CBT and DBT also treat trauma? What is different about IFS?
- Great question which deserves a full answer.



DIAGNOSING AND REPAIRING A PROBLEM

- When your car suddenly breaks down, you don't do a full inspection. You do a quick triage: "Is it the battery?". "Is there gas?". "Is something hanging off?".
 - This is a quick diagnostic, fast, simple, and meant to get you back on the road.
 - Then you try the quick fixes such as duct tape the bumper, add coolant, tighten the loose battery cable or call a friend or CAA.
 - That's what a crisis plan does. It's not about understanding the deeper reasons you're having car trouble; it's about quickly dealing with the situation.
-
- If the quick fix doesn't work, you take the car to your neighborhood mechanic. They don't tear the whole car apart, they use practical diagnostics such scanning the computer codes, looking at the brake pads, checking the alignment, testing the battery and listening to how the engine sounds
 - This is similar to CBT or DBT diagnostics. For example, DBT chain analysis is like the mechanic's step-by-step investigation while the CBT thought records are like identifying the faulty "wiring" between thoughts, feelings, and behaviors. These methods look for the patterns that cause everyday problems.
 - Then the mechanic does the repairs that improve daily functioning such as replacing brake pads, fixing the misalignment, changing the oil or repairing the sensors.
 - These are CBT/DBT-level repairs, they improve your day-to-day functioning without going into the deepest layers of history.

DIAGNOSING AND REPAIRING A PROBLEM

- Sometimes the neighborhood mechanic says: “The real problem is deeper. You need to take this to the dealership they have the specialized tools and skills.”
- The dealership or manufacturer uses the most advanced diagnostics such as taking apart the engine, checking the frame, reading the deep-level computer logs or assessing damage from old accidents you barely remember.
- This level of diagnostics is what trauma therapy does. It’s like Internal Family Systems (IFS), where you map out your parts, EMDR, where you track how old memories still fire in the present or Somatic trauma work, where you assess how trauma lives in the body
- These methods reveal the deeper structure, the foundation, the original injuries, the parts of the system that have been protecting you for decades. Then trauma therapy does the slow, expert-level repairs such as rebuilding the engine, straightening the frame, replacing the damaged wiring from past crashes or restoring what was never built safely in the first place. This is the level at which old trauma is healed, not just managed.

DIAGNOSING AND REPAIRING A PROBLEM

Roadside crisis plans: do a quick triage, realize you're in a hole, don't make it worse, use a crisis plan to stabilize the situation and get you home safely. This is not deep, not diagnostic it just focuses on immediate safety.

Neighborhood Garage CBT and DBT: Do more thorough but practical diagnostics, such as finding intermediate holes and repairing patterns of everyday thoughts and behaviors.

Dealership Specialist trauma therapy: Does advanced diagnostics such as understanding internal family parts or advanced holes diary card targets. It does deep structural restoration of these parts which carry wounds, early injuries that form foundational patterns of thinking, feeling and behaving.

WHY TRAUMA THERAPY REQUIRES A DEEP UNDERSTANDING OF THE MIND

- So far, we've compared three levels of diagnostic depth, roadside (Crisis Plan), neighbourhood garage (CBT/DBT) and dealership specialist (Trauma Therapy, e.g., IFS). IFS and other trauma therapies require a more complex theoretical understanding of the mind.
- CBT analyzes automatic thoughts, beliefs, and behaviours using thought records while DBT analyzes triggers, emotions, urges, sensations using chain (holes) analysis. These tools tell you what is happening and what contributes to it, they do not ask why these patterns developed during childhood or how attachment history shapes them. These deeper questions require a different level of understanding.
- Trauma therapies like IFS are like taking the car to the manufacturer's dealership. A dealership doesn't just use the neighbourhood mechanic's tools. It accesses the deepest part of the car's internal computer and the systems built at the factory, before the car ever drove its first mile.
- IFS does something very similar; it goes beneath the surface patterns to the mind's internal architecture. It asks which part of you is driving this moment? Is this a protector, a firefighter, or an exiled part? What is the original emotional injury that this part was created to protect? When did this part take on its role, in childhood? adolescence? adulthood? Is this reaction connected to an old attachment wound? And what does this part fear would happen if it didn't do its job?

WHY TRAUMA THERAPY REQUIRES A DEEP UNDERSTANDING OF THE MIND

- To answer these questions, we need a map of the mind's deeper structure, not just a list of thoughts or behaviours. Because many parts were formed during early attachment experiences, we need to understand anxious, avoidant, and disorganized attachment patterns, childhood emotional neglect, parentification and how early trauma shapes the nervous system.
- Because trauma reorganizes the nervous system, we also need to understand fragmentation of the self and dissociation, hypervigilance, body-based memory and fight-flight-freeze responses.
- Trauma therapies like IFS require that we understand these concepts because they don't just fix the symptoms, they aim to repair the original wounds. This is why in such therapies the assessment has to go deeper than CBT or DBT.
- CBT/DBT like neighbourhood garage diagnostics looks at patterns we can see: thoughts → emotions → behaviours, triggers → responses, skill deficits and unhelpful habits
- IFS/Trauma Therapy like dealership-Level Diagnostics looks at the deep internal design of the mind: early attachment wounds, trauma imprints, parts and subpersonalities, protective systems, original injuries and unconscious dynamics.
- To work effectively at this deeper level, you need the equivalent of the dealership's wiring diagrams (psychodynamics), the factory's manual on early development (attachment theory), and the crash report of previous accidents (trauma theory)

- There are three stages of trauma therapy
 - 1. emotional regulation
 - 2. trauma processing and
 - 3. reclaiming a full life.
-
- CBT was originally developed to treat anxiety and depression. It's a good stage 1 trauma therapy
 - DBT was originally developed to treat emotional dysregulation. It's a good stage 1 trauma therapy
 - IFS was originally developed to treat trauma. It's a good stage 2 trauma therapy.

WHAT WE WILL DO TODAY



- Introducing the third simple tool – holes (chain) analysis
- Skills training workbook p. 69-90 Physiological distress tolerance skills.



Crisis plans

Holes diary cards

THE 6 TOOLS: Holes (chain) analysis

Rational mind remediation

Goals diary cards

Wise mind remediation

HOLES CHAIN ANALYSIS



- Today we'll introduce holes or chain analysis. (going forward we'll refer to it as holes analysis.)
- There are beginner, intermediate and advanced assessment or diagnostic tools. (remember beginner, intermediate and advanced targets for the holes diary card.)
- Holes analysis is the tool used by your neighborhood garage to assess or diagnose the problem. It does a more in-depth assessment than the road side crisis plans.
- Holes analysis are called thought records in CBT and chain analysis in DBT. They are the assessment or diagnostic tools used in these therapeutic approaches. These approaches also have tools to fix the problems.
- In internal family systems, a form of trauma therapy, the assessment or diagnostic tool is getting to know your parts (advanced targets for the holes diary card)
- Don't forget to keep working on the first 2 tools we learned crisis plans and holes diary cards.

HOLES CHAIN ANALYSIS: ASSESSING THE PROBLEM



Assessment of
video of falling
into hole
Dashboard
state

Trigger
↓

Emotional mind: dysregulated thoughts, feelings, behaviors and sensations -> suffering



HOLES ANALYSIS

Two types of fixes
1. Rational mind
remediation
Dashboard
state

Trigger
↓

Using tools skills and strategies rational mind pastes in well regulated thoughts, feelings, behaviors and sensations to replace dysregulated ones -> pain but no suffering



2. Wise mind
remediation
Dashboard
state

Wise mind is like an ideal parent that sees and understands emotional mind, it doesn't overpower it, it holds it and comforts it and gently takes charge acting with reason and compassion-> radical acceptance

I see and feel emotional mind, radically accept it and compassionately understand it ...



At the same time I also see that there is another way to think, feel and behave that will be better for everyone involved

THE THIRD TOOL

HOLES ANALYSIS



DBT HOLES ANALYSIS TEMPLATE (cheat sheet)

1. What Happened?	2. Emotions Felt	3. Thoughts	4. Sensations	5. Behaviours/urges	6. pre-hole energy
Describe the situation factually.	<input type="checkbox"/> Anxiety / Fear <input type="checkbox"/> Anger / Rage <input type="checkbox"/> Irritation / Frustration <input type="checkbox"/> Sadness / Grief <input type="checkbox"/> Shame <input type="checkbox"/> Guilt <input type="checkbox"/> Hurt <input type="checkbox"/> Loneliness <input type="checkbox"/> Embarrassment <input type="checkbox"/> Overwhelm <input type="checkbox"/> Numbness <input type="checkbox"/> Other: _____	<input type="checkbox"/> I'm not good enough. <input type="checkbox"/> This is my fault. <input type="checkbox"/> They are judging me. <input type="checkbox"/> Something bad will happen. <input type="checkbox"/> I can't handle this. <input type="checkbox"/> I'm going to fail. <input type="checkbox"/> They don't care about me. <input type="checkbox"/> I always screw up. <input type="checkbox"/> Catastrophizing <input type="checkbox"/> All-or-nothing thinking <input type="checkbox"/> Mind-reading <input type="checkbox"/> Other: _____	<input type="checkbox"/> Tight chest <input type="checkbox"/> Rapid heartbeat <input type="checkbox"/> Shallow breathing <input type="checkbox"/> Nausea <input type="checkbox"/> Knot in stomach <input type="checkbox"/> Sweaty palms <input type="checkbox"/> Shaking <input type="checkbox"/> Muscle tension <input type="checkbox"/> Hot face / flushing <input type="checkbox"/> Cold hands/feet <input type="checkbox"/> Light-headedness <input type="checkbox"/> Numbness <input type="checkbox"/> Restlessness / agitation <input type="checkbox"/> Other: _____	<input type="checkbox"/> Withdrew / shut down <input type="checkbox"/> Lashed out <input type="checkbox"/> Avoided / escaped <input type="checkbox"/> People-pleased <input type="checkbox"/> Over-apologized <input type="checkbox"/> Argued / escalated <input type="checkbox"/> Used substances <input type="checkbox"/> Overate / restricted <input type="checkbox"/> Reassurance-seeking <input type="checkbox"/> Compulsive checking <input type="checkbox"/> Tried to control <input type="checkbox"/> Self-harm urges/actions <input type="checkbox"/> Other: _____	<input type="checkbox"/> Very Low <input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High <input type="checkbox"/> Very High <input type="checkbox"/> Contributing factors (describe): _____

USES OF SIMPLE TOOLS

ASSESSMENT OR DIAGNOSIS

- Help us identify and understand our issues or the holes we fall into:

- Crisis plans
- Holes diary cards
- Holes analysis
- Goals diary cards



REMEDIATION OR REPAIR

- Help us develop and implement approaches to changing our problems or get out of and avoid holes :

- Crisis plans
- Rational mind remediation
- Goals diary cards
- Wise mind remediation

WHAT IS A CBT THOUGHT RECORD?

- A CBT thought record is a short worksheet that helps you slow down your reactions and understand how your thoughts affect your feelings and behaviour. It's like taking a snapshot of your mind in a stressful moment so you can look at it more clearly. Instead of being swept away by anxiety, fear, anger, or sadness, a thought record helps you ask: "What went through my mind, what emotion did it create, and is there another way to look at this?"
- It's Helpful because most people notice their emotions right away (anxiety, shame, frustration) but don't notice the thoughts that sparked them. A thought record helps you catch those hidden automatic thoughts, see whether they're accurate or unhelpful, create a more balanced perspective, reduce the intensity of painful emotions, and choose wiser actions. Thought records are not about "positive thinking." but about realistic thinking, seeing the situation more clearly. A thought record usually has six steps, all of them short and concrete:
 - 1. Situation: What happened? (Just the facts: "My boss asked to speak with me.")
 - 2. Emotion: How did I feel, and how strong was it? ("Anxious, 80%.")
 - 3. Automatic Thought: What went through my mind in that moment? ("I'm in trouble. I'm going to be fired.")
 - 4. Evidence For: Is there anything that supports the thought? ("He did say he needed to talk.")
 - 5. Evidence Against: What are other possibilities or facts I'm ignoring? ("He often asks people to talk about schedules; my performance reviews have been positive.")
 - 6. Balanced Thought: A more fair, realistic way of seeing it. ("I don't know why he wants to meet. It could be neutral or even helpful. I'll find out when we talk.")

WHAT IS A CBT THOUGHT RECORD?

- Outcome: Check in by asking if has the emotion shifted? (Anxiety drops from 80% → 40%.)
- A thought record does not tell you what to feel. It doesn't shame or judge you. It doesn't pretend everything is fine. It simply helps you think more clearly, which usually helps you feel better.
- A CBT thought record is a tool that helps you understand what thoughts are driving your emotions, and lets you step back and look at the situation more realistically.
- We'll discuss CBT when we introduce rational mind remediation in week 12.

Situation	Emotions / Moods (rate 0 – 100%)	Physical sensations	Unhelpful Thoughts / Images	Alternative / realistic thought More balanced perspective	What I did / What I could do / Defusion technique / What's the best response? Re-rate Emotion 0-100%
<p><i>What happened? Where? When? Who with? How?</i></p>	<p><i>What emotion did I feel at that time? What else? How intense was it?</i></p>	<p><i>What did I notice in my body? Where did I feel it?</i></p>	<p><i>What went through my mind? What disturbed me? What did those thoughts/images/memories mean to me, or say about me or the situation? What am I responding to? What 'button' is this pressing for me? What would be the worst thing about that, or that could happen?</i></p>	<p>STOPP! Take a breath.... <i>Is this fact or opinion? What would someone else say about this situation? What's the bigger picture? Is there another way of seeing it? What advice would I give someone else? Is my reaction in proportion to the actual event? Is this really as important as it seems?</i></p>	<p><i>What could I do differently? What would be more effective? Do what works! Act wisely. What will be most helpful for me or the situation? What will the consequences be?</i></p>

CBT THOUGHT RECORD VS. DBT HOLES ANALYSIS

- DBT adapted CBT in order to work with dysregulated emotion. You'll find many similarities between the two approaches for example chain analysis are modified thought records.
- Both thought records and holes analysis help people slow down automatic reactions and reflect on what's happening inside them, increase awareness of thoughts, emotions, behaviours links, support emotion regulation by identifying patterns that maintain suffering. Both aim to replace unhelpful habits with more skillful, balanced responses, and are often used in therapy as homework or between-session practice.
- There are some significant differences between the two. CBT thought records focus on unhelpful thoughts ("cognitive distortions") that drive emotions and behaviours. Its goal is to identify, challenge, and replace inaccurate or unhelpful beliefs and help people develop a more balanced, realistic way of thinking.
- DBT holes analysis on the other hand focus on the sequence of events that led to a problematic behaviour (e.g., anger outburst, self-harm, avoidance). Its goal is to identify vulnerabilities, triggers, links in the chain, and missing skills and help people understand why the behaviour made sense and what skills could replace it next time.
- In a thought record the focus is on cognitions (automatic thoughts, core beliefs). Emotions tied to those thoughts. Evidence for/against the thought and alternative, more balanced thought.
- In a holes analysis the focus is on a behavioural chain or step-by-step sequence of event → thought → feeling → sensation → urge → action → consequence). It also takes into account vulnerability factors (sleep, stress, illness, hunger, old wounds), and skill deficits (emotion regulation, distress tolerance, interpersonal skills). It emphasizes solution analysis or what skills to use next time.

