ACT-based stigma reduction curriculum

Jenna LeJeune, Ph.D., Jason Luoma, Ph.D., & Christeine Terry, Ph.D

Portland Psychotherapy Clinic, Research, and Training Center

Theresa Glaser, Ph.D.

Normandale Community College

Please address correspondence to:

Jenna LeJeune, Ph.D.

jlejeune@portlandpsychotherapyclinic.com

503-281-4852 ext. 3

1830 NE Grand Ave.

Portland, OR 97212

**DRAFT v5-23-12**

**Class 1: Introduction to modules and building awareness of social classification**

1. Introduction: Provide overview of 5 class series, structure and purpose
	1. **Explain format**:
	*For the last 30-40 minutes of each of the next five classes, we will be doing something a little different.*
	2. **Describe the focus in common sense terms:**
	*The focus will be on learning about our own ways in which we categorize and evaluate people and ourselves. Often this process happens without awareness. We put people, both ourselves and others, into categories and we don’t even notice we are doing this. This is a very normal thing to do, just part of what humans do. In fact, we have been doing this throughout this class. The study of abnormal psychology focuses a great deal on identifying different diagnostic categories to put people into and ways to identify people who would fit into each of these categories. While this can be useful, it can also have its downsides and it can cause problems for us and others at times. This segment of the course will be largely about learning about the downsides of this process of classification, judgment, and evaluation.*
	3. **Differentiate “book learning” from experiential learning:**
	*The main thing that will make these segments different from the rest of the class is that the focus will be on experiential learning. Most of what we’ve done in this class is “book learning” – learning ideas and facts. However, a lot of what we learn in life is learned through experience, through practice. Experiential learning is more like the way that you would learn how to play a musical instrument or learn how to be skillful in a sport. You can read all the books in the world about how to shoot a basketball, but until you go out there and actually practice it, you’ll never really “get it”. In this part of the class, this experiential learning will involve engaging in exercises that will focus you inward, so that you can experience these concepts, not just intellectually, but experientially & personally. In experiential learning, there is no right or wrong answers. Thus, our focus in the last 45 minutes or so of the next five classes will be of this sort learning, learning through practice.*
	4. **Willingness-- Clarify that participation is voluntary and will not impact their grade:***Since we’re going to be doing a lot of different exercises and activities in these segments of the class, I want to make it clear to everyone that you may choose to participate in the exercises or not. Your class participation grade will not be impacted by whether or not you choose to participate in a particular activity. At the same time, since this part of the class is focused on learning through doing, it may be the case that you won’t get much out of this part of the class if you don’t participate. It may be that you feel awkward or somewhat uncomfortable while you’re doing some of these exercises, just like trying some new move in a sport you’re trying to learn might feel awkward at first. What I would ask you to consider is this question, “If it were possible that something you could do something here that could really have an important impact on your life, if it were possible that something you learned through doing these exercises might actually be important in your life in a way that reaches beyond just the facts and information you would learn from the textbook, if those things were possible, would you be willing to feel awkward, or uncomfortable, or whatever shows up in doing these exercises in order to have the chance to experience something important?” Your mind might be telling you, “This is dumb” or “I won’t really get anything out of this”, but just ask yourself if you started with the assumption that it were POSSIBLE that something important could happen here, would you be willing to feel whatever shows up and still remain engaged? While it really is your choice to participate or not, if you choose not to participate I would still ask that you please remain present and that you not be disruptive for those who do choose to participate.*
2. Help people to see the process of objectification of others (i.e., build awareness of bias and automatic process of stereotyping)
	1. Exercise 1: Introduce themselves in pairs:
		1. Step 1: Have students find a partner in class that they don’t know well:
		*So first I’m going to ask that you please find someone in the room that you hadn’t met before you came to this class. See if you can find someone you don’t know well or haven’t talked to much in the class. Please don’t say anything yet to the person other than just whatever you need to in order to agree to do the exercise together. After that, please don’t say anything to each other but just sit facing each other.*
		2. Step 2: Have the students sit or stand facing their partners.
		*For just a moment, please just take a moment to sit there facing each other without saying anything and just notice what shows up for you.* [pause for about 30 seconds]
		3. Step 3: Give them time to do the exercise and after about 30 seconds tell them to switch to the other partner. Then after each partner has gone you can ask them to return to their seats.
		*Now, you’re each going to have about 30 seconds to introduce yourselves to your partner. You can tell them anything you’d like about yourself. And I’ll let you know when it’s time to switch to give the other partner a turn to introduce themselves.*
		4. Step 4: Return to large group and debrief by asking the following questions:
			* + *When you were introducing yourself, what do you notice about what information did you choose to disclose?*
				+ *What do you notice about the information that you choose not to disclose?*
				+ *Before you started introducing yourselves to each other and you were just sitting quietly in front of each other, did you notice that you had ideas about what the person sitting across from you was like even before they talked? Did you notice if your mind was giving thoughts about yourself at that point? (e.g. I’m not good at this kind of thing or I don’t have anything interesting to say).*
		5. Step 5: Conclusion:
		*We are putting people into categories all the time, based on our history. Women, men, age, social class, race, in this social group or that social group, based on subtle cues that we usually aren’t even aware of like how they talk, what they wear, how they look, etc. There are a million things that make us think we already know what a person is like. Next, we’re going to do an exercise to notice how automatic and pervasive this process is.*
	2. Exercise 2 Cross-cutting categories exercise:
		1. Step 1: Elicit 3 volunteers*For this next exercise, I’m going to need three volunteers. If you volunteer you’ll need to be willing to come up in front of the group and you’ll need to be open to answering some somewhat personal questions about yourself. If you do volunteer and once you’re up here you find that you’re not willing to answer any particular question, that’s no problem; you can just say “I’ll pass.” You’re not trapped into it once you volunteer.*
		2. Step 2: Have volunteers stand up at the front of the class but not say anything and have audience notice judgments/stereotypes that are already showing up:
		*As these people stand up here, see if you can notice what your mind is telling you about them and what they are like. Do you have opinions about them? Do you have guesses about what they are like? Do you have guesses about their gender, their race, their mental health? Do you have thoughts about what their life is like outside of this classroom?*
		3. Step 3: Ask the group to silently notice their response to a few questions:
		(To the audience)I’m going to ask you a few questions and I just want you to notice the answer that comes up in your own mind. Don’t say your answer out loud, just notice if your mind gives you an answer. Here are the questions:

*Which of the three would you like to have a coffee with?*

*Which one would be most likely to be your friend?*

*If you had something important that needed to get done and needed to pick one of these people to do it, who would you pick?*

*If you had children, which of these three would you most want to watch your children?*

(After the questions say):
 *Isn’t it kind of shocking that your mind could probably give you an answer to each of those questions and you may barely even know these people.*

* + 1. Step 4: Cross-cutting questions are asked.

*Now I’m going to ask some questions of these three volunteers and your job is to just watch what happens in your experience as I ask these questions.*

(Turning to the volunteers say the following with each volunteer responding to each question before moving on to the next question):
 *If you’re willing, I’d like you each to answer the following questions out loud. You don’t have to go into much detail. A few sentences would be sufficient.*

*When was the last time you cried? Can you tell us about that?*

*Would you be willing to share something you are concerned about that has to do with a member of your close or extended family?*

*If there has been one moment in your life when you were most proud of yourself, most proud of being the person that you are, when was that? Can you tell us a bit about that*?

* + 1. Step 5: Volunteers sit back down

*OK, volunteers you can go back to your seats. Thank you very much for your willingness to participate.*

* + 1. Step 6: Debrief:
			1. Turning to the group as a whole, elicit what they noticed during the exercise, focusing on what was noticed, not the content of their evaluations/stereotypes.
			*Without going in to what answers you might have given to the questions I asked before the volunteers shared their information, what did you notice as we went through the exercise?*
			2. (Without making people wrong, try to highlight the following themes that usually occur):

*Would you say that there was a softening, a humanizing, a connection you felt?*

*You may have noticed a variety of categories came up for each person. Did you notice anything happening to those categories as the exercise continued?*

*As we added information, notice what happened to the human beings in this room. See if this is true: they gradually became more human & more unique.*

* + - 1. Emphasize that we are often walking around the world interacting with our judgments about people rather than the actual unique human beings.

*Notice what happened. In the beginning, didn’t this person seem like a real person but more like a cartoon – built from evaluations? And now there is a human being showing up.*

*Isn’t that what we are doing most of the day – evaluating? The word machine, our mind, is doing this to us. It’s very hard to find a human. We are dealing with word products. Round one it was not the human. Round two the human showed up.

This is not to shame anyone, but when we are walking around during our normal day and looking at the people around us, isn’t it the case that we often don’t know what’s going on with them? We’re interacting with them sort of like they are two dimensional people, almost like cartoons. Because often we don’t really know what’s going on with them. It’s sort of like what were really interacting with is our own judgments, our own thoughts about them.

It seems like our ordinary state of being is that we’re not just interacting with people, but most of the time we’re mostly interacting with our thoughts about people. It’s like the people recede into the background and mostly what we’re interacting with is our story about them, the categories we’ve put them in. This is very normal, it has a purpose, and yet it can sometimes cause problems.*

* + 1. Step 6: Conclusion
		*This exercise points to a basic process that we will work on through this experiential learning process. When a small number of categories are applied to a human being, much is lost: The more efficient we get at categorizing people into fewer categories, man/woman, white/black, gay/straight, good/bad, crazy/not crazy, the more information we lose about what actually makes them uniquely human. And yet this is a natural and almost automatic process. Over the course of the next 5 weeks we’re going to be looking at this process and come into contact a bit more with some of the problems that this very normal process can cause*
1. Homework for class 1 – Social Perception/Stereotyping
	1. Overview of homework:
	*For the next 4 classes, you’re going to be asked to complete some assignments out of class that relate to what we’re talking about here in class. While you will be graded on the written portion of the homework assignments, whether or not you choose to do the activity of the assignment is up to you. If you choose not to do the activity, you’ll still need to write about why you chose not to do it and what your thoughts are about the concept and the questions asked in the assignment. My hope is that you will choose to do the activities since this portion of the class is largely about learning through doing and I think you’ll get the most out of this portion of the class if you actually do the activities described in the homework. But what you’ll be graded on is not whether or not you did the activity, but just the written portion you turn in.*
	2. Pass out handout for homework #1:
	*For this week’s homework, you’re going to be asked to take a further look at this concept of categorization that we’ve been talking about. Your assignment is described here on this sheet. The assignment is to, sometime over the next week, I’d like you to talk with three new people that you might not otherwise talk with and observe your reactions. You’ll then write a brief (maybe 2-3 pages) typed paper describing your experience and responding to the questions that are asked on the handout. If you choose not to participate in this activity, then you’ll still need to write the 2-3 page paper addressing the questions asked on the handout more generally. As a second part of the homework, we’d also like you to complete a brief, online categorization task that relates to the topic of this course. Please complete this as soon as you are able to after this class, at the latest, before the next class.*

 *Any questions about the homework? We will be discussing the homework at the end of next class.*

1. Assessments for class 1
*So this part of the class where we’re going to be focusing on how we categorize ourselves and others is something new that I am working on and I would greatly appreciate your feedback so that I can refine this. Remember that psychology is a science, and so, I need to do some data collection here to see what is working and what might not be working very well. So at the very end of class for the next 5 weeks, I’m going to be asking you to fill out a very brief feedback questionnaire. Your names won’t be on this and it won’t impact your grade at all. I’ll only use it to help shape how I structure this part of the class in the future. Your opinion of your experience can be very helpful to me, so please, if you’re willing, take a few moments to answer these questions as honestly as possible. Please don’t put your name on the paper. And then you can just turn them in anonymously here in the box on your way out. Thanks for your willingness to do this and to help me refine what I’m doing here.*

**Class 2: Normalize the occurrence of prejudice thinking and suggest acceptance as an alternative strategy.**

NOTE: FOR THIS CLASS YOU WILL NEED 6 INDEX CARDS FOR EACH STUDENT

1. Review homework from last week
	1. Debrief homework from class 1, possibly asking the following questions
* *What did you think was the main point of the homework exercise?*
* *What did you notice about your automatic thoughts/stereotypes*
* *Did you notice anything when you were aware of those automatic thoughts and at the same time not act on them?*
* *What happened to the automatic thoughts when you got to know someone*
* *What did you notice when you focused on how others may categorize you?*
	1. Summarize homework and concepts from previous class.

	*So what we learned last week and what many of you experienced in doing the homework assignment was that like it or not, we all categorize or stereotype. This process of categorizing is incredibly normal. It can help us quickly evaluate and make sense of what’s going on around us. Others do this to us, we do this to ourselves, and we do this to others. This is a normal process, nothing strange or bad about it.

	And yet it’s also a process that comes with a cost. We know that when we tend to categorize or stereotype people we often make erroneous assumptions. That process of categorization can lead to injustice, discrimination, and even violence, or it can lead to a opportunity for friendship. And the process of categorizing ourselves is also costly. It leads to a lot of suffering. It can lead to inflexibility. Even when we categorize ourselves in what we might think of as “positive” ways, it can lead to inflexibility; for example, if you categorize yourself as someone who “Isn’t a quitter”, then it might be less likely for you to stop engaging in an activity even when “quitting” is what would be most useful.*
	*This process happens automatically and yet it can result in some pretty negative consequences. Tonight we’re going to take a closer look at that process and maybe offer some ideas about what can we do about it?*
1. Discuss the idea of thoughts as programming
*So how do we learn what thoughts to have? Do we choose to have the thoughts that we have or do they just get put in our minds? Last week when you were doing your homework assignment, were you walking around saying, “I think I’d like to have the thought that that person is “crazy” or “stupid” or “fat” or whatever judgmental thought came to your mind? So let’s look at how those types of thoughts might get in there.*
	1. Exercise 1: Thoughts as programming
		1. Step 1:
		*Try this, I’m going to say a phrase and I want you to finish the line.*
			* *Mary had a little…*
			* *Blonds have more …*
			* *There’s no place like …*
			* *Schizophrenics are…*
		2. Step 2:
		*How did those things get in your mind? When I say, “Mary had a little”… do you go through an intentional process to choose the word “lamb” to pop into your head? And do you think there is anything you could do to make you never have the thought “lamb” show up when I say “Mary had a little”? Sure, you could do something like Mary had a little… “ok, don’t think lamb, think of something else, LION”, but you would still have lamb show up. Minds are like that, they work by addition and not subtraction. Often once we get programmed to have a thought it’s in there. And do any of you have the specific memory of the time where you first learned that Mary had a little Lamb? It’s just sort of in there and we’re not even really aware of where it came from or even that it’s programming at all. It just seems like it’s true that Mary has a little lamb. We get programmed with things all the time. So let’s take a look now at what happens once those thoughts are in there…*
2. Discuss how these thoughts about ourselves and others can be difficult and what the normal strategy for dealing with these difficult thoughts are. Undermine the effectiveness of these strategies (i.e. Suppress the thoughts or think of something else, but this doesn’t work)
	1. Having these stereotyping thoughts can be difficult

*How many of you would say that you would like to be someone who stereotypes others? When you make quick judgments about others based on perceptions of race, gender, perceived mental health status, sexual orientation, etc. do you feel good about having those thoughts? If you noticed having a stereotyped thought about someone you just saw on the street because of their race, gender, body type, would you want to go up to that person and say “Hey, I noticed that you were black/white, male/female, thin/fat so I assumed you were X”? Probably not.

What about the unpleasant ways we categorize ourselves? Have you ever had the experience of looking in the mirror and something like “Yuck! You’re so… ugly/stupid/fat/disgusting” popped in to your head? Or maybe there are ways in which you limit yourself in life because you put yourself in some category like “I can’t ask them out. I’m not in his/her league” or “I’m not smart enough to do that”.

And probably much of the time you’re not even aware that you’re having these categorizing thoughts. I’m guessing that when I read your homework from last week at least a few of you will say “I try not to categorize or judge people”. Well, at the very least for the homework you categorized them as people, probably people who can speak, probably people who you thought could speak a language that you speak, and maybe even a “nice” person who can speak a language that you speak. And even if you do notice the judgments, you may not really see them as thoughts, but more like “truths, like “that’s just the way it is.” If we were to notice that we were doing this stereotyping in our minds (something we all do all the time), we might even feel embarrassed or ashamed or guilty about these types of thoughts that we have.*

* 1. Normal strategy of thought suppression
	*So, it makes sense that when you think things you don’t like to think, then you should just try to think something else, right? How often have you heard that? Ever since we were little, we were taught some version of “Don’t think that way about X people because it’s not nice to be judgmental.” or “Don’t think so negatively about yourself.” or “You have to have a good self-esteem—aka have positive thoughts about yourself” While this strategy makes sense, it may not always work out very well. Let’s try something to test this out.*
		1. Exercise 2: Yellow jeep Exercise
			1. Step 1:
			*How many of you have thought of a yellow jeep in the past week? Put your hand up if you have had a thought of a yellow jeep.* (Count the hands). *So it looks like not very many of you have had that thought recently.*
			2. Step 2:
			*Let’s do an exercise to see what happens when you try to not think that thought. Take out a piece of scratch paper. I’m going to ask you to not think about a yellow jeep for the next minute and your job is to notice your thoughts and mark down on your piece of paper each time you have a thought about a yellow jeep. OK? Any questions?*
			3. Step 3: Time 1 minute while they do the exercise
			*Please raise the number of fingers to represent the number of times you thought about a yellow jeep in the last 1 minute.* (Pause). *Take a look around the room* (pause). *What happened here? No one said they had thought about a yellow jeep even once in the past week and now we have a whole classroom full of yellow jeep thoughts. Does anyone want to share a bit about what happened during the exercise for them?*
			4. Step 4: Conclusion
			*As long as you weren’t try to not think about it, you didn’t think about it as much. But as soon as you tried to not think about it, then you thought about it a lot. And what if thoughts about Mary having a little lamb, and yellow jeeps, and people with substance abuse problems are “losers”, people with schizophrenia are “messed up”, and “I’m broken/unlovable/ugly/stupid/damaged” are all the same kinds of thoughts. And once they are in there, they are in there. Of course we forget things. But those thoughts don’t go away through brute force. In fact, as you just saw, trying to get rid of them only tends to make them stick around.*

*So it seems like trying to not have thoughts doesn’t work. And in fact, it can backfire, just like it did with trying to not think about the yellow jeep. That doesn’t seem like a very good solution to those difficult thoughts then. Maybe instead, we need to find a different way to relate to these thoughts. Let’s do another exercise that might give us some ideas about a possible different approach.*

* 1. Acceptance and defusion as an alternative to suppression
	*While thinking of the yellow jeep is just a harmless example, it’s also a powerful one that shows how we can ‘hooked’ by our minds when we buy into our judgments and when we treat them as if they were real things that we must avoid or suppress. Let’s try another exercise using more difficult thoughts than just a yellow jeep, but this time we’ll also try a different strategy for responding to those thoughts.*
		1. Exercise 3-- phase 1: "I'm having the thought" exercise
			1. Step 1: Pass out three index cards to each person and ask them not to do anything with them yet.
			2. Step 2: *If you’re willing, I’d like you to close your eyes. And if you’re not comfortable with that then just maybe rest your gaze on a point below you. Take a moment to just notice your breath. Notice what the qualities of your inhale feel like; is there a temperature or a texture or a weight to your inhale. And notice the qualities of your exhale; what is its temperature or texture or weight.*
			3. Step 3: *Now what I’m going to ask you to do here is I’m going to ask you to think about something and all I want you to do is just notice what happens when you think about this thing. You don’t need to do anything different with the thought, just notice what happens. And I’ll ask you to think of a few different thoughts. And if you choose not to do this, that’s fine as well, just notice that.*
			4. Step 4: (When settled), *I’d like you to take a few moments now to think about a part of your body that you don’t like* (allow 30 seconds or so of silence). *Now I’d like you to think about some negative thought you have about a loved-one in your life* (allow 30 seconds of silence) *And finally, I’d like you to think about something you would NOT want any of the group to know about you* (allow another 30 seconds.). *And now, gently bring your attention back to your breath. Picture in your mind’s eye what the room will look like around you and when you’re ready, you can gently open your eyes.*
			5. Step 5: Debrief: Get examples from the class, focusing on what they noticed about the process, NOT the content of the thoughts. See if you can help them notice how they were hooked by their mind.
			*So, I’m curious, please raise your hand if these were pleasant thoughts to think about? Would you like to spend a lot of time thinking about these thoughts? But what do you think would happen if you worked really hard to try to not have those thoughts? Yep, it’s probably like the yellow jeep, you’d likely think about them even more. So now, instead of the strategy of trying to avoid or suppress the thoughts we used with the yellow jeep (which, many of you may find, is the same strategy you use when you have thoughts you don’t like), I’d like you to try something that might allow you to notice the thoughts for what they are...simply thoughts.*
		2. Exercise 3 (phase 2)
			1. Step 1: Write up on the board:

**T** (where T = hooked thought)

I am having the thought that **T**

I am noticing that I am having the thought that **T**

* + - 1. Step 2: *Let’s just say that my difficult thought I didn’t want to think about was “My partner isn’t very smart”. Most of the time, it would just show up in my mind like “My partner isn’t very smart”; it’s a ‘truth’ not a thought. Or, I could take that thought, notice it’s a thought and say “I’m having the thought that my partner isn’t very smart”. And, even further, I could say “I’m noticing that I’m having the thoughts that my partner isn’t very smart. And this process of noticing thoughts as thoughts may be a very different experience for you that having the thoughts show up as “truths”.*
			2. Step 3: *Let’s see how this might work for you.* *If you’re willing, I’d like you to identify one of the thoughts that you had in the previous exercise that you were most hooked by and that you’d be willing to work with. You won’t have to share the thoughts with anyone. It will just be something you see.

			I’d like you to take that difficult thought you had and write the thought on one of the index cards. For example, if your difficult thought was “My partner isn’t very smart”, you’d right down “My partner isn’t very smart” on one index card. Label that card #1

			Next, take a second index card and write down “I’m having the thought that… and then your thought. For example, “I’m having the thought that my partner isn’t very smart” And label that card #2

			Finally, on the last index card you have, please write down “I’m noticing that I’m having the thought that… and then your thought. So with this example it would be “I’m noticing that I’m having the thought that my partner isn’t very smart” and label that card #3.

			Now, if you’re willing, please take those three index cards in order. I’m going to ask you to look at each card individually for about 10 second and just notice any reactions you have. I’ll let you know when it’s time to move on to the next card. So please look at card #1… notice any reactions, thoughts, sensations, urges. [wait 10-15 seconds] Now switch to card #2… notice your reactions, sensations, urges [wait 10-15 second]. And finally look at card #3… Any reactions, thoughts, urges that are the same or different? Just notice what shows up*
			3. Step 4: Debrief the exercise, focusing on the process of what they noticed, not the content.

*What did you notice?*

*So some of you had the experience of feeling a bit of distance from the thought when you identified “I’m having the thought that…” and even more “I’m noticing that I’m having the thought that…”. It can feel a bit like you’re noticing the process of your mind giving you thoughts and just commenting on that process rather than getting caught up in the thoughts, trying to make them go away, change them, right/wrong about them. Instead, you’re just like a reporter, commenting on the process that is going on in your mind.*

1. Homework for class 2
	1. Pass out homework handout for class 2 along with 3 more NOTECARDS for each person.
	*So for your out-of-class assignment this week, you’re going to ask you to practice this idea of noticing your thoughts as thoughts rather than trying to suppress them or change them. While most of us try hard not to think about distressing thoughts and try to suppress or distract ourselves from unpleasant feelings, we’ve seen tonight that that doesn’t always work. If avoiding or suppressing unpleasant thoughts or feelings worked completely, these difficult thoughts and feelings wouldn’t continue to trouble us. So, what we’ve been doing tonight and this homework is about building up another ability, the ability to simply notice difficult thoughts or feelings and to take them with you as you live your life.