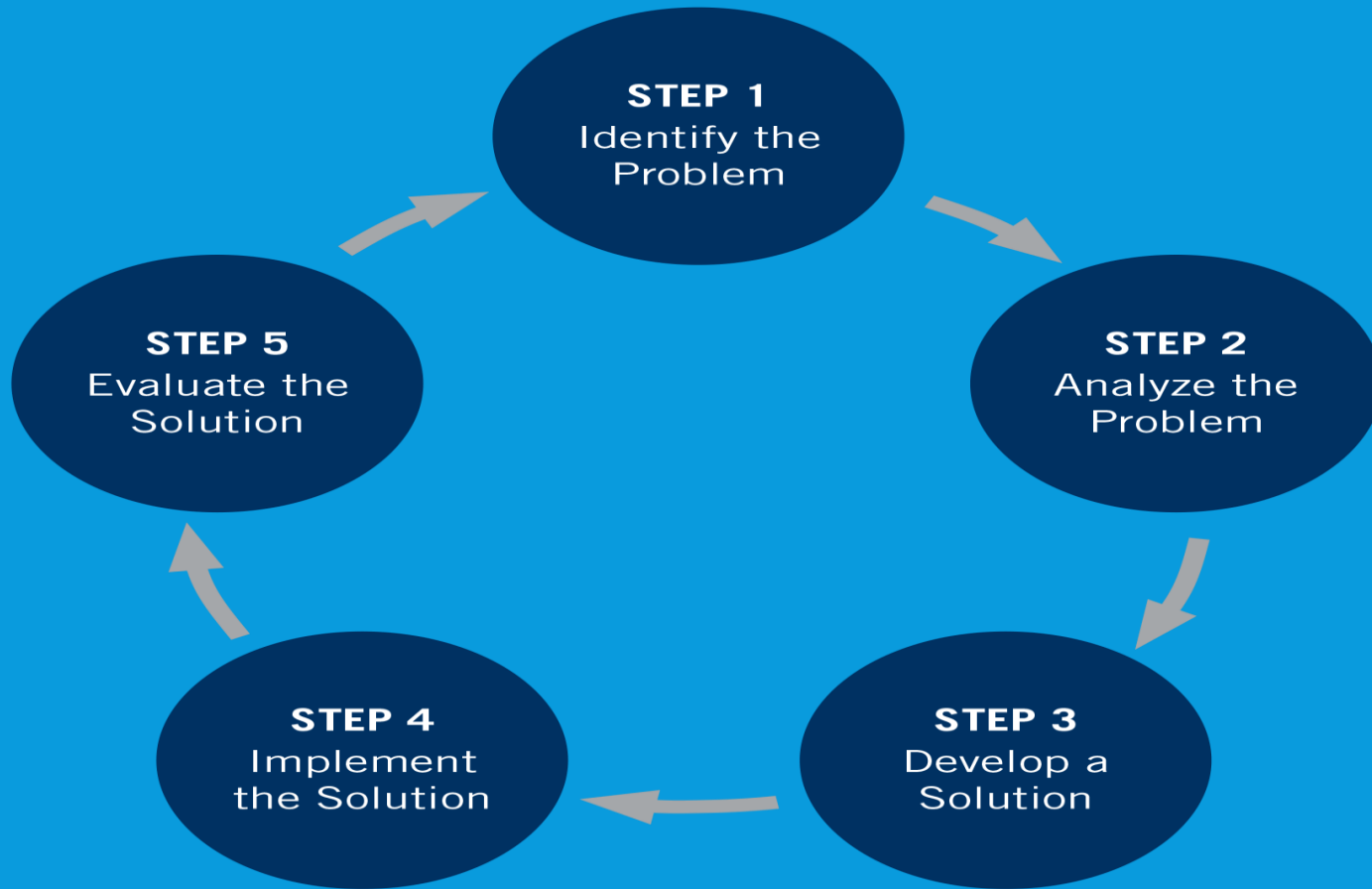
CBT THOUGHT RECORD VS. DBT HOLES ANALYSIS

- Thought records can be used when someone is anxious, depressed, catastrophizing, self-critical and the main problem is distorted thinking. Holes analysis are helpful when a person engages in dysregulated behaviours (anger, self-harm, impulsivity, avoidance, substance use) and wants to understand what set up the behaviour and how to prevent it. The focus is on skills training and behavioural change rather than changing beliefs.
- The CBT thought record template lists:
 1. Situation
 2. Emotion(s)
 3. Automatic thought(s)
 4. Evidence for
 5. Evidence against
 6. Balanced thought
 7. Outcome (emotion shift)
- The DBT Holes analysis template lists:
 1. Vulnerability factors
 2. Prompting event
 3. Links in the chain (thoughts, feelings, sensations, urges, actions)
 4. Problem behaviour
 5. Consequences
 6. Missing skills
 7. Plan to repair
 8. Skills to use next time
- CBT thought record ask “What thought made me suffer, and how can I think about it differently?” The DBT chain analysis asks “What sequence of events made this behaviour happen, and what skills can I use next time?”

DBT HOLES ANALYSIS TEMPLATE

1. What Happened?	2. Emotions Felt	3. Thoughts	4. Sensations	5. Behaviours/urges	6. pre-hole energy
Describe the situation factually.	<input type="checkbox"/> Anxiety / Fear <input type="checkbox"/> Anger / Rage <input type="checkbox"/> Irritation / Frustration <input type="checkbox"/> Sadness / Grief <input type="checkbox"/> Shame <input type="checkbox"/> Guilt <input type="checkbox"/> Hurt <input type="checkbox"/> Loneliness <input type="checkbox"/> Embarrassment <input type="checkbox"/> Overwhelm <input type="checkbox"/> Numbness <input type="checkbox"/> Other: _____	<input type="checkbox"/> I'm not good enough. <input type="checkbox"/> This is my fault. <input type="checkbox"/> They are judging me. <input type="checkbox"/> Something bad will happen. <input type="checkbox"/> I can't handle this. <input type="checkbox"/> I'm going to fail. <input type="checkbox"/> They don't care about me. <input type="checkbox"/> I always screw up. <input type="checkbox"/> Catastrophizing <input type="checkbox"/> All-or-nothing thinking <input type="checkbox"/> Mind-reading <input type="checkbox"/> Other: _____	<input type="checkbox"/> Tight chest <input type="checkbox"/> Rapid heartbeat <input type="checkbox"/> Shallow breathing <input type="checkbox"/> Nausea <input type="checkbox"/> Knot in stomach <input type="checkbox"/> Sweaty palms <input type="checkbox"/> Shaking <input type="checkbox"/> Muscle tension <input type="checkbox"/> Hot face / flushing <input type="checkbox"/> Cold hands/feet <input type="checkbox"/> Light-headedness <input type="checkbox"/> Numbness <input type="checkbox"/> Restlessness / agitation <input type="checkbox"/> Other: _____	<input type="checkbox"/> Withdrew / shut down <input type="checkbox"/> Lashed out <input type="checkbox"/> Avoided / escaped <input type="checkbox"/> People-pleased <input type="checkbox"/> Over-apologized <input type="checkbox"/> Argued / escalated <input type="checkbox"/> Used substances <input type="checkbox"/> Overate / restricted <input type="checkbox"/> Reassurance-seeking <input type="checkbox"/> Compulsive checking <input type="checkbox"/> Tried to control <input type="checkbox"/> Self-harm urges/actions <input type="checkbox"/> Other: _____	<input type="checkbox"/> Very Low <input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High <input type="checkbox"/> Very High <input type="checkbox"/> Contributing factors (describe): _____

STEPS 1 AND 2 OF GOOD PROBLEM SOLVING



- Holes diary cards with their targets help us with step 1 of good problem solving which is identifying the problem.(the target)
- Holes analysis helps us with step 2 of good problem solving which is analyzing the problems that we have previously identified and designated as our “holes” or “targets”. Analyzing the problems helps us better understand them.

To do holes analysis you need to be doing holes diary cards

HOLES DIARY CARD

[illegible]

HOLES ANALYSIS ALGORITHM

[illegible]

- [illegible]

ALGORITHM steps 1,2 and 3

- 1) start with your completed holes diary card
- 2) choose a day when the numbers for one or more of your targets were higher than baseline.
- 3) ask yourself at what point in time the numbers went up from baseline.

[illegible]

ALGORITHM step 4

4) use the holes analysis template to understand what happened, what you felt, thought, and did. Do steps 1-8 on chain analysis template.

HOLES ANALYSIS TEMPLATE

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2. What was the topography of your activation?
3. Was there a trigger(s) for the activation?
4. What did you feel when activated ?
5. Notice the sensations in your body without judging or trying to change them
6. What thoughts were associated with each feeling listed above?
7. What behaviors or urges were associated with each feeling?
8. What was your energy balance before the activation? 0-10

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ALGORITHM step 4 cheat sheet

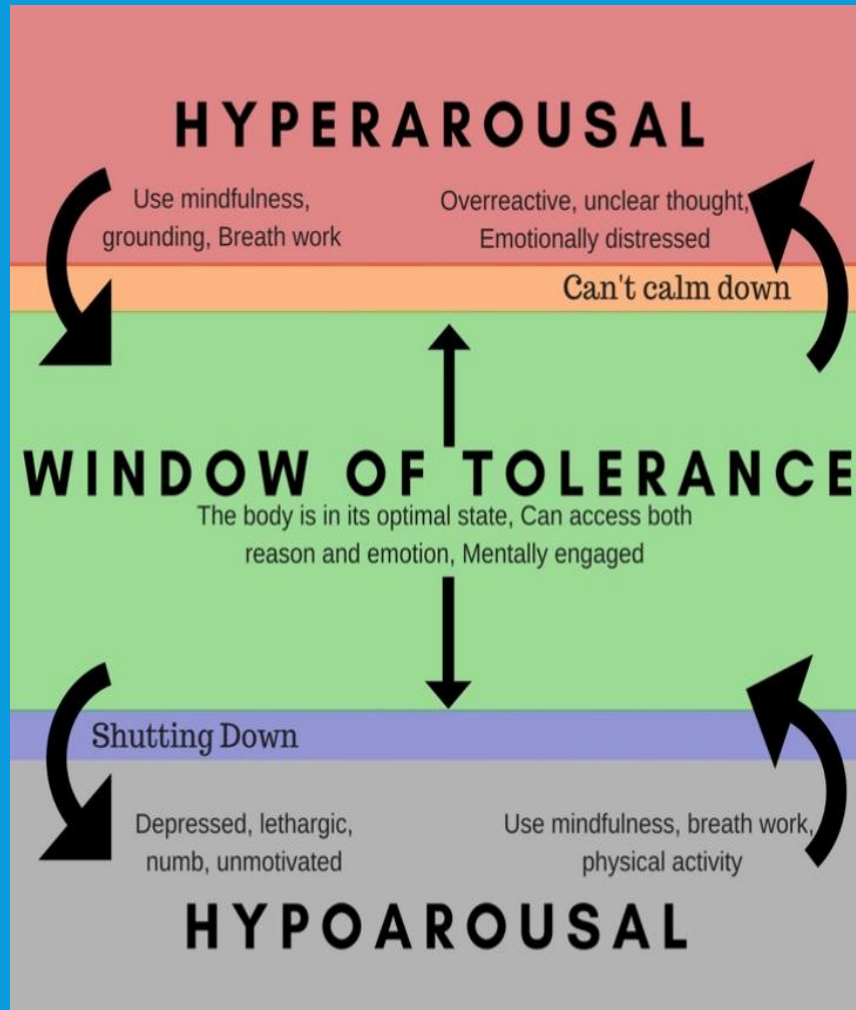
ALGORITHM step 4

4) use the holes analysis template to understand what happened, what you felt, thought, and did. Do steps 1-8 on chain analysis template.

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8. What was your energy balance before the activation? 0-10

5) REMEMBER TO STAY IN WINDOW OF TOLERANCE BY PENDULATING



- Pendulating, which comes from the word pendulum, means swinging from one thing or place to another.
- When people have feelings, they also have thoughts and images that accompany those feelings.
- One way of soothing yourself, when you are experiencing intense negative feelings, and bringing yourself back to the window of tolerable emotions, involves distraction or self-soothing: you learn to identify that you are emotional and learn to have alternative thoughts, a soothing inner dialogue, and/or calming and soothing images. When you are better regulated you can then revisit the original thoughts you were having
- To get good at pendulating you have to plan and practice it as we will further discuss when we talk about crisis plans.