	To do this homework, you've been given three more notecards. I’d like you to take a moment right now to think about a thought that you have, either about yourself or someone else, that you don’t like to think. For example, you could write down a negative self-evaluation you have about yourself that troubles you. For example, sometimes you might think you are stupid or lazy or are ugly. [draw a couple rectangles on the whiteboard to represent the note cards and write a couple examples of thoughts, for example, "I'm stupid" or "I'm ugly"] Or you could choose a stereotype that you noticed during last week’s homework. [draw another notecard on the board that says, "I think xx people are xx."] Like in all these exercises, no one else will see what you’ve written. It’s up to you what you choose. This is just for your own learning.*

	*Before I give you a moment to identify the thoughts to write on the note cards, let me tell you what I’m asking you to do with them. I’m going to ask you to write down that difficult thought on one of the cards, then on another card you’ll write down the phrase, “I’m having the thought that… and then your difficult thought and finally “I’m noticing that I’m having the thought that…your thought” on the final card. I’ll ask you to simply carry those three cards around with you this week. You’ll want to choose a place where you aren’t likely to forget them. A good place is in a wallet or a purse.

	The second part is to pull them out once a day and read over what is on the card and just notice any feelings or thoughts you have in reaction. Don’t try to change your reactions or these thoughts in any way. That’s the whole exercise, just carry the cards with you, read them over once a day and notice any feelings or thoughts you have in reaction.*
	 *OK, so now you need to choose 1 difficult or unpleasant thought that you have and write the three versions of that on the cards. The thought can be about you or someone else. Just choose ones that are at least mildly uncomfortable with. There’s no need to pick something really difficult, just choose something you are willing to carry around and with which you might like to renegotiate your relationship.*
2. Assessments for class 2

Pass out in-class assessment handout.
*So I really appreciated people’s feedback from our last class* (can make comments about what was specifically helpful or not helpful about the feedback). *Again, this week I’d like to get your thoughts about what we did here tonight. So please, take a few moments now to answer these questions, again without putting your names on them, and then when you’re done you can just drop them off in the box on your way out. Thank you.*

**Class 3:** **Build sense of common humanity and common suffering in relation to psychological suffering.** Help **students put themselves in the place of those with “psychological disorders” and in a hierarchical relation of common suffering.**

\*NOTE NEED TO HAVE NAME BADGES FOR THIS WEEK’S ACTIVITY AND SMALL LABELS AND LARGE BANDAGES FOR THE HOMEWORK

Review homework from last week, focusing on what participants noticed, not the content of the thoughts on the cards

* 1. Ask for general reactions to the homework:
	*So what were people’s experiences with the homework from last week where you were asked carry around note cards with difficult thoughts on them?*
	2. Possible debrief questions to ask:
* *Did you notice any difference in your reactions to the thought when you read the card #1 version versus the card #2 or #3 versions?*
* *What did you notice when you pulled out the cards and read them over? Any thoughts or feelings you noticed?*
* *Did the thoughts become more or less “sticky” as the week went on?*
* *Did you feel less distressed by them?*
	1. Conclusion: *So we’ve spent some time talking about how all of our minds are almost constantly evaluating, classifying, and judging. We’ve also done some exercises on how hard it can be to get rid of these thoughts or to change our thinking. Finally, we also looked an alternative to suppressing or changing thoughts or feelings we don’t like, simply noticing them as thoughts and making room for them to come along as we live our lives. Today we’re going to take about what society typically says about what it means to have difficult thoughts and feelings.*
1. Normal cultural message that humans are naturally happy.

*The normal cultural message is that humans are naturally happy. It tells us that it’s abnormal to be unhappy, it’s abnormal to suffer. We are constantly bombarded with messages that tell us that if you are suffering, that means there is something wrong with you, something abnormal, something broken or pathological. Maybe it’s a chemical imbalance, or a brain disease, or it’s because you’re a bad person, weak in character, or because you had a bad childhood, but the message is that if you’re not happy something has gone wrong and you need to fix it. We are given this message in lots of ways in our life, through books, advertisements, even just people asking “what’s wrong” when you’re unhappy.*

1. Ubiquity of suffering

*But, what if* *it’s the case that happiness isn’t normal? There’s actually some reason to suspect that this might be the case.*

* 1. Go over DSM-IV data
	*Here are shocking data. According to recent large-scale surveys in psychology, about 30% of the population suffers from a diagnosable psychological disorder* (including addictive disorders) *in any given year.* (Point out how many people in the room would have psychological disorders according to this statistic). *Keep in mind this only includes diagnosable axis I disorders – this means someone has to meet all the criteria for a particular disorder to be included, so you can have all but one or two of the DSM criteria and you still wouldn't be in this one in three. For instance, if you were depressed most of the day every day, had insomnia most every night, and had feelings of worthless and recurrent thoughts of death most days you still wouldn't meet enough criteria for major depression, so a person with all those symptoms would be one of the two out of three people we would consider* ***not*** *to have a psychological disorder.

	So obviously this number doesn't include a lot of people who are pretty unhappy. DSM axis one diagnoses also don't include a lot of things that make peoples' lives really difficult, so they don't necessarily include people who are miserable in their marriages, hate their jobs, or have no friends – not even to begin with people who feel like they don't fit in, feel insecure, or are terribly lonely. So it isn't like everyone who isn't in this 30% per year who do have a diagnosable Axis I disorder is like happy happy joy joy.

	Furthermore, the lifetime prevalence of psychological disorders is around 50%. And this is the same deal – this doesn't count a lot of people who are terrifically unhappy in their lives.

	Think about all the ways we suffer that are like that. How many of us have been terribly lonely, sad, nervous, felt incompetent, angry. What about losses, deaths, the pain of moving and losing friends, breakups of relationships, abuse?

	How many of us struggle with anxiety, fear, or uncertainty about the future? How many of us continue to beat ourselves up with regrets from the past or missed opportunities? I will bet that there isn’t a single person in here who hasn’t experienced some sort of significant suffering at some point in their life.*
	2. EXERCISE 1: Is this new?
		1. Step 1:
		*And I’m guessing a lot of the time, the things we struggle with aren’t new to us. The things that we most struggle with seem to stick around. If you’re willing, I’d like you to think about something you really don’t like about yourself. Maybe it’s a critical thought you have about yourself, maybe it’s part of your body or personality you don’t like. Maybe you want to choose the thought you wrote down on your card for the homework from last week if it was a difficult thought about yourself. Just get something in mind. Now, if you’re willing, I’d like you to all raise your hands when you have a thought in mind. I’m just going to ask you to put your hand down when I get to a time when this thought or feeling wasn’t a struggle for you.*

*Was this something you struggled with last week?*

*Was this something you struggled with last month?*

*Last year?*

*5 years ago?*

*10 years ago?*

*20 years ago?*

* + 1. Step 2:

		*What we find is that we can predict when most people will put down their hands, not based on how “mentally healthy” the group is, but rather the average age of the group.*

		*And I’m right there with you. I’m a “mental health professional”. I am an expert in behavior change and yet even I can’t seem to get rid of those thoughts and feelings that have been sticking around for most of my adult life.*
1. We’re all wearing an “I’m fine” Mask! And yet…

*So what’s going on here? Look around you, I mean really look around you. Everyone in this room was able to have some painful thought or feeling that they are struggling with, and most likely have been struggling with for years. Something like one in three of us has been struggling with a diagnosable serious disorder in the last year, and a half of us will have a serious disorder at least once in our lifetime. Really look around you and see what that means. If it’s not you, then it’s probably either the person to the right or left of you. If there are 30 people in this class, that means that probably at least 10 of us right here in the room would meet criteria for an Axis I disorder just this year. And most of us in the room, more than half, will suffer from a diagnosable disorder at some point in our lives.* (Point out half the group). *What’s going on?*

*And yet, when you walk by people on campus every day, do you think one in three of them is struggling so much that they qualify for an axis I DSM diagnosis? When you’re out with your friends, does it look like they struggle so much that almost ½ of them will seriously and persistently think about killing themselves at some point in their lives? Why not? If our society teaching us that suffering is abnormal and that we’re supposed to do something to get rid of it, then it makes sense that when someone is suffering, they will try to hide that from others. We teach people to walk around wearing the “I’m fine mask”. And it’s not just “them”. Think about two classes ago when I asked you to get a partner in class that you didn’t know well and introduce yourself to that person. When you introduced yourself were you wearing the “I’m fine mask”? Did you say, “Hi, my name is X and I really suffer profoundly with Y?”

If we know that suffering is ubiquitous and yet in our society, suffering means there is something wrong with us, then it makes sense that most of us work to hide the fact that we are suffering.*
	1. What’s the cost of us all wearing the “I’m fine” mask?

	*What is the cost of wearing the “I’m fine” mask? Have you ever felt tired of not being yourself? Have you ever felt that nobody knows you? Have you ever felt like there is something wrong or broken or damaged about you because you suffer the way you do? That no one else could understand or empathize? Have you ever felt alone in your suffering or ashamed of the ways in which you suffer and felt you needed to hide that even from those that you most love?

	But what if it’s the case that suffering isn’t “abnormal”, that it doesn’t make us damaged or broken or sick. What if we’re all playing this “I’m fine” game together but it’s all a big lie. If that’s the case, then what might that mean in terms of how you view people who are suffering? How might that impact how you see people you categorize in the “mentally ill” or “psychologically suffering” box? What if we’re actually all in that same category of psychological suffering with some suffering that happens to take the form of the particular diagnostic categories we determine were those we’d call “mentally ill” and other suffering that doesn’t fit neatly into those made up categories?*
	2. I’m ok, you’re not ok.

	*Many of us have learned that when we are suffering, the thing to do is to be silent and to pretend to be in “The OK ones” and group. We can put others in the “Not OK ones” and maybe we can even feel sorry for them, but still they are “different” because they are in the “not ok ones” group. But what would it be like if we actually saw each others’ suffering and let others see our suffering?*

		1. Exercise 2: Wearing your suffering on your sleeve
			1. Step 1: Pass out adhesive name badges to each person
			2. Step 2: *I’d like you to take a moment and think about one thing you suffer with. Maybe it’s a feeling like “depression” “loneliness” or “anxiety” or maybe it’s a painful thought or judgment you have about yourself like “unlovable” or “stupid” or “fat”. Take a moment to think about something that really is difficult for you. This is going to be anonymous and no one is going to be able to know what your thought is. So see if you might be willing to pick something that is genuinely painful for you. Now, I’d like you to please write down just one or two words which describe those painful feelings or thoughts. You are going to turn these in but no one will know which one belongs to which person. Others in the group are going to see what is written on each of these name badges, but no one will know whose thought or feeling goes with which person. It will all be anonymous. And I’ll also be adding some other difficult thoughts and feelings to name badges and mixing them up in the mix so it will be even more anonymous.*
			3. Step 3: Have students put their name badges in a bag, mix them up along with some others that you have added (can include “I’m an addict”, “I hear voices that aren’t there”, “I have tried to kill myself”, “mental patient”).
			4. Step 4: *Please reach into the bag and choose one name badge. It doesn’t matter which one you grab, whether it’s yours or someone else’s. Just pick one out and put it on your shirt where we can see it. Please don’t talk about it, just notice what it’s like to put it on where people can see it.*
			5. Step 3: Mindfully walk around the class noticing other people’s suffering
			*Now what I’d like you to do is to take a few moments in silence and slowly walk around the room looking at everyone with their suffering. Your task here is to simply notice what shows up for you as you come in contact with seeing the suffering other people are wearing.* (pause) *Really come in contact with the suffering in this room.* (pause). *Remember, these are actually what the people in this room suffer with.* (pause). *What thoughts, feelings, bodily sensations are you noticing as come into contact with the suffering in this room.* (pause) *What judgments does your mind give you? Can you notice that these judgments as simply thoughts?* (pause) *What urges do you notice? Maybe the urge to turn away, the laugh, to evaluate?* (pause) *Do you see a connection to what others have written?* (pause) *Are these ways in which others suffer fundamentally strange things to think and feel or are they familiar to you?*
			6. Step 4: Debrief
			*OK, you can sit down now and you can take off your name badge if you want. What did you notice? What was it like having someone see your name badge? What was it like to come in contact with what the people in this room, your classmates, your friends, suffer with?*
				1. *Look around the room now. Does knowing that all these people suffer, that every single person had something they could write on that name badge, does that impact the way you see the people in here?*
		2. Exercise 3: We’re all in this together—approximately 10-15 minutes (adapted from © Robyn D. Walser & Darrah Westrup (2007) Acceptance & Commitment Therapy for the Treatment of Post-Traumatic Stress Disorder & Trauma-Related Problems:

*So as we end this class, I’d like to close by doing one more exercise. This is an* *eyes-closed visualization exercise.*

*I would like everyone to start this exercise by placing your feet squarely on the ground and sitting up in your chair so that your back is straight but not rigid. Make sure that your head feels square to your shoulders and place your arms in a comfortable position at your sides ... This posture helps us to stay alert and focused. Most people find it easier to visualize if they close their eyes. As alternative, you can just gently lower your gaze, and let your attention move inwards. Start off with placing your attention on the tip of your nose and begin to notice the sensation of air moving in and out of your nostrils ... Pay attention to your breathing, (pause) Now I would like you to gently expand your awareness to your body, noticing what you feel, sense, and hear. Be aware of the position of your body and all of the experiences it is having, (pause) See if you can now become aware of a you there that is noticing your sensations… there is your body and all of the experiences it is having, and there you are noticing it.*

*Now, gently expand your awareness to noticing that there is a person sitting to your right... Be aware of that person, bring to your mind's eye what they look like, and notice that they are feeling and sensing too. Also notice that as you do this, someone is being aware of you. (pause) Now gently shift your attention to your left. Be aware of that person, bring to your mind's eye what they look like, notice that they are feeling and sensing too ... Also notice that as you do this that someone is being aware of you. (pause) And now take a moment to notice who's noticing… there is a you there, behind your eyes, watching this experience… there's shared space with a person on your right and a person on your left and then there's your observing self noticing this…*

*Now imagine that a part of you could float above this room and see this group of people from overhead ... Notice there about xx people in this room, each with their own worries, hurts, dreams, struggles, and people they care about. Notice all who are here, all of our feet on the same ground, each feeling, sensing. (pause)*

*Allow your awareness to rise further, passing through the ceiling and out of the building so that you are hovering above the building ... Now, using the best of your imagination, picture all of the people who might be in this building, Notice that they too are sensing, feeling, experiencing, struggling, and that all are working on living. Now imagine that you could float even higher so that you could see the city below. To the best of your imagination, picture all the people moving about living their lives, feeling, sensing, fearing, loving, worrying, sleeping ... struggling. Over two million people here in this city. And if the statistics are right, about a third of them, nearing a million people, in just this city, are suffering enough that they could qualify for a DSM-labeled disorder. See if you can connect with how common it is for humans to suffer.*

*Now imagine that you could float even higher so that you could see the whole of the United States. 300 million people. Living their lives, having feelings—some good, some bad—having anxiety, having love, growing, changing, hurting, crying, loving, and struggling. And probably a hundred million of them or more are suffering so much that they could qualify for an Axis I disorder this year. See if you can connect with how normal it is to suffer. (pause) And notice who is noticing all of this. There is a you here who is noticing all these sensations and experiences.*

*Now allow yourself to float even higher, out of the atmosphere, so that you are floating high above the earth ... You can see the whole earth ... Now imagine, as best you can, all the people living their lives, trying to live, having pain, having joy, having luck, having sorrow, all struggling. 7 billion people. So many people that it’s hard to even imagine the number. (pause for a longer period of time) And there is a you here, who can observe all of this.*

*Now imagine that you are floating back toward the earth ... It is growing in size, and now you can see North, Central, and South America come into view ... Now float down even further until you see our state. Then continue on until you see our city ... and then float further until you are hovering right over this building ... Bring yourself back to hovering right over this group of people, (pause) Picture the person to your left... who struggles too ... and then picture the person to your right... who also struggles ... Then gently bring your awareness back to yourself, your body, your senses, your feelings and thoughts, and just gently note that we are all in this together all sharing the same space, with our feet on the same floor, (pause) And take just a final moment to notice who is noticing this. There is a you there, behind your eyes, who is watching this experience of your thoughts and feelings, and sensations… a you that is different from this experience of your breathing and your thoughts and your feelings. And you can observe it all.*

*Now picture the room, notice the sounds of the room, and when you are ready, rejoin the room by opening your eyes.*

Homework Class 3:

* 1. Pass out the Class 3 homework handout, plus one large bandaid and one small label or piece of paper to each student.

*So for your out-of-class assignment this week, you’re going to be taking a look at this process of how many of us walk around wearing the “I’m fine mask”. You’re going to need about 20 minutes to complete the activity in the homework and then again, write a 2-3 typed page reflection paper addressing some of the questions on this handout. And just as before, you can choose not to do the activity, but you still need to turn in the reflection paper addressing the questions asked if you want to get credit.*

Assessment Class 3:

Pass out Class 3 in-class assessment and ask them to respond to the questions, turning it in anonymously as they leave.

**Class 4: Differentiate between prejudiced thoughts and prejudiced behavior. Help participants to accept and defuse from prejudiced thoughts. Help them to develop a positive sense of connection, empathy in relation to the stigmatized group.**

Review homework from last week

* 1. Ask for general reactions to the homework:
	2. Possible debrief questions to ask:
* *What was it like to walk around with your suffering on a label as people looked at you?*
* *What did you notice as people asked or didn’t ask about your band-aid?*
* *Were there any differences in your experience of writing about suffering from the perspectives of the three different people you chose?*
	1. Conclusion:
	*So we’ve spent quite a bit of time now talking about how common suffering is and how common it is to group people into categories of “the OK group” and “The Not-OK group”. Today, we’re going to be looking at that tendency to categorize ourselves and others into the “OK and “Not-OK” groups and also how that automatic tendency to categorize may be different than our reactions to those thoughts.*
1. Build a sense of connection with target group
*So at the end of last class we talked about how all of us suffer. And maybe some of you are having the thought “Yeah, sure everyone suffers, but then there are some really “crazy people.”* They *are different. Notice again our strong human tendency to categorize: Me “normal suffering”, them “crazy suffering”. Let’s take a look at that thought.*
	1. Exercise 1: Listening to the voices in your own head

*One of the types of human problems that people might put in the category of “not-ok suffering” is the experience of hearing voices. The diagnosis most associated with this experience is schizophrenia, but we also know that this happens in other disorders and also in many cultures around the world, sometimes in ways that are not pathologized. Many people have experiences of hearing voices during their lives. In fact, most of us hear voices all the times, in our own heads, but the big difference is that we might not even notice it. You can think of the voices that people with schizophrenia have as being like the voices that we all hear in our own heads, but with the volume turned up. Let’s do an exercise to help us see if we can get in touch with this a bit -- to hear the voices that we all hear in our own heads.*

* + 1. Step 1: Help them to physicalize and develop a more obvious awareness of the voices in their own head and draw a parallel to hearing voices.

*If you’re willing, I’d like to do an eyes-closed exercise to explore this a bit more.*

*I would like everyone to start this exercise by placing your feet squarely on the ground and sitting up in your chair so that your back is straight but not rigid. Make sure that your head feels square to your shoulders and place your arms in a comfortable position at your sides ... This posture is just about staying alert and focused. So let's begin by first noticing some sensations in your body. Notice where your body contacts the chair…and where you feet contact the ground. (pause) If you feel comfortable doing so, allow your eyes to gently close. If you feel uncomfortable with your eyes closed, or sleepy at any time, just allow your eyes to look toward the floor a few feet in front of you and let your gaze soften. Start off with placing your attention on the tip of your nose and begin to notice the sensation of air moving in and out of your nostrils ... Pay attention to your breathing, (pause). Just allow your attention to gently rest upon each breath. You do not need to change your breathing in any way; just allow your breath to breathe itself.*

 *Now, I’d like you to gently shift your attention to your thoughts, the inner dialogue that is running through your head. You don’t need to change your thinking in any way. I’d like you to purposefully and gently guide your attention to your thoughts (pause). Most people experience their thoughts like a dialogue in their own head. See if you can take a moment to notice where your thoughts are located in space. Are they are in front of you, to one side, behind you? Are they above your eyes, below your eyes, directly in front of your eyes? Take a moment to simply notice where your thoughts are located in space (pause). Now, I’d like to see if there is any movement to your thoughts. Do they stay still, do they move, and if so, what direction? (pause). If your thoughts are moving, how quickly do they move? (pause). I’d like you to imagine your thoughts as if they have sound. What do your thoughts sound like? (pause). Are they loud, soft? What is the tempo, pitch, and cadence of your thoughts? (pause). If you find yourself lost in the content of your thoughts, gently bring your attention back to your breath, then back to noticing the location and movement of your thoughts, and back again to noticing the volume, pitch, tempo, and cadence of your thoughts. Gently and curiously observing your thoughts. If your thoughts are like voices, are they in your own voice? If not, what gender are these thoughts? Regardless of whether the thoughts are in your own voice or another’s voice, take time to notice the qualities of the voice. Do they sound young, old, strong, frail, stuttering, smooth? Which thoughts are louder? Which are quieter? Remember, you do not need to change your thoughts or the qualities related to them in any way, just allow yourself to watch and listen to them. (Pause).*

*Gently bring your awareness back to yourself, your body, your senses, your feelings and thoughts, and just gently note that we are all in this together, (pause). Now picture the room, notice the sounds of the room, and when you are ready, rejoin the room by opening your eyes.*

* + 1. Step 2: Debrief the exercise: Typically, only some of the people will be able to experience their thoughts as words or a voice in their head. Part of what we want to do is draw out the experience of the people who are able to do the exercise and focus on them, rather than on those who’s thoughts are more visual or who were unable to observe their thinking. One way to do this, is to something like,

		 *“A lot of people find this exercise challenging. For those of you who felt like you were able to do it, what did you notice about your thoughts?”*
			1. To get at the idea that people might experience “voices” as coming from outside them, you might ask,

			*“Where did your thoughts seem to be in space?”*
			2. If anyone says their thought seemed to occur at a point outside their body, you might say something like,: *“It just makes me curious how different that really is from thinking that those thoughts are coming from outside you, as happens with people in schizophrenia?”*
			3. To get at the idea that people might hear voices that don’t sound like their own, you might ask
			*“Who noticed that the voice they heard didn’t sound like their own?”*
			4. or if no one responded to the above you might ask,

			*“Has anyone had the experience of hearing their own thoughts in the voice of their parents? How different is this experience from a person who ‘hears voices’ that sound like someone else?”*
			5. To get at the idea that the voices people hear are often negative, you might ask,

			*“Did anyone notice their thoughts being critical or harsh with them? Would you be willing to share anything about what they said?”

			“Have you ever noticed that your thoughts can be quite loud and overwhelming at times?

			Sometimes people who hear voices report that their voices can be very critical and distracting at times. Have you ever experienced your thoughts as very critical? How hard has it been for you to concentrate when your own thoughts were yelling at you?”*
		2. Conclusion
		*What if it’s the case that people who hear voices aren’t really doing something that is very different from the way our minds normally work. The main difference is simply that they are attributing their thoughts to someone else, rather than to themselves. They might be pretty critical or distracting, but all of us have thoughts like that.*
		*Rather than viewing “voices” as a behavior that is really different, and making ourselves more comfortable by seeing ourselves as not like “them,” what if another way to view this is that voices are another form of suffering that is part of the human condition. Just one that tends to be troubling to a lot of people.*
1. Defusing from stigmatizing thoughts
*So, by this point you’ve gotten that there’s this very normal tendency to categorize people into groups, in part based on the ways in which they suffer, labeling some as “fine” others as “not fine” some as “normal suffering” others as “crazy”, but maybe the lines between those categories aren’t so clear. It also seems that our thoughts are programmed -- Mary had a little…* (pause for them to respond) *and once a thought is in there, there’s not a good way to force it out.