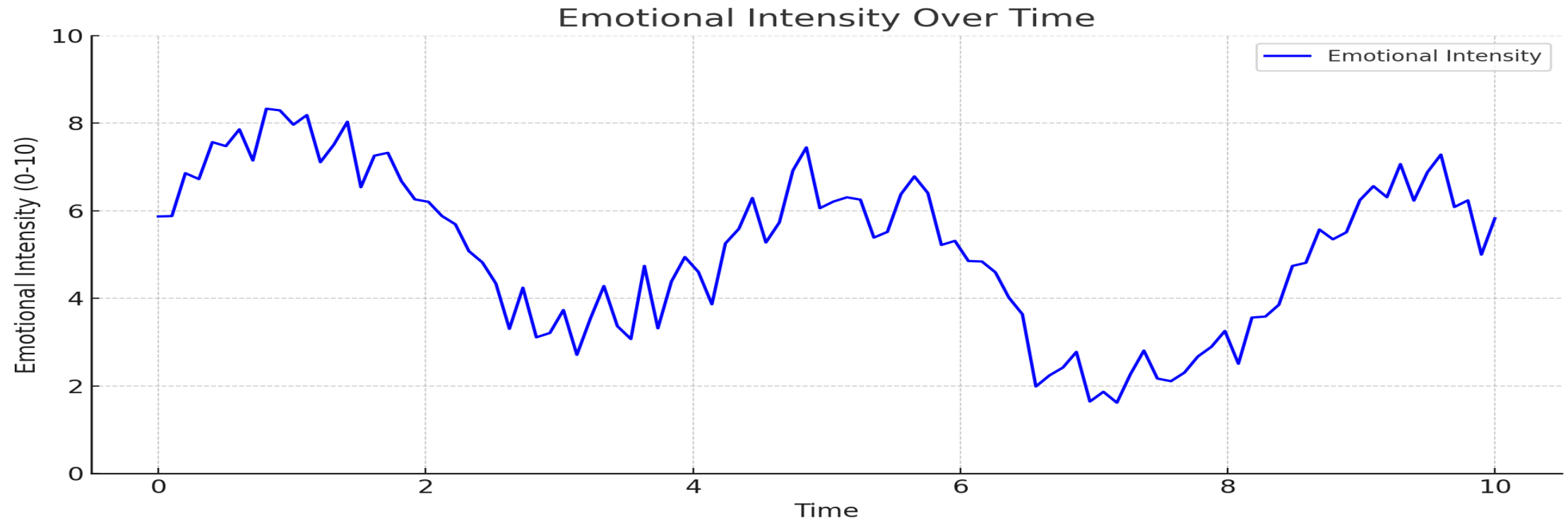
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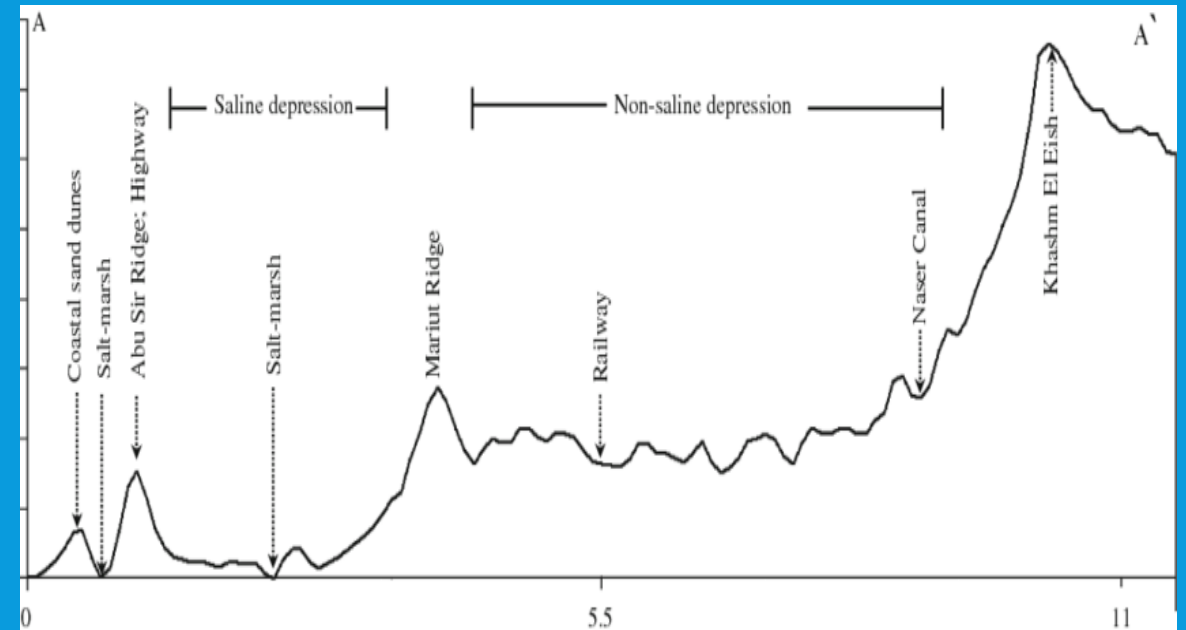
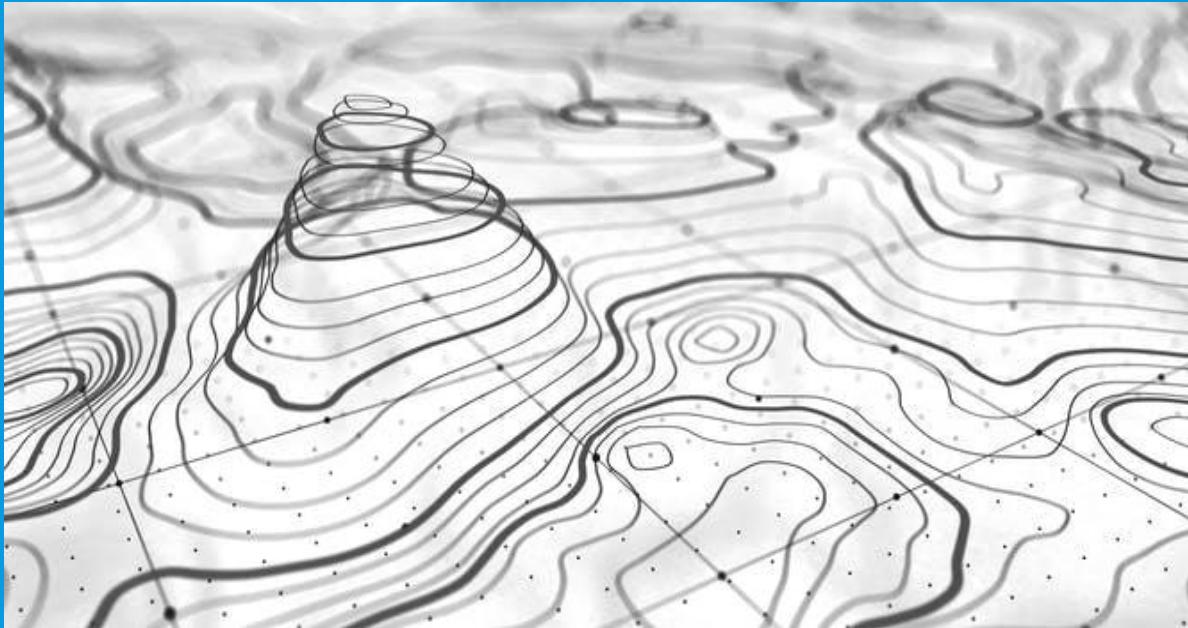
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Emotional Intensity Over Time



6) What was the topography of your activation?

Topography: How the intensity of your targets (emotions, thoughts, behaviors) changes over the course of a period of activation – how you go up and down the steps



ALGORITHM step 4

4) use the holes analysis template to understand what happened, what you felt, thought, and did. Do steps 1-8 on chain analysis template.

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7) Was there a trigger(s) for the activation?

Emotional Triggers

What do I need to look out for?



Emotional Triggers

What do I need to look out for?

PEOPLE

Who affect me

PLACES

Where I go

THINGS

What I'm near

SITUATIONS

What I do

EMOTIONS

How I feel

SOUNDS

Hearing certain sounds or music associated with your trauma or feelings can take you back



PEOPLE

Seeing someone who is related to the trauma or who has a certain trait physically can trigger you



THOUGHTS

Certain thoughts or memories can make your brain bring you back to a trauma, often unwillingly



SMELLS

Our human smell is strongly tied to our memories. As a result, certain scents can trigger a trauma



PLACES

The place where the trauma took place can be a strong trigger, as well as similar places



MEDIA

A news report, a particular movie or a tv series can show a scene that is similar to your trauma



FEELINGS

Sometimes a feeling or emotion can trigger your trauma like a sad feeling or being in pain



SITUATIONS

If you find yourself in a situation that is similar to or reminds you of your trauma it can be a trigger



Crisis Plan

1. Which crisis or “hole” is this plan for? What problematic feelings, thoughts, behaviours/maladaptive coping mechanisms/part/selves are present or active when I’m in this hole?

☐ anxiety/panic/flight

☐ dissociation

☐ withdrawing/running away

☐ fight/anger

☐ impulsive behaviour

☐ thinking of/hurting myself

☐ grief

☐ illegal behaviours

☐ thinking of/hurting others

☐ despair/giving up

☐ behaviours I later regret

☐ other specify: _____

☐ problems with boundaries

☐ addictive behaviour

2. What might trigger getting into this crisis/hole?



☐ something I perceive others saying/doing

☐ certain things in my environment

☐ other/describe: _____

☐ contact with certain people

☐ times of the day/year

☐ anniversaries

☐ being tired/stressed/not caring for myself

3. What other thoughts/feelings/behaviours are typical for me in these crisis/holes?

4. What are the things I or others do that tends to make these crisis/holes worse?

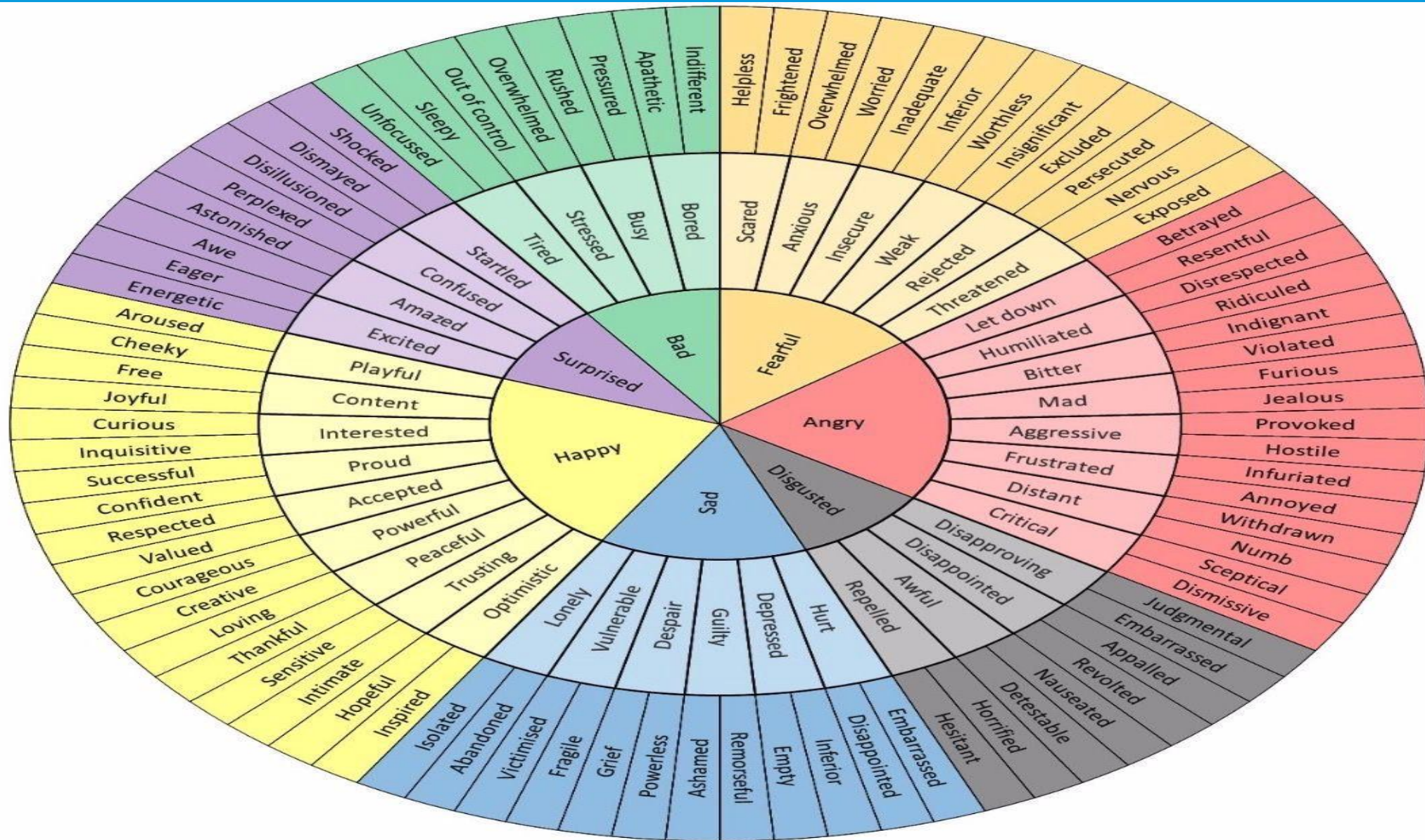
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8)What did you feel when activated ?



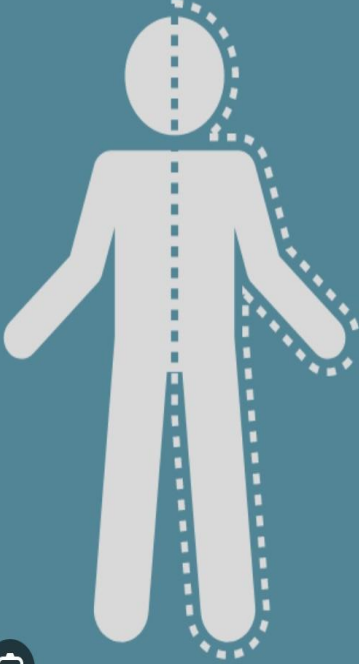
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9) Notice the sensations in your body without judging or trying to change them

	COMMON WORDS	ENERGETIC QUALITY
	<ul style="list-style-type: none"> • Tight • Tense • Knotted • Sore • Achey • Pressure 	<ul style="list-style-type: none"> • Shaky • Trembly • Fluttery • Shivery • Wobbly • Short of breath
	ELECTRIC QUALITY	BLAH...MEH...
	<ul style="list-style-type: none"> • Prickly • Tingly • Burning • Buzzy • Itchy • Pounding 	<ul style="list-style-type: none"> • Empty • Dull • Hollow • Disconnected • Heavy • Drained
	WELLBEING/OPEN	CLOSED OFF
	<ul style="list-style-type: none"> • Relaxed • Released • Energetic • Expansive • Flexible • Grounded 	<ul style="list-style-type: none"> • Constricted • Choking • Rigid • Slunched • Suffocated • Imploding

How do your emotions FEEL in your body?			
FEELING BLUE	GOOD-TO-GO!	GETTING YELLOW	RED ALERT!
 <p>My body feels:</p> <ul style="list-style-type: none"> • Shaky, slow • Low energy • Low/no motivation • Brain fog 	 <p>My body feels...</p> <ul style="list-style-type: none"> • Relaxed • Motivated • Energized • Focused • Smiling 	 <p>My body feels:</p> <ul style="list-style-type: none"> • Muscles a little tense • Jaw clenched • Voice louder • Restless • Fidgety 	 <p>My body feels:</p> <ul style="list-style-type: none"> • Very tense • Jaw firmly clenched • Breathing quickly • Heart beating fast • Can't think clearly • Face feels hot • Very restless
	twoemb.medium.com		
			

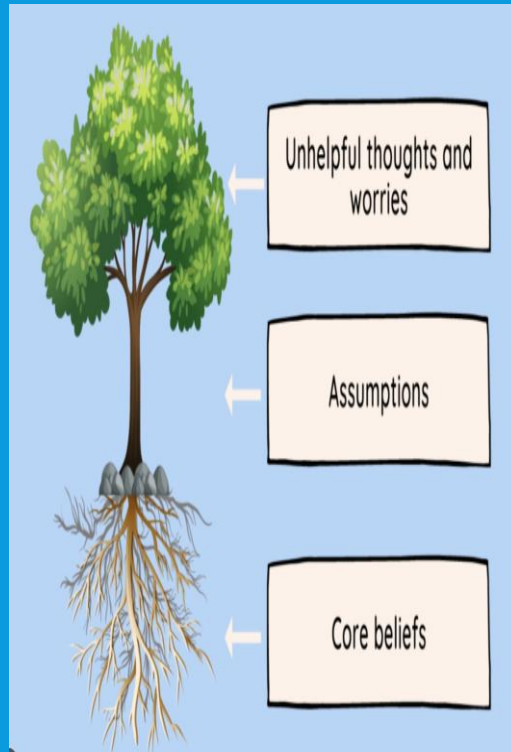
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DBT HOLES ANALYSIS TEMPLATE

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Describe the situation factually.	<input type="checkbox"/> Anxiety / Fear <input type="checkbox"/> Anger / Rage <input type="checkbox"/> Irritation / Frustration <input type="checkbox"/> Sadness / Grief <input type="checkbox"/> Shame <input type="checkbox"/> Guilt <input type="checkbox"/> Hurt <input type="checkbox"/> Loneliness <input type="checkbox"/> Embarrassment <input type="checkbox"/> Overwhelm <input type="checkbox"/> Numbness <input type="checkbox"/> Other: _____	<input type="checkbox"/> I'm not good enough. <input type="checkbox"/> This is my fault. <input type="checkbox"/> They are judging me. <input type="checkbox"/> Something bad will happen. <input type="checkbox"/> I can't handle this. <input type="checkbox"/> I'm going to fail. <input type="checkbox"/> They don't care about me. <input type="checkbox"/> I always screw up. <input type="checkbox"/> Catastrophizing <input type="checkbox"/> All-or-nothing thinking <input type="checkbox"/> Mind-reading <input type="checkbox"/> Other: _____	<input type="checkbox"/> Tight chest <input type="checkbox"/> Rapid heartbeat <input type="checkbox"/> Shallow breathing <input type="checkbox"/> Nausea <input type="checkbox"/> Knot in stomach <input type="checkbox"/> Sweaty palms <input type="checkbox"/> Shaking <input type="checkbox"/> Muscle tension <input type="checkbox"/> Hot face / flushing <input type="checkbox"/> Cold hands/feet <input type="checkbox"/> Light-headedness <input type="checkbox"/> Numbness <input type="checkbox"/> Restlessness / agitation <input type="checkbox"/> Other: _____	<input type="checkbox"/> Withdrew / shut down <input type="checkbox"/> Lashed out <input type="checkbox"/> Avoided / escaped <input type="checkbox"/> People-pleased <input type="checkbox"/> Over-apologized <input type="checkbox"/> Argued / escalated <input type="checkbox"/> Used substances <input type="checkbox"/> Overate / restricted <input type="checkbox"/> Reassurance-seeking <input type="checkbox"/> Compulsive checking <input type="checkbox"/> Tried to control <input type="checkbox"/> Self-harm urges/actions <input type="checkbox"/> Other: _____	<input type="checkbox"/> Very Low <input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High <input type="checkbox"/> Very High <input type="checkbox"/> Contributing factors (describe): _____

10) What thoughts were associated with each feeling listed in step 8) above?



HOLES ANALYSIS TEMPLATE

1. Remember to stay in window of tolerance by pendulating
2. What was the topography of your activation?
3. Was there a trigger(s) for the activation?
4. What did you feel when activated ?
5. Notice the sensations in your body without judging or trying to change them
6. What thoughts were associated with each feeling listed above?
7. What behaviors or urges were associated with each feeling?
8. What was your energy balance before the activation? 0-10

DBT HOLES ANALYSIS TEMPLATE

1. What Happened?	2. Emotions Felt	3. Thoughts	4. Sensations	5. Behaviours/urges	6. pre-hole energy
Describe the situation factually.	<input type="checkbox"/> Anxiety / Fear <input type="checkbox"/> Anger / Rage <input type="checkbox"/> Irritation / Frustration <input type="checkbox"/> Sadness / Grief <input type="checkbox"/> Shame <input type="checkbox"/> Guilt <input type="checkbox"/> Hurt <input type="checkbox"/> Loneliness <input type="checkbox"/> Embarrassment <input type="checkbox"/> Overwhelm <input type="checkbox"/> Numbness <input type="checkbox"/> Other: _____	<input type="checkbox"/> I'm not good enough. <input type="checkbox"/> This is my fault. <input type="checkbox"/> They are judging me. <input type="checkbox"/> Something bad will happen. <input type="checkbox"/> I can't handle this. <input type="checkbox"/> I'm going to fail. <input type="checkbox"/> They don't care about me. <input type="checkbox"/> I always screw up. <input type="checkbox"/> Catastrophizing <input type="checkbox"/> All-or-nothing thinking <input type="checkbox"/> Mind-reading <input type="checkbox"/> Other: _____	<input type="checkbox"/> Tight chest <input type="checkbox"/> Rapid heartbeat <input type="checkbox"/> Shallow breathing <input type="checkbox"/> Nausea <input type="checkbox"/> Knot in stomach <input type="checkbox"/> Sweaty palms <input type="checkbox"/> Shaking <input type="checkbox"/> Muscle tension <input type="checkbox"/> Hot face / flushing <input type="checkbox"/> Cold hands/feet <input type="checkbox"/> Light-headedness <input type="checkbox"/> Numbness <input type="checkbox"/> Restlessness / agitation <input type="checkbox"/> Other: _____	<input type="checkbox"/> Withdrew / shut down <input type="checkbox"/> Lashed out <input type="checkbox"/> Avoided / escaped <input type="checkbox"/> People-pleased <input type="checkbox"/> Over-apologized <input type="checkbox"/> Argued / escalated <input type="checkbox"/> Used substances <input type="checkbox"/> Overate / restricted <input type="checkbox"/> Reassurance-seeking <input type="checkbox"/> Compulsive checking <input type="checkbox"/> Tried to control <input type="checkbox"/> Self-harm urges/actions <input type="checkbox"/> Other: _____	<input type="checkbox"/> Very Low <input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High <input type="checkbox"/> Very High <input type="checkbox"/> Contributing factors (describe): _____

11)What behaviors or urges were associated with each feeling listed in step 8) above?

Externalizing and Internalizing Behaviors and Emotions

Externalizing:

- Aggression
- Tantrums
- Defiance
- Noncompliance w/ rules
- Disobedience
- Lying & stealing
- Destructiveness
- Self-control difficulties

Internalizing:

- Withdrawal
- Limited activity levels
- Fixated on certain thoughts
- Avoidance of social situations
- Anxiety
- Depression
- Inappropriate crying

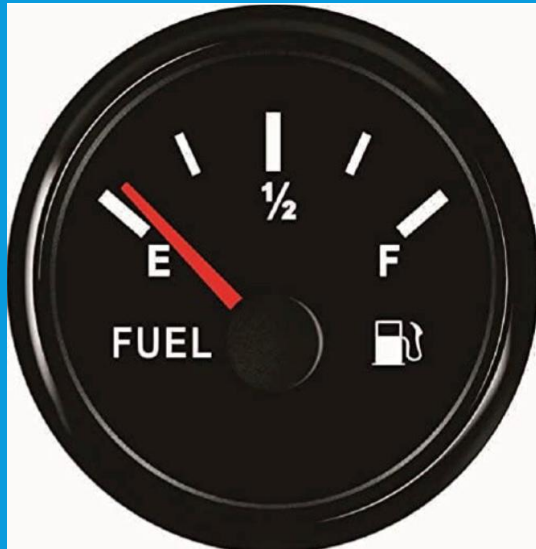
HOLES ANALYSIS TEMPLATE

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7. What behaviors or urges were associated with each feeling?
8. What was your energy balance before the activation? 0-10

DBT HOLES ANALYSIS TEMPLATE

1. What Happened?	2. Emotions Felt	3. Thoughts	4. Sensations	5. Behaviours/urges	6. pre-hole energy
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12) WHAT WAS YOUR ENERGY BALANCE BEFORE THE ACTIVATION? 0-10



ENERGY RESERVES

Low
High



High
Low



CRISIS RISK

Low
High



Outside
Inside



WINDOW OF TOLERANCE

HOLES ANALYSIS

ALGORITHM

- Find a higher than your baseline number on your holes diary to do a chain analysis
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- 3. Note in writing, on the template, the sequence of feelings you experienced during this period. Rate each on a scale of 0-10 with 10 being the most intense you’ve ever felt this feeling
- 4. Observe and note the physical sensations you experienced during the activation without judging or trying to change them
- 5. Note in writing, on the template, the thoughts that accompanied each of your feelings
- 6. Note what you did, or wanted to do but stopped yourself from doing during the period of activation
- 7. Note on a 0-10 scale what your energy balance, reserves or stores (how full your gas tank), and crisis risk were just prior to the time for which you’re doing the chain analysis.

TEMPLATE

Remember to stay in window of tolerance by pendulating

What was the topography of your activation?

Was there a trigger(s) for the activation?

What did you feel when activated ?

Notice the sensations in your body without judging or trying to change them

What thoughts were associated with each feeling listed above?

What behaviors or urges were associated with each feeling?

What was your energy balance before the activation? 0-10

DBT HOLES ANALYSIS TEMPLATE

1. What Happened?	2. Emotions Felt	3. Thoughts	4. Sensations	5. Behaviours/urges	6. pre-hole energy
Describe the situation factually.	<input type="checkbox"/> Anxiety / Fear <input type="checkbox"/> Anger / Rage <input type="checkbox"/> Irritation / Frustration <input type="checkbox"/> Sadness / Grief <input type="checkbox"/> Shame <input type="checkbox"/> Guilt <input type="checkbox"/> Hurt <input type="checkbox"/> Loneliness <input type="checkbox"/> Embarrassment <input type="checkbox"/> Overwhelm <input type="checkbox"/> Numbness <input type="checkbox"/> Other: _____	<input type="checkbox"/> I'm not good enough. <input type="checkbox"/> This is my fault. <input type="checkbox"/> They are judging me. <input type="checkbox"/> Something bad will happen. <input type="checkbox"/> I can't handle this. <input type="checkbox"/> I'm going to fail. <input type="checkbox"/> They don't care about me. <input type="checkbox"/> I always screw up. <input type="checkbox"/> Catastrophizing <input type="checkbox"/> All-or-nothing thinking <input type="checkbox"/> Mind-reading <input type="checkbox"/> Other: _____	<input type="checkbox"/> Tight chest <input type="checkbox"/> Rapid heartbeat <input type="checkbox"/> Shallow breathing <input type="checkbox"/> Nausea <input type="checkbox"/> Knot in stomach <input type="checkbox"/> Sweaty palms <input type="checkbox"/> Shaking <input type="checkbox"/> Muscle tension <input type="checkbox"/> Hot face / flushing <input type="checkbox"/> Cold hands/feet <input type="checkbox"/> Light-headedness <input type="checkbox"/> Numbness <input type="checkbox"/> Restlessness / agitation <input type="checkbox"/> Other: _____	<input type="checkbox"/> Withdrew / shut down <input type="checkbox"/> Lashed out <input type="checkbox"/> Avoided / escaped <input type="checkbox"/> People-pleased <input type="checkbox"/> Over-apologized <input type="checkbox"/> Argued / escalated <input type="checkbox"/> Used substances <input type="checkbox"/> Overate / restricted <input type="checkbox"/> Reassurance-seeking <input type="checkbox"/> Compulsive checking <input type="checkbox"/> Tried to control <input type="checkbox"/> Self-harm urges/actions <input type="checkbox"/> Other: _____	<input type="checkbox"/> Very Low <input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High <input type="checkbox"/> Very High <input type="checkbox"/> Contributing factors (describe): _____



BRUCE'S HOLES ANALYSIS P. 108-110 of manual

- Bruce was a 66-year-old, 6'3", charming and friendly, owner of an auto body shop. He humorously quipped that he was still floored that Sandra, his wife, had put up with his b... s.... for more than forty years.
- Over the last 25 years, Bruce had seen several psychiatrists and psychotherapists, who had diagnosed him with chronic depression. His symptoms fluctuated in intensity from relatively mild to severe with accompanying occasional suicidal ideation.
- Bruce had tried several different medications; some helped for a short period of time and then "wore off". He had come to believe that they were not the answer. He hated their side effects: feeling emotionally disconnected, gaining weight, and losing his libido.
- Bruce joined the Simple group and was learning to use diary cards. He joked that he had always been a problem student and so he was happy to keep using the beginner target "feeling bad" forever.
- At one of the group sessions, Bruce volunteered to work on his diary cards to find intermediate targets.

HOLES ANALYSIS TEMPLATE

ALGORITHM

- Find a higher than your baseline number on your holes diary to do a holes analysis
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- 6. Note what you did, or wanted to do but stopped yourself from doing during the period of activation
- 7. Note on a 0-10 scale what your energy balance, reserves or stores (how full your gas tank), and crisis risk were just prior to the time for which you’re doing the chain analysis.