Many of you in your papers about the carrying around your difficult thoughts on cards made comments like “Why would I want to be reminded of these thoughts.” “I know they are in there, I don’t want to be constantly reminding myself of them”. Some of you even said you weren’t willing to look at the difficult thoughts you had. And that makes a lot of sense. It’s painful to look at those thoughts, maybe you experienced sadness or fear or shame when you looked at the thoughts. So it makes complete sense that many of you felt reluctant to look at those thoughts. The question becomes, though, what is the cost of not being willing to look at those thoughts in your life?*

*Here’s an example… Many of us, probably all of us have some automatic negative thoughts about people of a certain gender, race, religion, physical shape or ability. And many of us, whether we like it or not, have negative beliefs about people with mental illness: they’re crazy, they’re violent, they can’t work, they’ll need medications for the rest of their lives, they need to be in supervised settings, I don’t want to be friends with them, I don’t want them dating my child. And these thoughts typically just sort of pop into our heads automatically when we come into contact with those people, just the same way that “Lamb” pops up in your head when you come into contact with the phrase, “Mary had a little”. Probably no one in this room wants to think about the fact that we have these stereotypes or automatic thoughts, but I’d challenge you to see if maybe it’s the case that you do.*

*Let’s say because of my history and programming a very difficult or judgmental or stereotyping thought comes up in my mind every time I see purple people. And, because I am someone who values inclusivity and treating everyone with compassion, I hate it that I have this thought about purple people. But just like how “Lamb” pops in my head every time I hear “Mary had a…” I really can’t help the fact that this difficult judgment thought pops in my head every time I see purple people.*

 *And if what was most important to you was to not have those thoughts, the best strategy would be to never be around those people who trigger those automatic thoughts. If you never hear the phrase “Mary had a little”, you’re probably going to have “lamb” show up less frequently in your mind. We see this all the time. If we’re taught that it’s “bad” to have prejudice thoughts and those thoughts show up for us when we’re around certain types of people and we can’t really choose whether or not the thought it going to show up, then we feel most comfortable not being around those types of people because then we don’t have to feel “bad” for having the thoughts show up. So, we end up engaging in stigmatizing behavior, such as avoiding people we judge as being in particular categories, simply because we don’t want to feel bad about having certain thoughts show up in our heads.

And trying to avoid these difficult thoughts also works with our difficult thoughts about ourselves, ways in which we put ourselves in categories. For example, if one of your difficult thoughts was something like “I’m stupid” and you don’t like being reminded of having that thought, then you’d better not challenge yourself in any way and only do things you’re certain of or else you might have the thought “I’m stupid” show up. Or if your thought was “I’m unlovable” and you really didn’t want to be reminded that you have that you’ve been programmed with that thought, then you’d better not risk getting involved in an intimate relationship because that is sure to remind you of the thought you have that you’re unlovable when things get difficult in that relationship. So it makes sense that many of you didn’t like looking at those thoughts. But I would have you take a look at what you are having to avoid in your life in order to not look at those thoughts. Is the comfort of not being reminded that sometimes your mind gives you those thoughts worth the price?*

*So I'm suggesting an alternative of trying to avoid or change those thoughts, seeing those thoughts as just thoughts and not something that makes us good or bad and not something we need to alter our behavior to try to avoid having. What if these thoughts based on programmed categories and evaluations are just that, thoughts, and our actions are not the same as our thoughts. Maybe what’s important is our behavior and that to be willing to have whatever thoughts show up in our heads, and to see them as simply thoughts—words, not have to “true/or false” them would allow us to live a life that was more in line with our values.*

* 1. Thoughts as thoughts
	*One trick in being able to do something different with our thoughts is to be able to see them as thought and not our realities. See if you can catch yourself right now maybe the thought you’re having is “that makes sense” or “this is stupid, I already see my thoughts as thoughts” or “I don’t understand”. Can you notice that those are thoughts too and not necessarily a reality. They are your assessment, interpretation of this situation—they are not this situation right now. Even the process of trying to convince ourselves that a thought isn’t “true” but that a different thought is “true” (e.g. People with schizophrenia aren’t “crazy”—no, that isn’t a true thought, instead People with schizophrenia are “normal”—that’s the “true” thought) is still the same process of treating thoughts as if they are some reality and can have power over our behavior. However, if we can see our thoughts as thoughts, it may be possible to lessen the power of our thoughts on actions. Let’s try a little exercise to see how we can start to do this*
		1. Exercise 3: Milk, milk, milk exercise—phase 1
			1. Step 1
			*First I’m going to ask you to say a word out loud. Then you tell me what thoughts, images, sensations, feelings come to mind. I want you to say the word “MILK”. (pause for them to say it out loud).*

			*Now what came to mind when you said that?*

			(Possible questions to ask include)

*Could you picture it? Did anyone actually picture a glass of white stuff?*

*Did anyone get the taste of milk? The way it’s cold, creamy, coats your mouth?*

* + - 1. Step 2
			*OK, so let’s see if this fits… What went through your mind were things about actual milk and your experience with it. All that happened is that we made a strange sound—M-I-L-K and lots of these things showed up in the room. Notice that there isn’t any milk in this room, but milk was in the room psychologically. Many of us were seeing, tasting, feeling MILK, yet only the sound was actually here.*
			2. Step 3
			*Now, if you’re still willing, I’d like us to try something else. This exercise may feel a little silly, and you might feel a little embarrassed doing it, but we’ll all do the exercise together so we can all be silly together.

			What I’m going to ask you to do is to say the word “MILK” out loud, rapidly, over and over again and notice what happens. We’re going to do this for about 30 seconds and I’d just like you to notice what happens.*
			3. Step 4: Have them repeat MILK for about 30-40 seconds, doing it with them.
			*OK, what happened? Where’s the milk? Did you notice what happened to the psychological aspects of milk that were here a few minutes ago? (Have time for students to respond).

			(*possible questions to ask include*):*

*Did the power of the thought seem to lessen as you did the exercise?*

*Did it seem less like an actual glass of milk and more like the word “M-I-L-K”?*

*Did anyone have to go out and get milk because you had the thought over and over again?*

* + - 1. Step 5: Debrief
			*The first time you said Milk, it was as if milk were actually here, in the room, at least in some ways. But all that really happened was that you said a word. The first time you said it, it was really meaningful, it was almost solid. But when you said it again and again and again, you began to lose the meaning and the words began to just be words, sounds.

			And notice here, we didn’t focus on trying to change the thought we had. The thought was still MILK. But by looking at it, seeing it for what it is, a word that is in our head and not necessarily a “truth” that needed to be acted upon, changed, or avoided, we started to have a different relationship with the word.*
		1. Step 6: Tie in to stigmatizing thoughts:
		*What if stigmatizing or stereotyped thoughts like “crazy” or “freaky” are just like “M-I-L-K”, maybe they are just thoughts, just words.

		What about the difficult emotions we might feel when we encounter our prejudicial thoughts about people with mental illness? We may feel ashamed, scared, angry, or anxious when we have thoughts like, “That person is crazy or freaky.” Maybe if we’re able to see those thoughts as thoughts, we might be able to experience those thoughts and emotions the same way you experienced “milk” when you repeated it.*
		2. Exercise 3—phase 2
		*Let's try this again, but this time with the word "crazy."* Repeat milk exercise with "crazy" (or another stigmatizing term that has come up in the discussion)

			1. Debrief what was noticed.
			*So maybe one strategy is rather than treating the uncomfortable thoughts we have when we categorize or stereotype someone or ourselves as something “real” or dangerous that we need to respond to, is rather, to intentionally notice them like “M-I-L-K” as thoughts, as words. Notice we aren’t getting rid of the thought or trying to think of “Orange Juice” instead of “Milk”. But it can just be there as the thought “M-I-L-K” or “C-R-A-Z-Y”

			And maybe with that ability to see them as thoughts it might give us some distance from them so we can choose who would like to behave, not as a reaction to those thoughts, but rather in the direction of what’s important to us, in other words, our values. We’ll come back to that idea of our values and how we might choose to behave in our next class.*
1. Homework Class 4: Homework: Writing from the perspective of someone with a history of schizophrenia….First person writing.
	1. Pass out homework #4 handout
	*For this assignment, you’re first going to read this story about Joe Holt. Then, I’ll ask you to go online and watch a short video. The link to the video is on your handout and if you have any difficulties accessing it, please let me know right away.*
	*As you’re watching the video, I’d like you to really try to feel what it would be like to be the person in the video. Imagine that you actually are Joe Holt and that you are actually experiencing what he is describing. This will likely take some intentionality, so I’d encourage you to watch the video when you can be fully present and can take the time to notice your reactions.*

	*Once you have watched the video, you’re again going to be asked to write a brief paper. But this time, I want you to write it as if you were writing from the perspective of Joe Holt. I want you to write a first-person account what you experience being Joe Holt. At the end of your paper, I’d like you to take a few moments to write about what your own experience was like looking at the world through the eyes of Joe Holt.*
2. Assessment Class 4:Pass out assessment handout for class 4 and ask them to fill it out and turn it in as they leave, providing them feedback about previous assessments if necessary.

**Class 5: Help students set intentions for how they would want to behave toward people in the stigmatized group.**

**NOTE: NEED ENOUGH ENVELOPS FOR EACH PARTICIPANT FOR THIS CLASS**

Review homework class 4

* 1. Ask for general reactions to the homework: So what were people’s experiences with the homework from last week where you were asked to experience a day in your life as if you were Joe Holt?
	2. Possible debrief questions to ask:
* *How did the activities that you spent during a typical day change when you imagined yourself as Joe Holt?*
	+ - 1. *What did you notice about your experiences of a typical day in your life when you were embodying the perspective of Joe Holt?*
			2. *What stayed the same or what similarities did you notice when you wrote about your day from Joe Holt’s perspective?*
			3. *Did you notice any judgments in your mind when you engaged in these exercises? What did you do with them? Did you get hooked?*

Review of the previous 4 classes

*So for the past several weeks we’ve be talking about common and automatic it is to categorize. We’ve also learned that our culture teaches the message that “happy” is normal and “suffers” is abnormal, so, we tend to stigmatize those we perceive as suffering.*

*Now who here would say “You know what I to be about in this world? I really want to objectify and dehumanize other people. That sounds like the kind of person I really want to be?”*

*No one? Huh. Yet we seem to share some of the same stigmatizing thoughts about other people. And it’s not just those with psychological problems. We could do this around race, gender, ethnicity, religious background, sexual practices, hair color, weight, even what car you drive. Whether or not we have a desire to not stigmatize, we all have thoughts about those different categories. That is simply what our minds do.*

*We’ve also learned that when we try to not have stigmatizing thoughts, it tends to backfire. Finally, in our class last week, we focused on the idea of noticing thoughts as thoughts and allowing them to be there as thoughts, not as things that need to dictate our behavior either by having to follow the thoughts or having to work to change the thoughts. Remember, we didn’t have to change or avoid having the thought “MILK” but just by taking a look at it and noticing that it was simply a thought our mind gave us, our relationship to that word changed.*

*So if we aren't going to be focusing on trying to control our thoughts, then what? Well, tonight, we're going to be focusing on what we do have control over, our behavior.
Rather than having our mind, which is largely not under our control, dictate how we live our lives, I’d propose an alternative is to have our behaviors guided by our values.

It’s important here that we’re clear here about what values are and aren’t in the sense that I’m talking about them. As I’m talking about them, our values are simply our personal and subjective sense of what is important to us. I’m not talking about morals here that tend to come to us from some outside source like rules about right and wrong. There’s no sense of “good” versus “bad” values. It’s not about guilt, or should’s or shouldn’ts. Values are always freely chosen and personal. They are simply what you would want to make important if you were completely free to choose. And, from this perspective, values aren’t really a thing at all. Rather, valuing is more a quality of action than a thing. You can think about your values as your heart’s deepest desires for the sort of person you want to be and the things you want to do in your time on this planet; in other words, what you want to stand for in life.*

 *So, in this class, we are going to focus on helping you articulate what you’d choose your values to be in relation to suffering people. People all around you are suffering -- your friends, your family, strangers, other students, coworkers, ourselves. Often they suffer in silence and alone. You may not be totally clear what your values are toward people who are suffering, but hopefully by the end of the class today, you’ll be a bit clearer. That is our goal.*

1. Values as chosen behaviors
*So, in keeping with the kind of experiential learning we’ve been doing for the last 5 weeks, we’re going to do some experiential exercises to help you articulate your values.*
	1. Exercise 1: Eyes closed imagining loved one with mental illness—Pass out envelopes and handout.
		1. Step 1
		*We’ll do two exercises today. For the first exercise, I’m going to ask you to do a bit of writing. No one is going to read what you write here. It’s completely for yourself. You won’t be asked to share them at all. You will have a chance to send yourself the letter if you choose.