Remember to stay in window of tolerance by pendulating

What was the topography of your activation?

Was there a trigger(s) for the activation?

What did you feel when activated ?

Notice the sensations in your body without judging or trying to change them

What thoughts were associated with each feeling listed above?

What behaviors or urges were associated with each feeling?

What was your energy balance before the activation? 0-10

- "As he was doing the chain analysis, Bruce was becoming emotional. He remembered his personal dashboard and using his preferred distress tolerance skill repeatedly worked on returning to the window of emotional tolerance needed to continue to do therapeutic work"



UPDATED PERSONAL SKILLS LIST

Distress tolerance skills

1. Grounding skills- Set a daily intention
2. “ - Sensory soothing toolkit
3. “ -The 5,4,3,2,1 method
4. “ -The emotional freedom technique
5. REST (or PEST) Pause
6. Radical acceptance statements (please specify)
7. Distraction plan “
8. Self-soothing plan
9. Safe place visualization
10. Cue controlled relaxation
11. Rediscovering your values (please specify)
12. Rehearse values-based behavior or edit/splice/paste
13. Connect with your higher power “
14. Live in the present moment
15. Use self-encouraging coping thoughts
16. Radical acceptance
17. Use self-affirming statements
18. Balance feelings and threat
19. Create new coping strategies
20. Create an emergency coping plan
21. Box breathing
22. Cold temperatures
23. High intensity exercise
24. Progressive muscular relaxation
25. Paced breathing
26. Side to side eye movement.

CHAIN ANALYSIS

ALGORITHM

- **Find a higher than your baseline number on your holes diary to do a holes analysis**
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TEMPLATE

Remember to stay in window of tolerance by pendulating

What was the topography of your activation?

Was there a trigger(s) for the activation?

What did you feel when activated ?

Notice the sensations in your body without judging or trying to change them

What thoughts were associated with each feeling listed above?

What behaviors or urges were associated with each feeling?

What was your energy balance before the activation? 0-10

BRUCE'S HOLES DIARY CARD

Diary Card - Hole Targets

Month: January

[illegible]

Notes:

HOLES ANALYSIS TEMPLATE

ALGORITHM

- Find a higher than your baseline number on your holes diary to do a holes analysis
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- 7. Note on a 0-10 scale what your energy balance, reserves or stores (how full your gas tank), and crisis risk were just prior to the time for which you’re doing the chain analysis.

Remember to stay in window of tolerance by pendulating

What was the topography of your activation?

Was there a trigger(s) for the activation?

What did you feel when activated ?

Notice the sensations in your body without judging or trying to change them

What thoughts were associated with each feeling listed above?

What behaviors or urges were associated with each feeling?

What was your energy balance before the activation? 0-10

BRUCE'S HOLES DIARY CARD

MACROTOPOGRAPHY

Diary Card - Hole Targets

Month: January

[illegible]

Notes:

BRUCE'S HOLES ANALYSIS

MICROTOPOGRAPHY

- Microtopography: “Suddenly, they were passed on the road, by a large and loud pick-up truck, which seemed to have come out of nowhere, and had, after recklessly overtaking them, swerved back into their lane, just a couple of feet ahead of their vehicle. Sandra, a corrections officer, did not endure misbehavior well, and reaching over to the steering wheel, blasted the horn for what seemed like an eternity. For a moment, Bruce froze, and then, briskly pushed Sandra’s hand away, and gave her his angriest look. Not a word was spoken for the remainder of the drive. Sandra, quietly indignant, stared out the window.”

HOLES ANALYSIS TEMPLATE

ALGORITHM

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Remember to stay in window of tolerance by pendulating

What was the topography of your activation?

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What thoughts were associated with each feeling listed above?

What behaviors or urges were associated with each feeling?

What was your energy balance before the activation? 0-10

BRUCE'S HOLES ANALYSIS

- **Triggers:** “Bruce said that he had been to the funeral of an elderly aunt. It had taken place in a town a 2-hour drive from his home. After the funeral, he and Sandra were driving back. Bruce was quietly absorbed in his thoughts. Having contact with his family always had an effect on him. Suddenly, they were passed on the road, by a large and loud pick-up truck, which seemed to have come out of nowhere, and had, after recklessly overtaking them, swerved back into their lane, just a couple of feet ahead of their vehicle. Sandra, a corrections officer, did not endure misbehavior well, and reaching over to the steering wheel, blasted the horn for what seemed to Bruce, like an eternity.”

CHAIN ANALYSIS

ALGORITHM

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TEMPLATE

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What behaviors or urges were associated with each feeling?

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BRUCE'S HOLES ANALYSIS

- **Emotions:** “Naming his emotions, Bruce thought he had felt: Sad-hurt, depressed, guilty, vulnerable, and lonely.” Angry-humiliated, frustrated, and annoyed Fearful-scared, anxious, insecure, and rejected. These feelings were awfully familiar to him; he had felt them often.”
- **Thoughts** associated with these feelings: “Driving home, Bruce had been feeling sad, thinking about his dysfunctional family of origin that he had seen at the funeral. When Sandra honked the horn, he thought she was inappropriate, rude, and confrontational, and was going to get them in trouble. He thought she did not understand him and only added to his pain. This happened all the time and would just keep happening, he would never be happy. Sandra had honked the horn because she was upset with him for being distant and quiet.”
-
- **Behaviors:** “Using the list of internalizing and externalizing behaviors, Bruce realized: He had become withdrawn. He limited his activity level. He had fixated on a series of negative thoughts. He had looked depressed.”
- “These feelings thoughts and behaviors were some of the features of the hole Bruce had fallen into. Because similar fights happened between him and Sandra about once a month, and took several days to recover from, Bruce was eager to find ways of avoiding them.”

HOLES ANALYSIS

ALGORITHM

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What behaviors or urges were associated with each feeling?

What was your energy balance before the activation? 0-10

BRUCE'S HOLES ANALYSIS

- Personal dashboard prior to incident: “Bruce said that he had been to the funeral of an elderly aunt. It had taken place in a town a 2-hour drive from his home. After the funeral, he and Sandra were driving back. Bruce was quietly absorbed in his thoughts. Having contact with his family always had an effect on him. Suddenly, they were passed on the road, by a large and loud pick-up truck, which seemed to have come out of nowhere, and had, after recklessly overtaking them, swerved back into their lane, just a couple of feet ahead of their vehicle. Sandra, a corrections officer, did not endure misbehavior well, and reaching over to the steering wheel, blasted the horn for what seemed like an eternity.”

BREAK

HOMEWORK FOR THE COMING WEEK



- Submit questions, comments, feedback to itssimple2023@gmail.com
- Read simple manual session 12
- Do at least 2 chain analysis in the next week
- Continue reviewing and practicing your crisis plans and doing holes diary cards
- Continue practicing and tracking all the skills you've learned. use your skills list
- Use the homework habits checklist each week

- If time permits after Joan and Nicole present the physiological distress tolerance skills and Kate does the summary, we'll try using the holes analysis cheat sheet and your holes diary card to practice a holes analysis.

HOLES ANALYSIS

ALGORITHM

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DBT HOLES ANALYSIS TEMPLATE

1. What Happened?	2. Emotions Felt	3. Thoughts	4. Sensations	5. Behaviours/urges	6. pre-hole energy
Describe the situation factually.	<input type="checkbox"/> Anxiety / Fear <input type="checkbox"/> Anger / Rage <input type="checkbox"/> Irritation / Frustration <input type="checkbox"/> Sadness / Grief <input type="checkbox"/> Shame <input type="checkbox"/> Guilt <input type="checkbox"/> Hurt <input type="checkbox"/> Loneliness <input type="checkbox"/> Embarrassment <input type="checkbox"/> Overwhelm <input type="checkbox"/> Numbness <input type="checkbox"/> Other: _____	<input type="checkbox"/> I'm not good enough. <input type="checkbox"/> This is my fault. <input type="checkbox"/> They are judging me. <input type="checkbox"/> Something bad will happen. <input type="checkbox"/> I can't handle this. <input type="checkbox"/> I'm going to fail. <input type="checkbox"/> They don't care about me. <input type="checkbox"/> I always screw up. <input type="checkbox"/> Catastrophizing <input type="checkbox"/> All-or-nothing thinking <input type="checkbox"/> Mind-reading <input type="checkbox"/> Other: _____	<input type="checkbox"/> Tight chest <input type="checkbox"/> Rapid heartbeat <input type="checkbox"/> Shallow breathing <input type="checkbox"/> Nausea <input type="checkbox"/> Knot in stomach <input type="checkbox"/> Sweaty palms <input type="checkbox"/> Shaking <input type="checkbox"/> Muscle tension <input type="checkbox"/> Hot face / flushing <input type="checkbox"/> Cold hands/feet <input type="checkbox"/> Light-headedness <input type="checkbox"/> Numbness <input type="checkbox"/> Restlessness / agitation <input type="checkbox"/> Other: _____	<input type="checkbox"/> Withdrew / shut down <input type="checkbox"/> Lashed out <input type="checkbox"/> Avoided / escaped <input type="checkbox"/> People-pleased <input type="checkbox"/> Over-apologized <input type="checkbox"/> Argued / escalated <input type="checkbox"/> Used substances <input type="checkbox"/> Overate / restricted <input type="checkbox"/> Reassurance-seeking <input type="checkbox"/> Compulsive checking <input type="checkbox"/> Tried to control <input type="checkbox"/> Self-harm urges/actions <input type="checkbox"/> Other: _____	<input type="checkbox"/> Very Low <input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High <input type="checkbox"/> Very High <input type="checkbox"/> Contributing factors (describe): _____

A NEW HARBINGER SELF-HELP WORKBOOK

MORE THAN 500,000 COPIES SOLD!

The Dialectical Behavior Therapy Skills Workbook

SECOND EDITION

Practical DBT Exercises for
Learning Mindfulness, Interpersonal
Effectiveness, Emotion Regulation
& Distress Tolerance

MATTHEW MCKAY, PhD • JEFFREY C. WOOD, PsyD
JEFFREY BRANTLEY, MD



NICOLE

JOAN



WORKBOOK P. 69-90

DISTRESS TOLERANCE 5

When we are STRESSED we find ways to cope

Sometimes we cope with a problem behavior. Looking at the PROS & CONS of our coping behaviors, we can decide if we want to change the way we cope.

	Doing Problem Behavior (Giving In)	Not Doing Problem Behavior (Healthy Coping)
Pros	What do I like about doing it? (instant relief)	What do I like about coping with skills? (long term benefits)
Cons	What don't I like about doing it? (long term effects)	What don't I like about coping with skills? (instant feelings)

If we decide to do something different we can use these three sets of skills:

When you need to distract from people, events or feelings that are difficult to handle remember ACCEPTS

Activities
Do something else: work on a hobby, go for a walk

Contributions
Do something for someone else: compliment someone, do something nice

Comparisons
Think about how it's better: than other situations, a time you felt worse

Emotions
Do something that feels different: watch a movie, listen to music

Push Away
Put the problem away: focus on something else, yell NO! to the problem

Thoughts
Distract your thoughts: count, sing a song

Sensations
Feel something else: Hold ice, squeeze a ball

When you need to make yourself feel better to prevent problem behaviors, self-soothe with your senses

Vision
Look at something pretty
Watch something on TV
People watch
Window shop

Hearing
Listen to soothing music
Pay attention to sounds
Sing your favorite song
Play an instrument

Smell
Use a favorite soap
Burn a scented candle
Make popcorn
Smell roses

Taste
Chew your favorite gum
Eat a favorite food
Eat mindfully
Drink hot chocolate

Touch
Take a hot bath
Pet your dog or cat
Hug someone
Put on a comfy shirt

When you can't escape a situation but want to make it easier to deal with, IMPROVE the moment

Imagery
Imagine a safe place
Imagine life is going well
Imagine a relaxing place

Meaning
Find a reason for it
Focus on the positive
Think of how you'll be better

Prayer
Ask for strength
Turn it over to a higher power
Ask your wise mind for help

Relaxing
Listen to a relaxation tape
Massage your neck
Practice yoga

One thing at a time
Be mindful
Focus attention on one thing
Breathe!

Vacation
Take a break
Get in bed for 5 minutes
Take a breather from work

Encouragement
Cheerlead yourself
"It will get better!"

- Today is our last distress tolerance skills session
- We'll discuss the TIPPSE "physiological" distress tolerance skills. (physiological skills make you tipsy with an e)
- TIPPSE=
 1. T is for temperature,
 2. I for intense exercise, (HIIT - high intensity interval training),
 3. P for progressive muscular relaxation
 4. P is for paced breathing
 5. S is for side-to-side eye movement and
 6. E is for emotional freedom technique
- In the next skills session, we'll start discussing mindfulness skills

UPDATED PERSONAL SKILLS LIST

Distress tolerance skills

1. Grounding skills- Set a daily intention
2. “ - Sensory soothing toolkit
3. “ -The 5,4,3,2,1 method
4. “ -The emotional freedom technique
5. REST (or PEST) Pause
6. Radical acceptance statements (please specify)
7. Distraction plan “
8. Self-soothing plan
9. Safe place visualization
10. Cue controlled relaxation
11. Rediscovering your values (please specify)
12. Rehearse values-based behavior or edit/splice/paste
13. Connect with your higher power “
14. Live in the present moment
15. Use self-encouraging coping thoughts
16. Radical acceptance
17. Use self-affirming statements
18. Balance feelings and threat
19. Create new coping strategies
20. Create an emergency coping plan
21. Box breathing
22. Cold temperatures
23. High intensity exercise
24. Progressive muscular relaxation
25. Paced breathing
26. Side to side eye movement.

The DBT Diary

Note how many times each day you use these key skills. For items marked with *, briefly describe what you did in the “Specifics” column. Make copies of the blank diary before using it and do your best to complete one every week.