		Please have out the handout I’ve just given you.* [pause for them to get some paper] *For this exercise, you’ll need to identify some person in your life that you care about that the exercise will relate to. It can be anyone that you really care about, though it might be helpful to not choose a very young child. It could be a close friend or a sibling. If you are close to a teenager or adolescent, it could be them. It could be a parent or a partner/spouse. I’m going to ask you to imaging this person suffering, so if you’re not willing to imagine a particular loved-one suffering, please choose someone else that you would be willing to do the exercise with.* [pause for them to get someone in mind]*. Does anyone need help identifying a person for the exercise?* [provide help if anyone asks for clarification]
		2. Step 2
		*To start the exercise, I'd like us to spend a few minutes getting focused. So, I’d like you to please either close your eyes and if you’d rather, you can gently rest your gaze on a spot below you. Just take a moment here to notice your breath, notice the rise and fall of your chest or stomach. Notice your feet and how they feel touching the ground. And if you find your mind wandering, that’s ok, that’s just what minds do. And if you notice this then see if you can just gently bring your attention back to your breath.*
		3. Step 3
		*Bring to mind the person you are close to that you identified. Picture them in your mind’s eye. What they look like, what they sound like. Maybe what it feels like to you when you see them.

		I'd like you to imagine that this person suddenly starts withdrawing from you. They stop calling or start talking to you less. They seem to be spending a lot of time alone. You're confused and don't really understand what's going on. You might even wonder whether you did something wrong or if it was your fault. Eventually this person completely stops communicating with you. You probably feel scared, sad, and confused and maybe even angry.

		Shortly thereafter they disappear. No one knows where they went. You and the other people who care about this person search for him or her, the police are called, but no one can find them. A few days later you get a call from a psychiatric hospital a couple states away, saying the person has been admitted. The doctor tells you that your loved one was found wandering on a street downtown incoherent, shouting strange things. They tell you that your loved one was diagnosed with bipolar disorder and was in the midst of a manic episode.

		See if you can imagine what you'd feel given this news. Would you be afraid of what is going to happen next? Would you feel anxious about the future? Would you feel angry that this person did this to you? Would you feel concern for their welfare?

		Just give yourself some space to consider what it would be like if this were to happen to your loved one.

		Now, imagine that you can't visit your loved one who is several states away in a psychiatric hospital. Instead, all you can do is write a letter that he or she can have with them as they start to recover. Do you want this letter to be a source of comfort? Of support? If you only had the space of a postcard on which to write this letter, what you tell this person who is hurting?

		Think about this letter for as long as you like and when you’re ready, you can open your eyes and write your letter on the handout I’ve given you. You'll have about 3 minutes.*
		4. Step 4: [after they have all had a chance to write their letter]
		*Now, what I’d like you to do is imagine is that you are the person in the psychiatric hospital and you are receiving a letter like this. I want you to reread the letter, while imagining that the letter was written to you from one of your friends or a loved one. Try to imagine how it would feel to receive a letter like this. Try to imagine how it might affect you during this dark time and how you might feel receiving this letter.*
		5. Step 5: Debrief. Questions to ask could include

*What did you notice doing this exercise?*

*Did you learn anything about how you want to be with others who are suffering? About how you want to be with yourself when you are suffering?*

*Is the message you gave to you loved one fundamentally different than the one that you would want expressed to you in a dark place?*

* 1. Exercise 2 Eyes-on with deictics
		1. Step 1:
		*So now we will do the last exercise of the semester. This is an exercise about human connection and about the barriers we put between ourselves and others. In many ways, this is what this whole experiential learning process has been about; it’s about learning to identify the ways that we judge ourselves and judge others and how this can stand in the way of really being with and being there for the people in our lives.*

		*In order to do the exercise you will need to find a partner. Please, pick someone from the class that you don't know very well and take a seat next to them. (Give them time to find a partner and have them sit next to each other)*
		2. Step 2:

*During this exercise, we will look into each other's eyes for about three minutes. It may seem longer when you actually do it, but that's all it takes.

The way this exercise works —if you are willing to do it—is to get a couple chairs and have them face each other.

Your job is to get present with each other and maintain eye contact. It is not a stare down. You don't have to say anything, or do anything, or communicate anything for the three-minute period. Just be present with your partner.

Now your mind will tell you all sorts of reasons that you can't do that: it will give you bodily sensations, or perhaps a desire to laugh, or maybe you will be worrying about how your breath smells, or you'll be bored or distracted.

But the purpose of the exercise is simply to notice these things, to experience anything coming up, and to notice you sort of come and go from being really present, from really experiencing being here with your partner. If you notice thoughts that seem to hook you and pull you out of the present, you might say to yourself, “I’m having the thought …”, label the thought, and return to the present, to your partner and simply being with them.*

* + 1. Step 3: Allow time for students to get ready then, once they are settled
		*OK, now we’ll begin. Just notice what it’s like being present to this other person.*
		2. Step 4: During the exercise, provide the following instructions, pausing after each one:
			- * *See if you can stay with the simple reality that there is another person over here, looking at you.*
				* *See whether you can let go of the sense of wanting to do this "right";*
				* *If you find yourself talking about this in your mind, or evaluating it, just notice that you are doing that, and then come back into the room and get in touch with the exercise*
				* *See if you can connect with the experience of discomfort in simply being present to another person.*
				* *While you are noticing this person’s humanness, realize that this means they cry, have hopes, dream, struggle, have joy, hurt, screw up, and care. And what if within this person’s struggle, there was a piece of their history that would be disdainful to you, would you still be able to accept them?*
				* *Imagine this person's suffering carried the label "schizophrenia," or "bipolar disorder" or "obsessive compulsive disorder." Would that change anything about how you wanted to be with him or her?*
				* *Realize that this person is looking back and you thinking the same thing. What if that person could see right through you, see through the roles, the ideas, the “I'm happy” mask?*
				* *See if you can imagine your own psychological suffering, and imagine that the person in front of you can see your problems. What if you were the person who carried the label ""schizophrenia," or "bipolar disorder" or "obsessive compulsive disorder." Would it be OK for this person to see that? [pause for a bit]*
				* *What has to change about the person you are looking at for them to be a whole, complete person?*
				* *And after you’ve gotten that answer, why would it be different when applied to you?*
		3. Step 5:
		*OK, you can now stop. Go ahead and briefly discuss the exercise with your partner.* [give them a couple minutes to discuss in pairs]. Then ask them to return to their seats.
		4. Step 6:
		*Finally, now that you’ve had a couple of opportunities to really connect with others, both imagining a loved one suffering and also someone right here in class, a peer, someone maybe just like you, who is also suffering in their own way at times, I’d like you now to take a few minutes to write about your values toward people with psychological suffering. Turn the handout over you were given and for a few minutes write about your intentions about how you want to be toward people with psychological suffering, including those who carry diagnoses like "schizophrenia", "bipolar disorder", "obsessive compulsive disorder," "depression," or any of the other diagnoses that we've talked about this term.

		Don't write about what you think you should write, but just write about what how you'd choose to be, if you had a complete choice about how you'd act. No one is going to read this, you won’t turn this in. It’s really just an opportunity to ask yourself the question “In a world in which you were completely free to choose, how would you want to be towards suffering, both other people’s and your own suffering. What kind of person would you be proud to be about with respect to how you were towards people who suffer?”*[pause until most are done—about 3-5 minutes] *Now once you are done, if you would like, put the letter and what you wrote about your values in the envelop, seal it up, and put your name and address on it. I will mail it back to you in several months. It may serve as a reminder of something important you’ve touched in this class.*
1. Debrief : Questions to ask could include:
	* + *What did you notice during the exercise?*
		+ *What is it like to simply connect with another human being in this way? To not move away from the discomfort of sitting with what is.*
		+ *What did you notice about your values or how you are with suffering?*
2. Conclusion
*I just want to take a moment to thank you all again for your participation in these last several classes. I know it was probably difficult or uncomfortable at times and my hope is that at least some of you got something out of this that may last even beyond remembering all the other stuff we learned in class.*
3. Assessment Class 5 and post curriculum outcome measures
	* + 1. Pass out assessment handout for class 5 and ask them to fill it out and turn it in as they leave.
			2. Pass out the final measures packet and have them fill that our and turn it in as they leave.

Appendix: Classroom Stigma Intervention

**Contents**

**Homeworks**

Class 1 HomeworkClass 2 HomeworkClass 3 HomeworkClass 4 Homework

**Handouts**Handout Class 5

**Assessments**Pre-Intervention Assessment PacketIn-Class Assessment Class 1In-Class Assessment Class 2In-Class Assessment Class 3In-Class Assessment Class 4In-Class Assessment Class 5Post-Intervention Assessment Packet

**Homework Class 1**

**Part 1: Social Perception/Stereotyping.**

**We ALL have stereotypes**. Stereotypes are merely overlearned categorizations of people based on group membership. They are a way our mind makes sense of the world. A good example is gender. There are many different gender stereotypes we, as a society (and they **are** society-specific) have about men and women and we can easily bring them to mind without thinking too hard about it. Try it—fill in the blank, “Girls just want to have \_\_\_.” “Big boys don’t \_\_\_.” So, it is NORMAL to have stereotypes. So while stereotyping is normal, it may also be problematic at times when we begin to always trust those stereotypes our mind gives us, rather than being open to some new information about a person. The key thing is even though we don’t really have a choice about what stereotypes our mind gives us, we don’t have to blindly **believe** our stereotypes and we don’t have to **act on them**. We can learn to notice the stereotypes we have without behaving as if they were necessarily “true.” But in order to be able to choose how we act, not just be blindly led by our stereotypes, we **need** to be able to notice them when they happen. This is uncomfortable because many of us have been taught that it’s “bad” to stereotype, so sometimes we don’t really want to be aware of our tendency to stereotype. But if we’re not willing to see that the stereotype is there, then we don’t really get a choice of how we choose to act. That is the reason for this exercise. In this project, you will be a “stereotype explorer.” You will be on the lookout for stereotypes and prejudices that show up in your mind as you approach new people and situations. The people/situations you choose for this project are up to you. The goal is to learn something about how we perceive others and how our thoughts (automatic and otherwise) do not have to control our actions.

For this exercise, you are to choose **three new people** to approach that you might otherwise not talk to (i.e., you may have a stereotype about them) and get to know them a bit. See if you can notice what thoughts your mind gives you about what they are like or why you wouldn’t typically talk with someone “like that”. You can choose people from your classes, work, leisure time, etc. You may notice how keeping an open mind has the potential to change your attitudes or behavior.

Please write a 2-3 page typed, double spaced about your experience. In your paper, please address the following:

1. Describe how you chose the three people. What stereotypes or automatic thoughts did you have about them before you talked with them?
2. Describe what you noticed happening in your mind as you approached each person and as you interacted with them (e.g, what happened when you became aware of your automatic judgments of them, what happened when you suspended judgment and got to know them better).
3. Consider how each of these people might have stereotyped YOU when they first met you. What kinds of stereotypes did you notice show up in your own mind about how you might be perceived by others?
4. How did this exercise relate to some of the exercises we did in class this week?
5. Summarize your conclusions about this common process our brains engage in to categorize people. How does this affect our perceptions and interpersonal relationships?

**Part 2: Mental Illness Categorization Task**

This part of the homework is optional and will be used in our research about this project. While participation is completely voluntary and will not impact your grade, it would be helpful to us if you would be willing to do this task. It should take only 5-10 minutes and many people find it interesting to do. If you do choose to complete this exercise, please follow the instructions below:

Please complete the Mental Illness Categorization Task as soon as you are able to, but no later than the next class. It will take you between 5 – 10 minutes. You will need to use a computer (PC, not Mac) with internet access. Additionally, you will need to use or have the following enabled on your computer:

* **Internet Explorer, Google Chrome, or Firefox** internet browser (it is best if you have the latest version of the internet browser installed).
	+ If you use Google Chrome and have trouble starting the task, click on “Try the Mozilla Plugin version” near the bottom of the screen.
* You must have **administrator permissions or permissions to temporarily install programs** onto your computer (the task requires the installation of a temporary program to run the task. The temporary program will be removed once you complete the task).
* Your **minimum screen resolution must be 1024 x 728** (most computers from the last 10 years will work).
* **Close all other programs that you may have running** (e.g., Word, Facebook).