Core Skills	Coping Strategies	Mon.	Tues.	Wed.
Distress Tolerance	Stopped Self-Destructive Action			
	Used REST Strategy			
	Used Radical Acceptance			
	Distracted from Pain			
	Engaged in Pleasurable Activities*			
	Soothed Myself*			
	Practiced Relaxation			
	Committed to Valued Action*			
	Connected with My Higher Power			
	Used Coping Thoughts & Strategies*			
	Analyzed Feelings-Threat Balance			
	Used Physiological Coping Skills* Today			X
Mindfulness	Practiced Thought Defusion			
	Practiced Mindful Breathing			
	Used Wise Mind			
	Practiced Beginner’s Mind			
	Practiced Self-Compassion			
	Practiced Doing What’s Effective			
	Completed a Task Mindfully			
	Practiced Loving-kindness Meditation			

THE DBT PHYSIOLOGICAL DISTRESS TOLERANCE SKILLS

- When we're overwhelmed, whether it's panic, anger, shame, or a sudden spike of stress, our body often takes over long before our mind can catch up. In those moments, trying to "think your way out of it" usually doesn't work. The emotional brain is too activated, the thinking brain is partially offline, and advice like "calm down" or "think differently" can feel impossible. That's why DBT teaches a set of physiological distress tolerance skills.
- These skills work directly with your nervous system, quickly shifting your body out of crisis mode so your mind can become available again. Think of them as "Emergency brakes" for your nervous system. They don't solve the problem, but they help you get out of the emotional danger zone so you can then use your other coping skills.
- These techniques don't require insight, deep reflection, or perfect self-control. They rely on simple biological reflexes built into all of us. When you activate those reflexes, your heart rate drops, your breathing stabilizes, your muscles release, and your emotional intensity comes down.
- These skills can help slow down racing thoughts, reduce panic or overwhelm, interrupting an urge to yell, shut down, self-harm, escape, shift from "survival mode" back into "thinking mode" and give you a moment of control when everything feels out of control
- These skills are fast-acting, practical, and research-backed. They work not because you're trying harder, but because they leverage your body's built-in calming systems, your vagus nerve, your dive reflex, and your emergency energy systems.
- You don't have to master these skills immediately. Just knowing they exist, and practicing them a few times, gives you real tools you can use the next time your emotions suddenly surge.
- Each one is simple. Each one works quickly and each one gives you a way to stay safe, grounded, and in control long enough to contemplate and respond rather than simply reacting.

WHY ARE PHYSIOLOGICAL SKILLS SO HELPFUL?



they can quickly reduce the intensity of overwhelming emotions



they are biological in nature, easy to use and don't require much thought



they trigger the parasympathetic relaxation response, which promotes a return to the window of tolerance

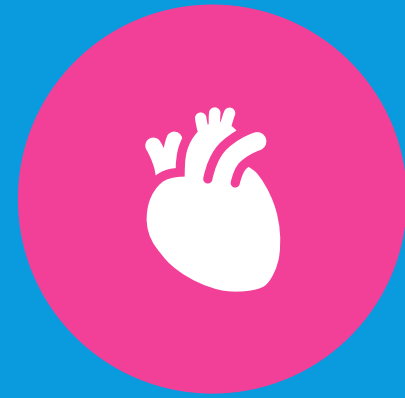
REMEMBER TO...



keep track of the skills
that work best for you
so you can use them



add a physiological
coping strategy to your
favorites list



be mindful of any medical issues
that might impact your blood
pressure, balance or heart rate

PHYSIOLOGICAL DISTRESS TOLERANCE SKILLS

Distress Tolerance Skill 1: TIPS E



TEMPERATURE

Change your body temperature. Splash your face with cold water, hold an ice cube, let car AC blow on your face, take a cold shower



INTENSE EXERCISE

Do intense exercise to match your intense emotion. Sprint to the end of the street, do jumping jacks, push ups, intense dancing



PACED BREATHING

Try Box Breathing: Breathe in for 4 seconds, hold it for 4 seconds, breathe out 4, and hold 4. Start again, and continue until you feel more calm.



PAIRED MUSCLE RELAXATION

Focus on 1 muscle group at a time. Tighten your muscles as much as possible for 5 seconds. Then release & relax. Repeat with other muscle groups.

- 1. Using cold Temperatures
- 2. High intensity interval training
- 3. Paced slow breathing
- 4. Progressive muscular relaxation
- 5. Side-to-side eye movement
- 6. Emotional freedom technique/tapping

PHYSIOLOGICAL DISTRESS TOLERANCE SKILLS

Distress Tolerance Skill 1: TIPPSE



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1. USING COLD TEMPERATURES

This technique activates the body's diving reflex. It is present in most mammals

The diving reflex allows us to conserve oxygen while under water by slowing our metabolism

To stimulate this reflex, submerge your face in very cold water.

This results in your heart rate slowing down

Alternatively, you can run your hands under cold water, take a cold shower, or use an ice pack

PHYSIOLOGICAL DISTRESS TOLERANCE SKILLS

Distress Tolerance Skill 1: TIPS



TEMPERATURE

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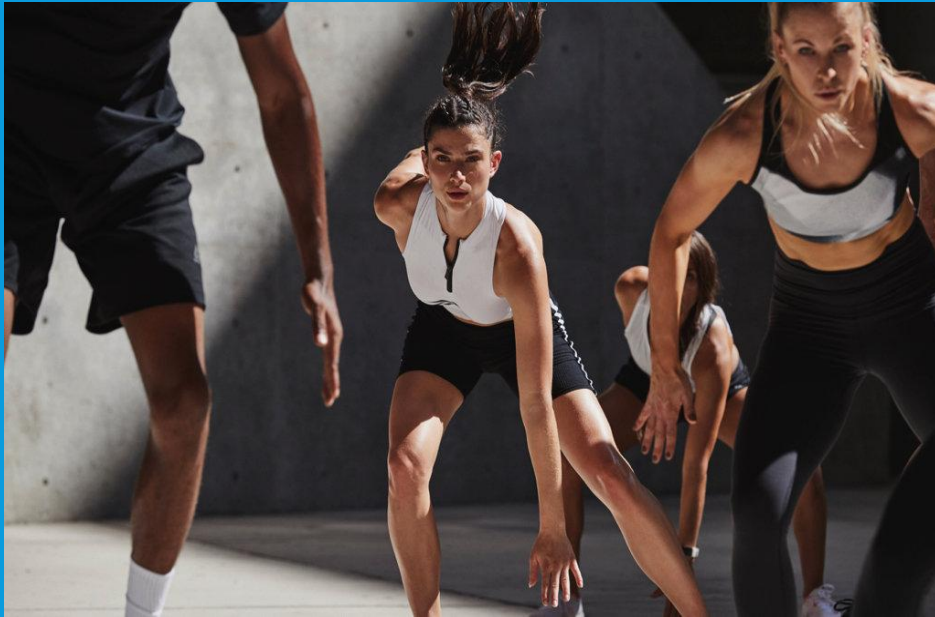


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- 3. Paced slow breathing
- 4. Progressive muscular relaxation
- 5. Side-to-side eye movement
- 6. Emotional freedom technique/tapping

2. HIGH-INTENSITY INTERVAL TRAINING



Research has clearly demonstrated that exercise is an effective treatment for mild to moderate depression, anxiety, panic disorders and PTSD

Despite the proven benefits, many people experiencing mental health issues find it difficult to regularly engage in exercise

In HIIT you alternate between short intervals of high and low intensity exercise. HIIT has been shown to have equal benefits to exercising for longer periods of time

Can be an accessible strategy as you don't need a gym and this technique can be applied to many types of exercises

Try the HIIT log on pages 76-77 of the workbook

PHYSIOLOGICAL DISTRESS TOLERANCE SKILLS

Distress Tolerance Skill 1: TIPPSE



TEMPERATURE

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- 3. Paced slow breathing
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- 5. Side-to-side eye movement
- 6. Emotional freedom technique/tapping

3. PACED SLOW BREATHING



The goal is to regulate the rate at which you breathe to help you relax

Your breathing rate directly influences your heart rate and nervous system

Inhalation causes our heart rate to speed up and exhalation causes it to slow down

It's important that the exhalation be longer than the inhalation

It's easy to confuse which should be longer the inhalation or exhalation. Find a way to remember think for example "save the best for last"

Count to 10 with each cycle of inhalation and exhalation. Count 1-4 for the inhalation, and 5-10 for the exhalation

PHYSIOLOGICAL DISTRESS TOLERANCE SKILLS

Distress Tolerance Skill 1: TIPP S E



TEMPERATURE

Change your body temperature. Splash your face with cold water, hold an ice cube, let car AC blow on your face, take a cold shower



INTENSE EXERCISE

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PACED BREATHING

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PAIRED MUSCLE RELAXATION

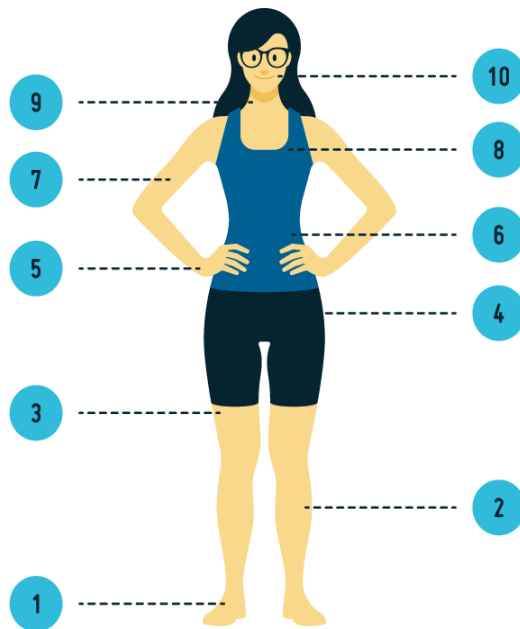
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- 3. Paced slow breathing
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- 6. Emotional freedom technique/tapping

4. PROGRESSIVE MUSCULAR RELAXATION

RELAX YOUR MUSCLES TO RELIEVE STRESS

Ease tension one muscle group at a time.



#DeStressMonday

DeStressMonday.org

DESTRESS
MONDAY

1. Requires systematically tightening and relaxing specific muscle groups to soothe anxiety

2. Typically, when we are experiencing anxiety or stress, we tighten our muscles

3. Emotional stress= muscle tension

4. Not only can progressive relaxation help with immediate distress, but it can also prevent future distress because muscles can't be relaxed and tense at the same time

5. Dr. Wolpe created a short form of this technique by using cue words to train your muscles to release tension page 81-82

6. Tense muscles, release quickly, pause to notice sensations, repeat

TENSING MUSCLES



There are 3 types of muscular tension choose the one that feels right for you

Active tension: tighten a groups of muscles until you notice the tension, then hold for 5 seconds, then relax

Threshold tension: A subtler version of active tension, tense muscles only to the point of barely noticing any tension. This may be helpful if you have muscular injuries

Passive tension: Requires you to notice tension in an area as opposed to creating tension in that area. Focus your thoughts on releasing the tension. ex. Think of tension melting away

PHYSIOLOGICAL DISTRESS TOLERANCE SKILLS

Distress Tolerance Skill 1: TIPP



TEMPERATURE

Change your body temperature. Splash your face with cold water, hold an ice cube, let car AC blow on your face, take a cold shower



INTENSE EXERCISE

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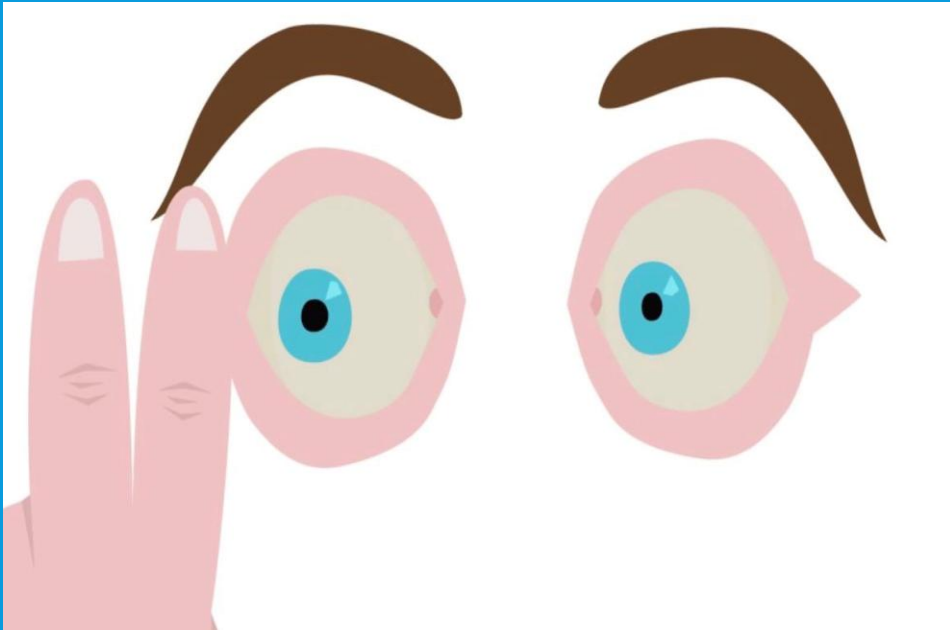


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- 4. Progressive muscular relaxation
- 5. Side-to-side eye movement
- 6. Emotional freedom technique/tapping

1. SIDE-TO-SIDE EYE MOVEMENT



Also known as bilateral stimulation

Is one of the components of EMDR (eye movement desensitization and reprocessing)

Requires you to move your eyes back and forth at a comfortable pace for 30 seconds

Research has shown that this technique helps reduce emotional distress and has a relaxing effect

You can practice this technique while recalling a mildly disturbing memory

WHAT IS EMDR?

EMDR stands for Eye Movement Desensitization and Reprocessing. It's a therapy developed to help people heal from traumatic or overwhelming experiences.

When something very upsetting happens, the brain sometimes doesn't process the memory properly. It gets "stuck" in its original form, with the same images, emotions, body sensations, and beliefs that were present at the time. That's why reminders of the event can feel so intense, even years later. EMDR helps the brain finish the natural healing process that didn't happen after the trauma.