To complete the task, go to the following website: <http://bit.ly/su2XdK>

**There may be a long delay (up to 30 seconds) when the task is initially loading. Please wait and the task will load.**

At the end of task, please be sure to exit your browser. If you want to quit the task at any time, press Ctrl + q.

Thank you for your time and cooperation!

**Homework Class 2**

Taking thoughtswith you

We all learn how to suppress thoughts and feelings that we don’t like. We often try to distract ourselves, change our thoughts to better ones, or think more logically. Research has shown that trying to suppress thoughts and feelings is often unhelpful and can even backfire and result in even more of the thoughts you are trying to avoid. This exercise is about learning an alternative to trying to change or suppress thoughts you don’t like. The idea is learn to simply notice difficult thoughts, identifying them for what they are—thoughts—and carry them with you as you live your life and do what matters to you. In class, we created three cards, using the following steps:

1. You chose an unpleasant thought about yourself or about someone else, one you feel uncomfortable about having.
2. You created three cards, with each of the following statements on one of the notecards, substituting “T” for the difficult thought from step 1:

**T** (where T = hooked thought)

I am having the thought that **T**

I am noticing that I am having the thought that **T**

**Homework: carry the cards with you**

1. **Carry the note cards with you**, for example in a wallet or purse. The goal of this exercise is NOT to try to change these evaluations. Rather, we’d like you simply let the thoughts be there without trying to doanything about them.

2. **Once per day, take the cards out** and briefly read the three statements over while noticing any thoughts or feelings you have.

3. **Rate your reaction to the cards.** Each day when you take out the cards to look at them, please fill out the form on the back of this page. If you do not read your cards for a day, please indicate that on the form. Please turn in this form (not the note cards) next week, with your written assignment.

**Homework: written assignment**

Toward the end of the week, write a 2-3 page typed, double spaced paper on your experience with this exercise. Please don't write about the content of thoughts or evaluations you wrote on the note cards, but instead, write about you noticed in doing the exercise. In your paper, please consider writing about the following:

1. What was it like to carry the thoughts around this week? How distressing were the thoughts at first? Did your reactions to the thoughts change as you carried the cards around? Did it become easier to carry them around over time?
2. If you remembered to take the cards out during the week, describe what you noticed happening in your mind as you read them over. Did you notice any difference in your reactions between cards #1, #2, and #3. Also, describe any emotions you noticed.
3. As a result of this exercise, did you notice yourself responding to these thoughts in a way that was different than the way in which you normally respond to them? If so, how was it different?
4. How do you think this exercise was related to the things we discussed and exercises we did at the end of class this week?
* **In addition, please fill out the form on the back of the page and turn it in when you turn in your paper.**

|  |
| --- |
| **Linking Code** |
| What is the first letter of your mother’s first name? \_\_\_\_\_\_What is the second letter of the city of your birth? \_\_\_\_\_\_ What is the month in which you were born? \_\_\_\_\_\_\_\_\_ |

**Each time you read over the cards, please circle how distressing each of the thoughts was that you chose to carry around this week. If you did not read the cards on a particular day, please check that box.**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **DAY 1** |  | **Didn’t read cards today** | **Not at all distressing** | **Mildly****distressing** | **Somewhat distressing** | **Moderately distressing** | **Extremely distressing** |
| Card #1 |  | 1 | 2 | 3 | 4 | 5 |
| Card #2 | 1 | 2 | 3 | 4 | 5 |
| Card #3 | 1 | 2 | 3 | 4 | 5 |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **DAY 2** |  | **Didn’t read cards today** | **Not at all distressing** | **Mildly****distressing** | **Somewhat distressing** | **Moderately distressing** | **Extremely distressing** |
| Card #1 |  | 1 | 2 | 3 | 4 | 5 |
| Card #2 | 1 | 2 | 3 | 4 | 5 |
| Card #3 | 1 | 2 | 3 | 4 | 5 |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **DAY 3** |  | **Didn’t read cards today** | **Not at all distressing** | **Mildly****distressing** | **Somewhat distressing** | **Moderately distressing** | **Extremely distressing** |
| Card #1 |  | 1 | 2 | 3 | 4 | 5 |
| Card #2 | 1 | 2 | 3 | 4 | 5 |
| Card #3 | 1 | 2 | 3 | 4 | 5 |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **DAY 4** |  | **Didn’t read cards today** | **Not at all distressing** | **Mildly****distressing** | **Somewhat distressing** | **Moderately distressing** | **Extremely distressing** |
| Card #1 |  | 1 | 2 | 3 | 4 | 5 |
| Card #2 | 1 | 2 | 3 | 4 | 5 |
| Card #3 | 1 | 2 | 3 | 4 | 5 |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **DAY 5** |  | **Didn’t read cards today** | **Not at all distressing** | **Mildly****distressing** | **Somewhat distressing** | **Moderately distressing** | **Extremely distressing** |
| Card #1 |  | 1 | 2 | 3 | 4 | 5 |
| Card #2 | 1 | 2 | 3 | 4 | 5 |
| Card #3 | 1 | 2 | 3 | 4 | 5 |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **DAY 6** |  | **Didn’t read cards today** | **Not at all distressing** | **Mildly****distressing** | **Somewhat distressing** | **Moderately distressing** | **Extremely distressing** |
| Card #1 |  | 1 | 2 | 3 | 4 | 5 |
| Card #2 | 1 | 2 | 3 | 4 | 5 |
| Card #3 | 1 | 2 | 3 | 4 | 5 |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **DAY 7** |  | **Didn’t read cards today** | **Not at all distressing** | **Mildly****distressing** | **Somewhat distressing** | **Moderately distressing** | **Extremely distressing** |
| Card #1 |  | 1 | 2 | 3 | 4 | 5 |
| Card #2 | 1 | 2 | 3 | 4 | 5 |
| Card #3 | 1 | 2 | 3 | 4 | 5 |

Homework Class 3

 **“The I’m Fine Mask”**

As we explored in class this week, suffering is all around us. Most people will suffer in a way that would meet criteria for an Axis I mental health disorder at some point in their lives. In addition, up to half of adults admit to having suffered so much at some point in their lives that they have seriously and persistently thought about ending their lives. And it’s not like the other half of us don’t also suffer in profound ways. Maybe our suffering just doesn’t fit a DSM label. Maybe we suffer with something difficult in our history like abuse, death of a loved one, or profound loneliness. And yet, there seems to be some shame in our suffering, some way in which we feel we must keep it hidden. As we’re walking around in the world, many of us work hard to put on the “I’m fine mask” to keep that suffering hidden. This homework will focus on taking a look at how that works in ourselves and in others.

**Part 1—What is it like to wear your “I’m fine mask”?**

In this first part of the homework, I’d like you to take the Band-Aid you were given in class. That Band-Aid represents your suffering. Just like the name badge you wrote down in class this week, imagine that the thought you suffer with or the way in which you struggle were written down on that Band-Aid. Please write down one word that represents this thought to you. Don’t write the whole thought, just write down one word that represents that suffering.

Once you have that word written down, place it under the Band-Aid and put that Band-Aid on the back of your hand. Your task is to walk around for an entire day with the Band-Aid on your hand. Every time someone asks you about the Band-Aid, you are to respond, “I’m fine”. Don’t explain that it’s part of a class assignment or anything else (you can explain after you complete the assignment if you want). If they continue to ask you about the Band-Aid, you can choose to make up some story if you’d like, or you can continue to just say “I’m fine.” Notice what it’s like to try to not let people know about your Band-Aid/suffering. Also notice what it’s like for you if people don’t notice or ask about the Band-Aid.

For this first part of the assignment you are to write one to two pages on what your experience was like with the Band-Aid exercise. Please consider responding to the following:

* What was it like to have the Band-Aid as a symbol for your suffering out there for everyone to see?
* How did it feel to tell people “I’m fine” when they asked about your suffering?
* How did it feel when people didn’t ask about it?

**Part 2 --**

Sometimes we can tell that a person is suffering, whether that suffering happens to be in the form of a particular DSM diagnosis or some other form of suffering. But there are others who it may be difficult for you to imagine their suffering. But what if their “I’m fine mask” is just more polished? Is it possible that the data are correct, that suffering does not discriminate? Rates of mental health diagnoses are similar across all strata of society. So no matter where you go, or who you’re surrounded by, in this very place, among all those people you know and love, you are surrounded by people who are suffering.

In this part of the exercise, I’d like you to choose three people. They can be people you know well or they can be people you know of but don’t know personally, like celebrities. The three people I’d like you to choose are:

1. A person that you can tell suffers.
2. A person that you aren’t certain how they suffer, but you can imagine that they might suffer.
3. A person you really admire and that you feel has “everything going for them”. This is a person that it might be hard for you to imagine suffering.

For this part of your written assignment, I’d like you to write a couple of paragraphs from the perspective of each person (write using the “first person” as if you are that person writing). You will be writing a minimum of 6 paragraphs, 2 paragraphs from the perspective of each person. Knowing that all of us are human and all human beings suffer, see if you can imagine the suffering of each of these people. In your paper, imagine you are each of these three people and write as if you are him or her. Address the following questions as if you are writing in the voice of that person:

* How do you struggle? What feelings, thoughts, sensations, regrets, or worries do you struggle with?
* How do you try to hide your suffering?
* When do you work hardest to wear the “I’m fine mask?”
* What would it be like if people knew about your suffering?

**Written assignment—**

To summarize, the written paper you will turn in should be about 2-3 typed pages, double spaced. And it should include three parts:

**Part 1:** Write about a page reflecting on your experience wearing the Band-Aid

**Part 2:** Write couple of paragraphs from the perspective of each of the three people you chose and answer the questions written above

**Part 3 –** Briefly summarize your experience with these exercises and comment on how you think this homework tied in to the discussion and exercises we did in class this past week.

**Homework Class 4**

**Living with Schizophrenia: A Day in My Life**

*Instructions:* For this assignment you will write about a typical day in your life, but from the perspective of a person living with Schizophrenia. In order to receive full credit for this assignment you must complete parts 1, 2, & 3 of the assignment. Part 4 is voluntary and yet I would also appreciate it if you are willing to fill it out and turn it in.

In order to do this writing, you will need to set aside a period of time (probably an hour or more) to do the following four steps:

**Part 1 (required)**

Part 1 involves first reading the story below, about Joe Holt, a person living with Schizophrenia, then watching a brief video about his life.

While you read the story and watch the video, it important that do to it in a particular way. As you watch the video, please imagine yourself in Joe’s position. Try to imagine how Joe feels about what has happened to him. Try to imagine how it has affected his life and how he feels as a result.

**Learning to Cope With a Mind’s Taunting Voices**

By [BENEDICT CAREY](http://topics.nytimes.com/top/reference/timestopics/people/c/benedict_carey/index.html?inline=nyt-per) - August 6, 2011 – from the *New York Times*

LEE’S SUMMIT, Mo. — The job was gone, the gun was loaded, and a voice was saying, “You’re a waste, give up now, do it now.”

It was a command, not a suggestion, and what mattered at that moment — a winter evening in 2000 — was not where the voice was coming from, but how assured it was, how persuasive.

Losing his first decent job ever seemed like too much for Joe Holt to live with. It was time.

“All I remember then is a knock on the bedroom door and my wife, Patsy, she sits down on the bed and hugs me, and I’m holding the gun in my left hand, down here, out of sight,” said Mr. Holt, 50, a computer consultant and entrepreneur who has a diagnosis of schizophrenia.

“She says, ‘Joe, I know you feel like quitting, but what if tomorrow is the day you get what you want?’ And walks out. I sat there staring at that gun for an hour at least, and finally decided — never again. It can never be an option. Patsy deserves for me to be trying.”

In recent years, researchers have begun talking about mental health care in the same way addiction specialists speak of recovery — the lifelong journey of self-treatment and discipline that guides substance abuse programs. The idea remains controversial: managing a severe mental illness is more complicated than simply avoiding certain behaviors. The journey has more mazes, fewer road signs.

Yet people like Joe Holt are traveling it and succeeding. Most rely on some medical help, but each has had to build core skills from the ground up, through trial and repeated error. Now more and more of them are risking exposure to tell their stories publicly.

“If you’re going to focus on recovery, you might want to ask those who’ve actually recovered what it is they’re doing,” said Frederick J. Frese III, an associate professor of psychiatry at the Northeastern Ohio Universities College of Medicine who has written about his own struggles with schizophrenia.