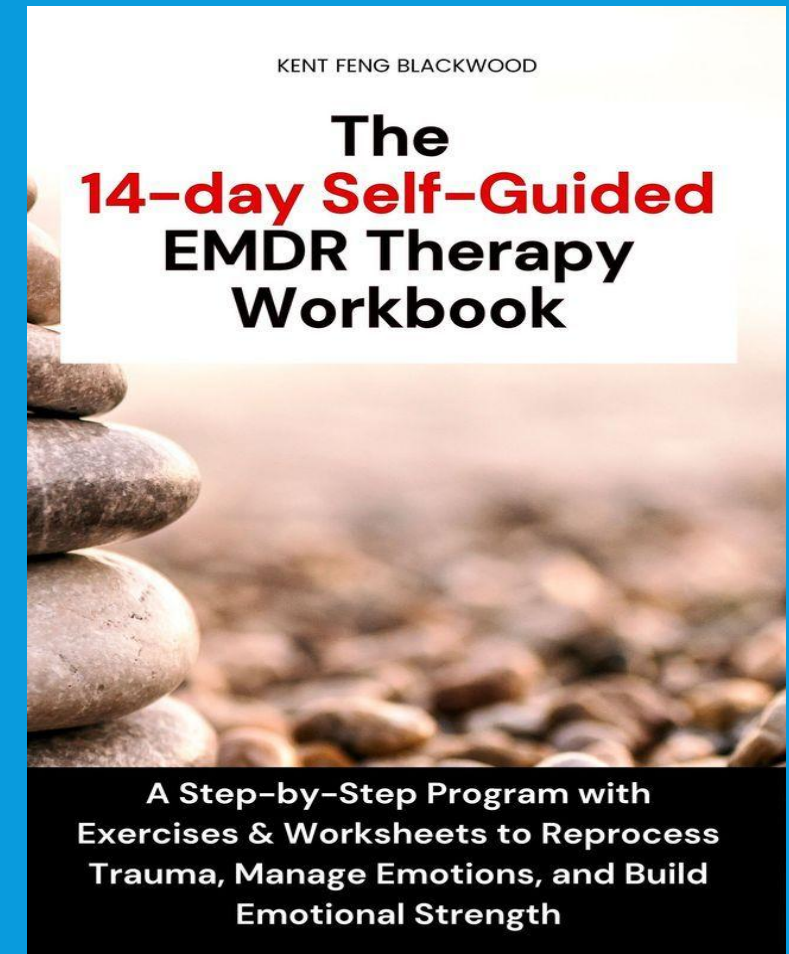
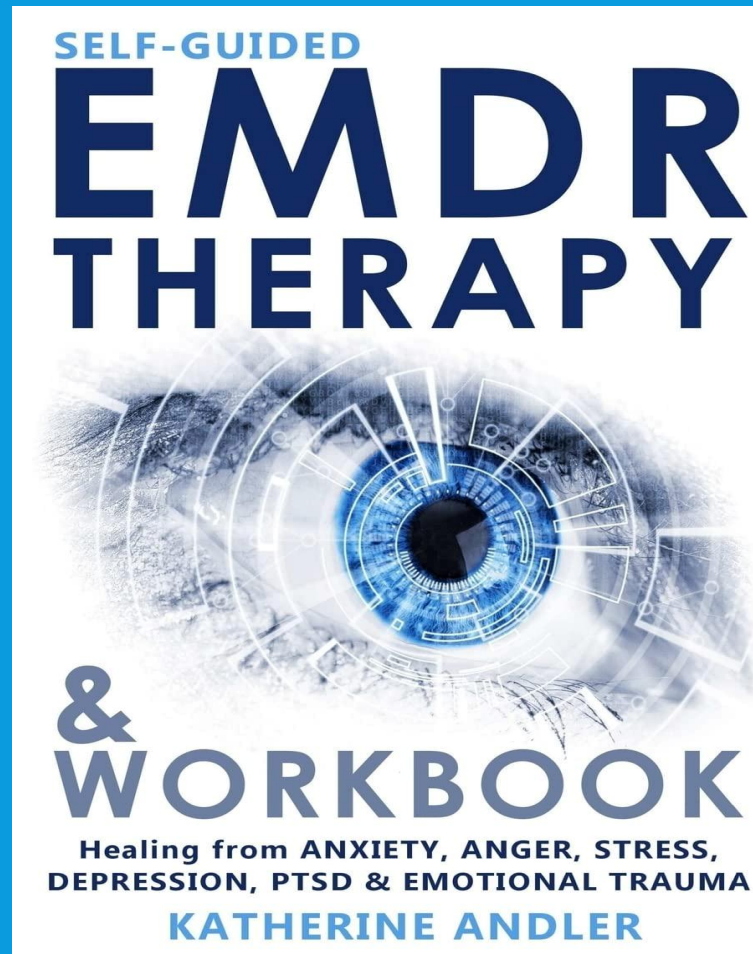
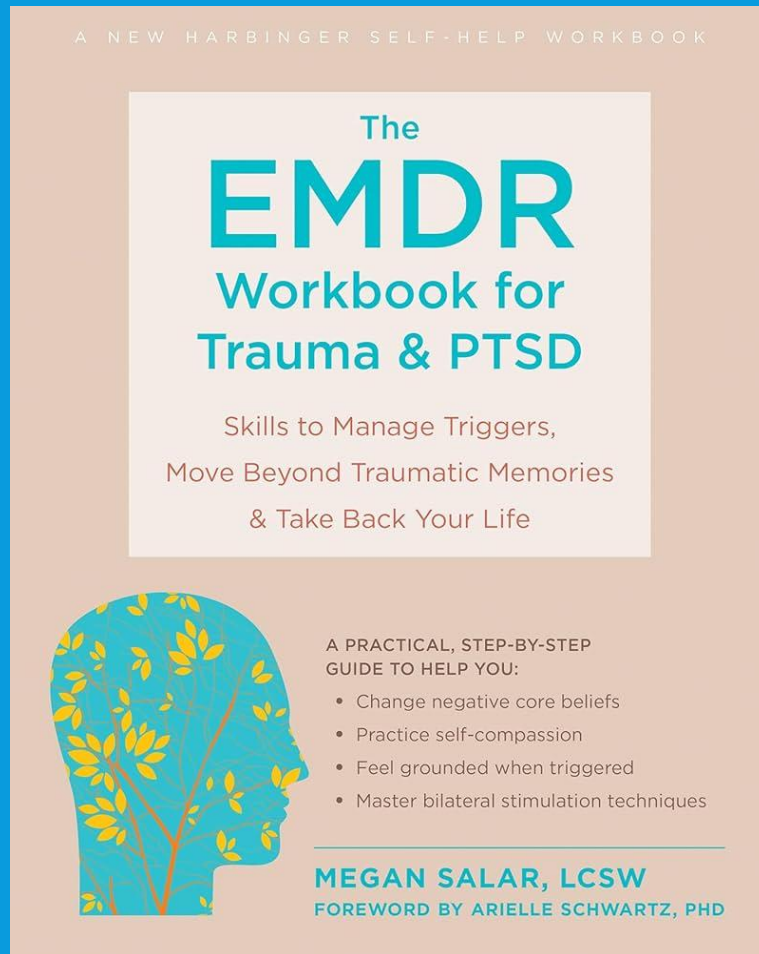
How it works

1. You bring up a difficult memory, just enough so your brain knows what you're working on.
2. At the same time, the therapist guides you through left-right stimulation (usually moving their fingers back and forth for your eyes to follow, or tapping, or tones).
3. This left-right rhythm seems to activate the brain's natural processing system, similar to what happens during REM sleep (the dreaming stage).
4. As the brain processes, the memory loses its "emotional charge." People often recall the same event later but feel calmer, more distant from it, and less triggered.
5. The therapist also helps you replace old negative beliefs ("I'm powerless," "I'm unsafe") with more accurate and helpful ones.

WHAT IS EMDR?

- What EMDR feels like
 - Most people describe it as:
 - noticing the memory becoming less sharp or less painful
 - new insights popping up
 - body tension releasing
 - feeling more grounded and in control
- What EMDR doesn't do
 - It doesn't erase the memory
 - It doesn't hypnotize
 - It doesn't require long descriptions of the trauma
- Instead, it helps the brain digest the memory so it can be stored in a healthier way.

EMDR workbooks don't teach you to do the full EMDR therapy by yourself, but they do guide you through safe, simplified versions of EMDR principles.



PHYSIOLOGICAL DISTRESS TOLERANCE SKILLS

Distress Tolerance Skill 1: TIPP



TEMPERATURE

Change your body temperature. Splash your face with cold water, hold an ice cube, let car AC blow on your face, take a cold shower



INTENSE EXERCISE

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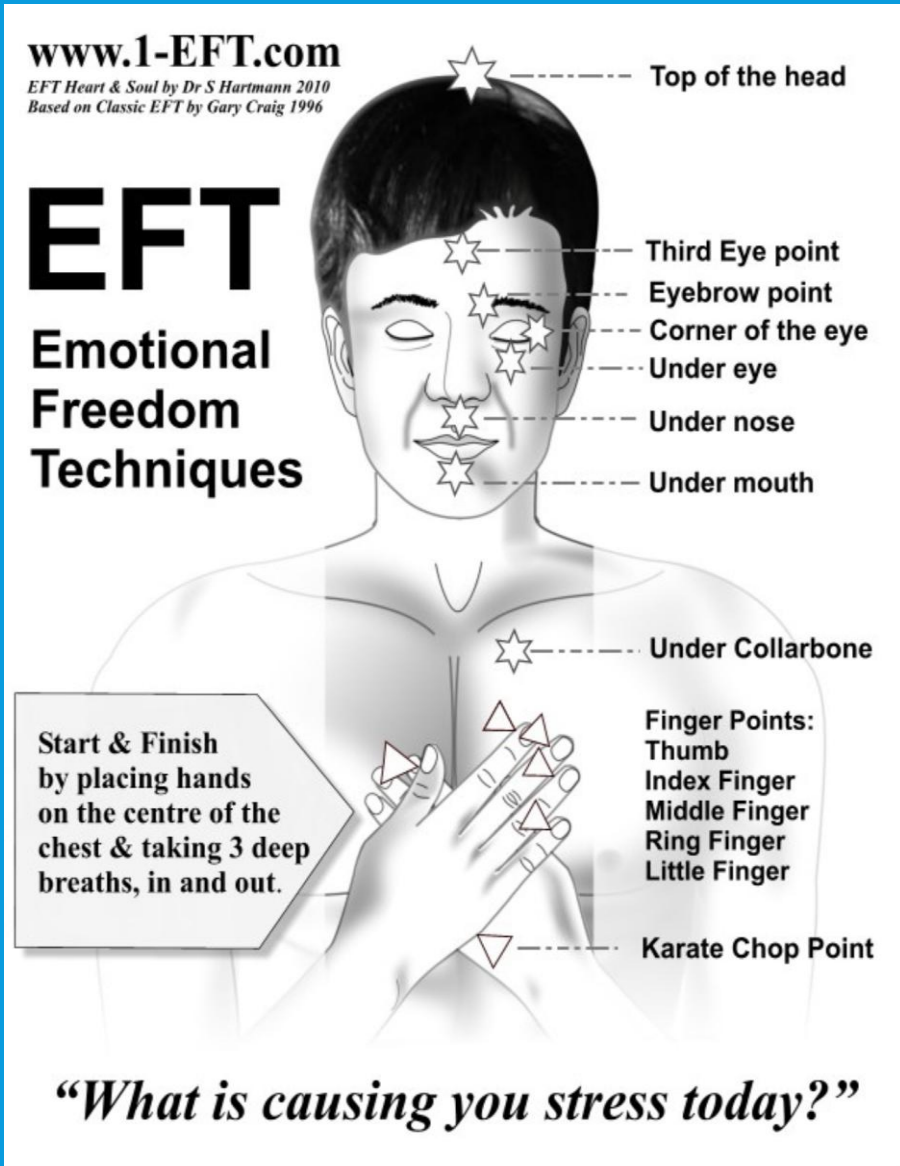


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- 3. Paced slow breathing
- 4. Progressive muscular relaxation
- 5. Side-to-side eye movement
- 6. Emotional freedom technique/tapping

6. EMOTIONAL FREEDOM TECHNIQUE/TAPPING



Involves 6 steps:

1. Rate your emotional intensity level on a scale of 0 – 10
2. Prepare a "set up statement": "even though (your issue) a deeply and completely accept myself"
3. Say the statement out loud three times while tapping the karate point on your hand
4. Tap the other points starting from the top of your head and ending under your arms. Keep repeating your statement. For each point repeat the statement is 5 to 10 times
5. After one go through rate your emotional intensity level again.
6. Repeat the process until your score is down to 1.

There are many EFT videos on YouTube. Script can be found under week 7 mindfulness practice.

PHYSIOLOGICAL SKILLS



- practice physiological skills and add them to your “skills toolkit”

use them in your crisis plans or whenever you need to return to the window of tolerance

In 2 weeks, we start mindfulness skills...

SUMMING UP: DISTRESS TOLERANCE SKILLS

- Over the past few weeks, we've explored the DBT distress tolerance skills designed to help you survive emotional storms without making things worse. These skills aren't about fixing the problem, changing other people, or transforming long-term patterns. They are about getting you safely through the moment when you feel overwhelmed, flooded, or at risk of reacting in ways you may later regret.
- Some important things to remember:
 1. You don't have to "think your way out" of every crisis. When emotions are intense, the thinking brain goes offline. Distress tolerance skills give you practical things you can do when logic, insight, and reasoning aren't available. They are meant to be incorporated into a crisis plan.
 2. These skills work with your body, not against it. Whether it's cooling your face, using paced breathing, grounding your senses, or doing a short burst of movement, you've learned techniques that shift your nervous system out of crisis mode and into a calmer, more manageable state.
 3. Distress tolerance skills create a pause, just long enough to choose. They don't erase the emotion, but they lower the intensity so you can avoid harm, break old patterns, ride the wave rather than get pulled under it and make wiser decisions. That pause is the space where change becomes possible.

SUMMING UP: DISTRESS TOLERANCE SKILLS

- 4. You now have a menu of strategies you can reach for. You practiced:
 - Physiological skills (temperature change, paced breathing, muscle relaxation, exercise)
 - Distraction and grounding tools
 - Self-soothing with the five senses
 - Reality acceptance skills like radical acceptance, willingness, and turning the mind
- Not every skill will work for every moment. That's normal. The goal is to have options, a toolkit, not a single hammer.
- 5. These skills get easier and more reliable with practice. Like any muscle, the more you use them, the more automatic they become. Even short, imperfect practice counts. Over time, you'll notice you're catching yourself earlier, calming faster, and making choices that line up better with the life you want.
- 6. You deserve tools that help you through suffering. Distress tolerance doesn't ask you to deny your pain, ignore your history, or suppress your emotions. Instead, it teaches you how to move through difficult moments with safety, stability, and self-respect.
- Distress tolerance skills help you survive emotional intensity without self-sabotage so you can respond, rather than react, and move toward a life that feels more stable and more your own.

UPDATED PERSONAL SKILLS LIST

Distress tolerance skills

1. Grounding skills- Set a daily intention
2. “ - Sensory soothing toolkit
3. “ -The 5,4,3,2,1 method
4. “ -The emotional freedom technique
5. REST (or PEST) Pause
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11. Rediscovering your values (please specify)
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15. Use self-encouraging coping thoughts
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19. Create new coping strategies
20. Create an emergency coping plan
21. Box breathing
22. Cold temperatures
23. High intensity exercise
24. Progressive muscular relaxation
25. Paced breathing
26. Side to side eye movement.

SUMMARY

Conversations
With
Kate

- If time permits after Joan and Nicole present the physiological distress tolerance skills and Kate does the summary, we'll try using the holes analysis cheat sheet and your holes diary card to practice a holes analysis.

HOLES ANALYSIS

ALGORITHM

- Find a higher than your baseline number on your holes diary to do a holes analysis
- 1. Map out the “topography” of the intensity of your activation around the time period for which you are doing the holes analysis. How did the intensity of your feelings, thoughts, and behaviors change over time?
- 2. On the holes analysis template, note in writing, if there were any events that were triggers for your increase in activation ?
- 3. Note in writing, on the template, the sequence of feelings you experienced during this period. Rate each on a scale of 0-10 with 10 being the most intense you’ve ever felt this feeling
- 4. Observe and note the physical sensations you experienced during the activation without judging or trying to change them
- 5. Note in writing, on the template, the thoughts that accompanied each of your feelings
- 6. Note what you did, or wanted to do but stopped yourself from doing during the period of activation
- 7. Note on a 0-10 scale what your energy balance, reserves or stores (how full your gas tank), and crisis risk were just prior to the time for which you’re doing the holes analysis.

TEMPLATE

Remember to stay in window of tolerance by pendulating

What was the topography of your activation?

Was there a trigger(s) for the activation?

What did you feel when activated ?

Notice the sensations in your body without judging or trying to change them

What thoughts were associated with each feeling listed above?

What behaviors or urges were associated with each feeling?

What was your energy balance before the activation? 0-10

DBT HOLES ANALYSIS TEMPLATE

1. What Happened?	2. Emotions Felt	3. Thoughts	4. Sensations	5. Behaviours/urges	6. pre-hole energy
Describe the situation factually.	<input type="checkbox"/> Anxiety / Fear <input type="checkbox"/> Anger / Rage <input type="checkbox"/> Irritation / Frustration <input type="checkbox"/> Sadness / Grief <input type="checkbox"/> Shame <input type="checkbox"/> Guilt <input type="checkbox"/> Hurt <input type="checkbox"/> Loneliness <input type="checkbox"/> Embarrassment <input type="checkbox"/> Overwhelm <input type="checkbox"/> Numbness <input type="checkbox"/> Other: _____	<input type="checkbox"/> I'm not good enough. <input type="checkbox"/> This is my fault. <input type="checkbox"/> They are judging me. <input type="checkbox"/> Something bad will happen. <input type="checkbox"/> I can't handle this. <input type="checkbox"/> I'm going to fail. <input type="checkbox"/> They don't care about me. <input type="checkbox"/> I always screw up. <input type="checkbox"/> Catastrophizing <input type="checkbox"/> All-or-nothing thinking <input type="checkbox"/> Mind-reading <input type="checkbox"/> Other: _____	<input type="checkbox"/> Tight chest <input type="checkbox"/> Rapid heartbeat <input type="checkbox"/> Shallow breathing <input type="checkbox"/> Nausea <input type="checkbox"/> Knot in stomach <input type="checkbox"/> Sweaty palms <input type="checkbox"/> Shaking <input type="checkbox"/> Muscle tension <input type="checkbox"/> Hot face / flushing <input type="checkbox"/> Cold hands/feet <input type="checkbox"/> Light-headedness <input type="checkbox"/> Numbness <input type="checkbox"/> Restlessness / agitation <input type="checkbox"/> Other: _____	<input type="checkbox"/> Withdrew / shut down <input type="checkbox"/> Lashed out <input type="checkbox"/> Avoided / escaped <input type="checkbox"/> People-pleased <input type="checkbox"/> Over-apologized <input type="checkbox"/> Argued / escalated <input type="checkbox"/> Used substances <input type="checkbox"/> Overate / restricted <input type="checkbox"/> Reassurance-seeking <input type="checkbox"/> Compulsive checking <input type="checkbox"/> Tried to control <input type="checkbox"/> Self-harm urges/actions <input type="checkbox"/> Other: _____	<input type="checkbox"/> Very Low <input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High <input type="checkbox"/> Very High <input type="checkbox"/> Contributing factors (describe): _____

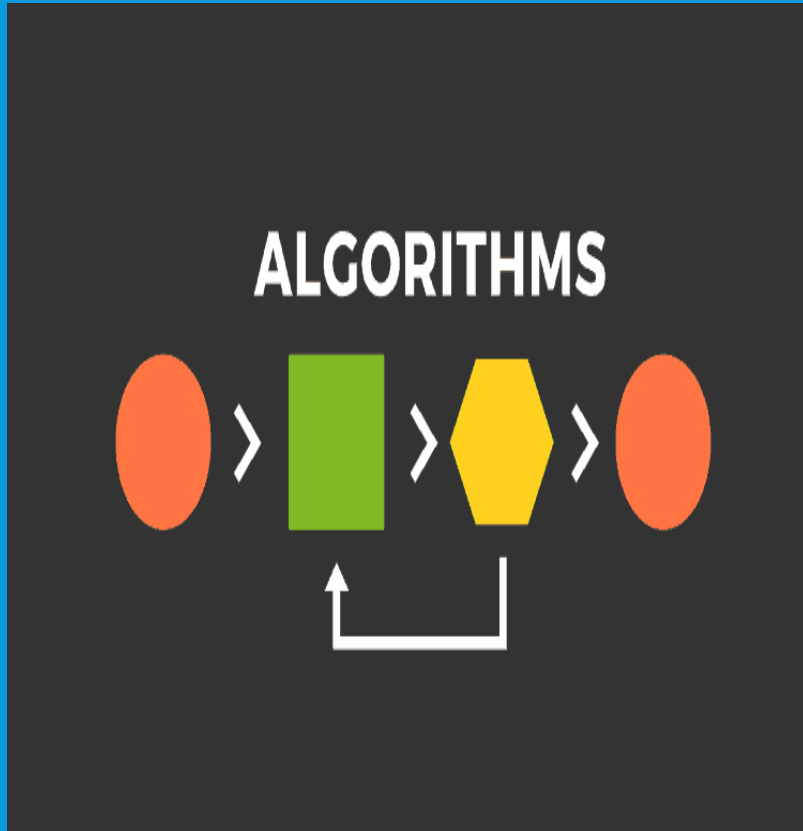
OPEN DISCUSSION



An hourglass with white sand is positioned in the center, resting on a wooden surface. To its right, a portion of a calendar is visible, showing dates 22, 23, 24, 29, 30, and 31. A dark grey rectangular box is overlaid across the middle of the image, containing the text 'SEE YOU NEXT SESSION' in white, bold, sans-serif capital letters.

SEE YOU NEXT SESSION

CRISIS PLAN ALGORITHM



- Developing your crisis plans and becoming skilled at using them involves 8 steps: This is the first Simple algorithm.
- 1. Understand the concept of holes you keep falling into or the specific crisis for which you are going to use the crisis plans
- 2. Identify some of the thoughts, feelings or behaviors that occur during the crisis that you want to work on. This is step 1 on the crisis plan template.
- 3. Complete the rest of your crisis plan template
- 4. Recall, in your mind, a real crisis from the past in which you fell into the hole you are working on and use the "editing, splicing, and pasting" technique, along with your skills and tools, to imagine a different outcome that incorporates your crisis plan.
- 5. Stay in the window of tolerance while editing, splicing, and pasting by pendulating.
- 6. Repeatedly visualize the new edited, spliced, and pasted version of the situation until you can visualize it without effort.
- 7. When a new crisis occurs work with it following these same steps.
- 8. practice, practice, practice.

Crisis Plan

1. Which crisis or “hole” is this plan for? What problematic feelings, thoughts, behaviours/maladaptive coping mechanisms/part/selves are present or active when I’m in this hole?

☐ anxiety/panic/flight

☐ dissociation

☐ withdrawing/running away

☐ fight/anger

☐ impulsive behaviour

☐ thinking of/hurting myself

☐ grief

☐ illegal behaviours

☐ thinking of/hurting others

☐ despair/giving up

☐ behaviours I later regret

☐ other specify: _____

☐ problems with boundaries

☐ addictive behaviour

2. What might trigger getting into this crisis/hole?

☐ something I perceive others saying/doing

☐ certain things in my environment

☐ other/describe: _____

☐ contact with certain people

☐ times of the day/year

☐ anniversaries

☐ being tired/stressed/not caring for myself

3. What other thoughts/feelings/behaviours are typical for me in these crisis/holes?

4. What are the things I or others do that tends to make these crisis/holes worse?

Applying Crisis Plan

5. Am I in a crisis/hole right now?
6. Am I doing anything that is making the crisis/hole worse? If yes, how do I hit the “pause button”?
7. Once I hit the pause button, I will try to follow steps to lower my activation/distress. I will resort to the next step only after trying the previous one unsuccessfully.

Step 1. Things I can do on my own to lower my activation/distress:

Step 2. Non-mental health professionals that may be helpful in helping lower my activation/distress and who I have briefed (Who are they? How do I reach them? What do I say to them?).

Step 3. Is there an “as needed” medication that might help me? (What medication and what dosage?).

Step 4: Professional resources that might be helpful in lowering my distress. (Who? How do I reach them? Times available? What do I say?).

Diary Card - Hole Targets

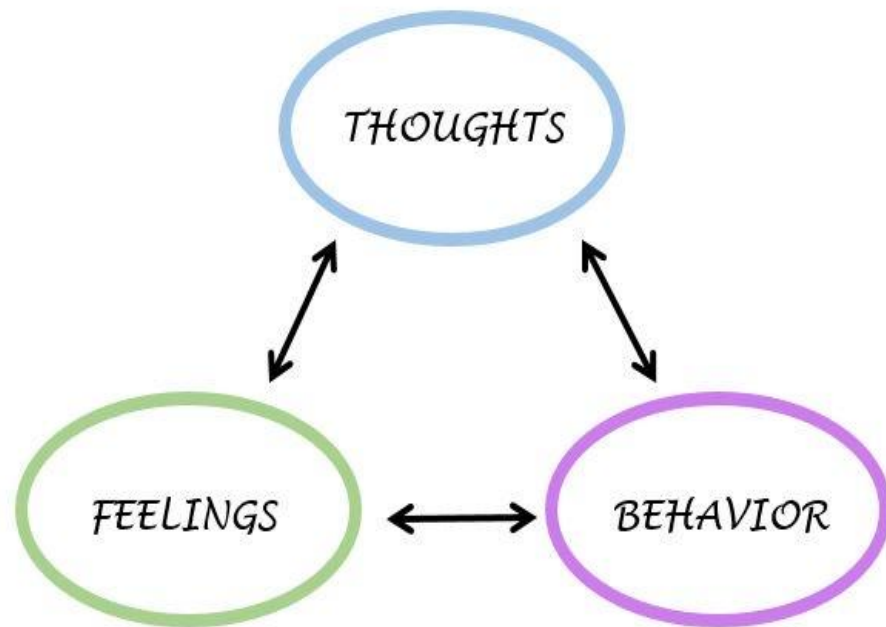
Month: January

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Notes:

DIARY CARD TARGETS

The Cognitive Triangle



- Like crisis plan holes, diary card targets can be:
- 1. **Feelings:** to help you identify your feelings consult the wheel of feelings (see below) which we also used in trying to identify crisis plan holes.
- 2. **Thoughts:** consider ANTS or automatic negative thoughts (below)
- 3. **Behaviors:** consult externalizing vs. internalizing behaviors (below)
- 4. **Maladaptive coping strategies:** are defined as coping strategies that in the short term decrease your distress but increase it over the long term. Ex. Substance use, self-harm, unhealthy eating.

ALGORITHM FOR FINDING INTERMEDIATE TARGETS



- 1. Think about a time when you have been in a hole or crisis, outside the window of tolerance, “lost it”, “struggled”, “felt bad”, “got into trouble”, or were very upset. (in other words, start with a beginner targets)
- 2. When this happened, what were your dominant feelings, thoughts, or behaviors? (use the wheel of feelings, thinking errors and ANTS, and the internalizing and externalizing behaviors slides to help you)
- 3. From these choose from 1 to 3 feelings, thoughts, or behaviors that you experience frequently, are problematic for you, and you want to change.
- 4. These are your intermediate targets.
- Intermediate targets change over time so go through this same process occasionally especially if your life circumstances are changing.

3 TYPES OF DIARY CARD TARGETS



- There are beginner, intermediate, and advanced diary card targets. All the examples we have gave above are intermediate.
- If you have trouble finding an intermediate target, use a “beginner target” in your diary card instead.
- Beginner targets are more generic and catch-all than intermediate ones. They are easier to use than the more specific intermediate targets. Beginner targets include struggling, feeling bad, being upset, losing it, getting into trouble, or falling into a hole. Start with one of these.
- We won't discuss advanced targets until later in the course when we explore internal family systems part selves. If you don't know what IFS is, don't worry, we'll get to it.

A row of red theater seats in a cinema. Two seats in the foreground are occupied with red and white striped popcorn buckets filled with popcorn, and brown paper cups with white straws are placed in the armrest cup holders. The text 'VIDEO' is overlaid on the left side of the image.

VIDEO

Week 8 of simple





USING COLD TEMPERATURES



- Cold temperatures can be used to preserve evidence.
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HOW TO 'GROW'



HOW YOUR BRAIN TRIGGERS ANXIETY



IS IT YOUR MOTHER'S
FAULT?



CAN PEOPLE CHANGE?



CALM YOUR EMOTIONS

DBT TIPP SKILLS



The TIP Skill

T

Tipping the temperature of your face with very cold water



I

Intense exercise of approximately 20 minutes



P

Paced breathing as well as paired muscle relaxation