“Certainly, traditional medicine has not worked very well for many of us,” Dr. Frese went on. “That’s why we’ve had to learn so many survival tricks on our own.”

First among Mr. Holt’s many resources is his wife, who has been an effective at-home therapist — in part, paradoxically, because she does not consider mental illness an adequate excuse to shirk responsibilities.

“When I think of all that happened, I just can’t believe she’s still with me,” said Mr. Holt, who lives near Kansas City, Mo. “You have to understand, for so many years I was hearing her say terrible, nasty things that she wasn’t saying.”

**‘I Was So Broken’**

Lonnie Joseph Holt grew up an orphan. After his parents split up, his grandmother took in Joe and three older siblings but was soon overwhelmed when her husband died; off the children went to Childhaven, a residential facility in nearby Cullman, Alabama, that was sponsored by her church. At least the children would be together. It was Feb. 20, 1964. Joe was 3.

But the staff kept the Holt children apart, records show. The siblings rarely saw one another, much less had a chance to speak. The eldest, Jack, made repeated attempts to escape, and the second eldest, Susie, made at least one, according to records kept by the home and acquired by Mr. Holt.

They had their reasons. “There were regular beatings, sometimes with a board, sometimes with a Ping-Pong paddle, sometimes with a razor strap,” Mr. Holt said. “You had to memorize a portion of the Bible, and if you didn’t, you’d get a beating. Once I got beaten so badly I thought I was going to pass out.”

Jack, now a retired Church of Christ minister in Texas, has similar memories.

In 1984, a Childhaven staff member pleaded guilty to sodomizing a minor, and another man to beating a child with a paddle. (The staff has long since turned over, and the home instituted safeguards and is now considered a leading provider, said its current executive director, James Wright.) The Holts were gone by then, Joe zigzagging between homes, living for a time in Alabama and with his father in Cleveland before joining his mother, her new husband and stepsiblings in a bungalow apartment in a complex off Highway 71 near Kansas City.

It did not last. One summer day Joe’s mother and her husband packed up and moved to Texas — and told the 16-year-old boy that he was not invited.

“I honestly don’t remember where Joe lived after that,” said Ted Rogers, a high school friend who is still close. “He was staying on his own, just, I don’t know — around. He didn’t really say.”

On some nights that first summer he would find an empty unit in the complex and bunk down there, with permission from the manager. Or he tucked himself under a nearby bridge. As the weather cooled and high school started, he moved inside, sleeping in a gym next to the football field, cleaning himself and his laundry in a sink. (He had two pairs of pants and two shirts, and carried the spares in a backpack.)

He lived with the family of a friend for almost a year and finished high school living with Charles and Thelma Hansen in nearby Leawood, Kan. The Hansens had children of their own and took in strays they heard about through their church.

“I didn’t know what to think, honestly,” Mr. Hansen said in a recent interview at his house, “except that this is a teenager who hasn’t had a proper family upbringing.”

The boy seemed determined to prove it. Out on a date, he wrecked the Hansens’ car. He ran up bills on the family’s phone. He was kicked out of one college for bad behavior and flunked out of another. By age 21 he was on his own again, living in Springfield, Mo., with Mr. Rogers, delivering pizzas and becoming increasingly eccentric.

It was there, after a suicide attempt with whiskey and pills landed him in the hospital, that he finally got a diagnosis of schizophrenia. He dismissed it.

“Pure junk, is what I thought at the time,” Mr. Holt said. Yes, he felt that people were always looking at him strangely, judging him — and, more frightening, saying terrible things to him, savage insults that they then denied having made. But was that a mental illness, or the effect of a cruel childhood?

“I was so broken,” he said, “I just thought, ‘Well, I’m a weirdo, I’ll never be normal.’ ”

He could never be sure. No matter what trouble he found, no matter what doctors diagnosed, no matter how voraciously he read about brain development, he would always have alternative explanations for his predicament: the abandonment, the beatings, the lack of any family attachments.

“Up until the mid-1990s I was consumed with that question,” he said. “Am I mentally ill or environmentally damaged?”

**Hearing Voices**

He caught the first glimpse of an answer one afternoon in 1996, when his boss invited him out to lunch.

He was anxious, expecting bad news. Now married, he was providing for Patsy, a teenage stepson and three foster children the couple were planning to adopt. Working at a health clinic in Kansas City, he needed more income and job security, not less.

And that is what he got at lunch — a promotion. “We were having a great time, laughing and celebrating, and at the end my boss says she’s going to the ladies’ room,” he said. “But just before she leaves, I hear her say something awful, just terrible — she insults me. Loudly.”

He stood there by the door, stung and confused, until she returned. The jab made no sense, given the spirit of the occasion, but it was still ringing in his ears.

“By the way, did you hear someone say,” he asked, repeating the insult.

She was dumbfounded. So was he, doing his best to pretend he was joking.

By the time he climbed back into his car, he was short of breath. Could it be that all those nasty remarks over the years, those biting insults from out of nowhere, did not exist, except in his own head?

How many times had he falsely accused people, Patsy especially? Hundreds? Thousands? Called her a liar. Made a scene. Erupted, for no reason at all. He was the same way with his stepson.

All those lost jobs, too: welding, painting, bartending, sales, flipping burgers, landscaping, bodyguard, chef, librarian. More than 30 of them. Nothing lasted for long.

“Sometimes I would just run away — literally take off,” he said. “I would get so afraid of people, customers, anyone, afraid of what they would say to me.”

He sat alone in the parking lot and wept until dark, “like something was collapsing inside, like I was shrinking, shrinking.” He was apologizing to Patsy as he came through the door, his head going limp on her shoulder.

“It explained so much,” Mrs. Holt said in an interview. “For so long it was like he had multiple personalities; one moment he was calm, charming, funny, and then — boom — he’s angry, it’s a huge deal, he’s this other person entirely. It was like there were two Joes.”

The ability to catch one’s own mind straying from reality is no small gift; perhaps half the people with schizophrenia have no such self-awareness, researchers say. Still, it would take years for Mr. Holt to master himself.

The three foster children — Janet, Faye and Edwin, legally adopted now — helped bring out his good humor. There were more foster children too, dozens who came and went. (“I had to stop him from answering the phone when the agency called,” his wife said. “Joe cannot say no if a child has no home.”)

In the late 1990s he put himself through a computer programming course and landed a job with a telecom company that looked as if it could turn into a real career. It did not; the company downsized, laying off dozens, including Mr. Holt, who felt that his last, best shot at a successful life was gone.

After his wife talked him out of suicide in 2000, he took a chance, enrolling in a program in marriage and family counseling at nearby Friends University. As part of the preparation to be a therapist, he was encouraged to talk about himself.

“I was like a kid in a candy store,” he said. “I came on too strong, I think. But at the end of it, for the first time — well, I felt whole.”

The question about the impact of a cruel childhood was not the right one, he concluded. There was no answer, and there never would be. It was a distraction. He was hearing voices — he still does — and the only question worth asking was, How does a person live with those?

“The hardest part is that just to stay in the game, I have to scrutinize my every thought, every attitude, every emotion, everything, and ask, ‘Is this real?’ ” he said. “And when it’s bad, I have to adjust my life somewhat to get through it. I had to have some kind of system.”

**Getting Through the Day**

The system includes three distinct strategies: relentless activity, passive resistance and emergency measures.

The first part comes naturally. Joe Holt, for all his easy Southern humor, is a bulldog. Up at 4 a.m., saying prayers to himself, he arrives at his computer job at the government facility at 5 a.m. A quick lunch at noon, and he is in the car — headphones on, listening to the Bible in Hebrew, trying to learn the language — on his way to his second job as a marriage counselor at Abundant Life Baptist Church, where clients pay what they can afford. He is often not home before 9 p.m.

He does not as a rule discuss his diagnosis, and people who know him say they have seen him down but never noticeably delusional.

“When I first saw him at church, to be honest I thought this was one weird duck,” said Rick Friesen, the executive pastor at Abundant Life. “But I watched him; I saw how he would come up alongside people who were lonely or upset, how he’d pick them up. When I started talking to him, I saw how intelligent he was. Then I hired him.”

Yet the delusions — the voices — are always close to the surface, especially at times of stress, including interviews for this article. “I can feel them coming,” he said. “It’s like a rush of adrenaline. They come in waves loud and fast. ‘You should be a better person, you’re the lowest of the low’ — that kind of stuff.”

Arguing only makes the ugly remarks race faster, but he cannot ignore them. So he might put music on his headphones, if possible, to blunt the sound. Pace back and forth, slowly, if he can.

And he has to talk back. “I’ll say: ‘Yes, I could be better. Yes, I’m feeling pretty low right now, but I’m a good person.’ ”

If he is in a meeting, he may excuse himself for a few moments of self-conversation. At his desk, he will put his palms on his temples and mutter his responses. “It is not soothing unless I’m responding out loud,” he said.

In short, he lets the storm pass while holding his ground, and the interludes have not hampered his work performance.

At times of acute stress, when the waves keep coming for days on end, he lightens his workload, taking fewer clients, and refrains from making important decisions. In 2001, not long after he sat in his bedroom with the gun contemplating suicide, he sought medical help. Doctors at a local clinic diagnosed schizoaffective disorder and treated him with antipsychotic drugs for about a month, until the episode subsided.

Over the years, he said, he has relied on medication to ride out extended episodes. He has managed without drug treatment since 2006, he said, but considers it a valuable safety net, to catch him if he falls.

And always, he leans on Patsy.

“I don’t have any reference for mental illness except for Joe,” she said. “And I tell him it doesn’t matter what you’ve suffered, you’re an adult now, you’ve got to put that aside. You have responsibilities.”

“I tell him everyone struggles with doubts, with fears — that it’s normal,” she went on. “Normal. And I remind him that he has children to help take care of.”

And so he has, more of them than most fathers will know. On a recent evening after dinner, he sat as serene as the Buddha on his couch as Patsy and the children took turns holding yet another foster child, a 2-year-old daughter of a drug addict who does not look people in the eye and will not eat. The Holts feed her through a tube running into her stomach.

“The one thing she does, though, is she’ll hug you tight,” he said, setting the girl on his stomach, which she squeezed for dear life. “See that, right there? You see what I’m saying? That just kills me.”

**Part 2 (required)**

**Now that you have finished reading the story, please watch a short video about Joe Holt. Again, as you watch the video** imagine yourself in Joe’s position. Try to imagine how Joe feels about what has happened to him. Try to imagine how it has affected his life and how he feels as a result**. Here is a link to the video:** <http://nyti.ms/re2Qiu>. If that link doesn’t work, you can try the following link to the same video: <http://www.nytimes.com/2011/08/07/health/07lives.html?pagewanted=all>

**Part 3 – writing assignment (required)**

The next part of the exercise asks you to write as if the experiences Joe Holt describes are part of your life. Imagine going through a day in your life as if you were struggling with some of the same experiences as Joe Holt. Try to imagine walking through a day in your as if you were Joe Holt, looking at the world through his eyes and walking through the world in his shoes. Imagine trying to engage in your daily activities while you hear people around you insult you, but you are unsure whether they really did. Imagine what it would be like to hear your mind saying to you, “he hates you, he doesn’t like you,” or “you’re useless. You’re a complete waste.”

**Write approximately 2-3 typed pages** about a day in your life as if you are having the experiences of Joe Holt (it might not be your whole day; it could just be a part of a day). A brief example is presented below to help you get an idea of what this writing might look like; however, feel free to write in a way that best captures your experiences.

*Example:* I wake up at 7 a.m. and am not certain if I am awake or still dreaming. I hear a voice calling my name, is it my partner? I go downstairs and see my partner preparing breakfast and we talk a little about our plans for the day. As I’m talking to her a voice behind me says, “She doesn’t really care about you. You’re a loser. She’s going to leave you.” My partner asks if I’m all right (I think it was really her asking me, but I can’t be sure), and I say, “just a little interference [our code word for when I think I’m hearing voices], I’ll be all right.” I get ready for work and get into my car for the 25 minute commute to my job.

**After you write the two pages above, write a third page** toreflect a little on what it was like to imagine that you were having the experiences of Joe Holt. Here are some questions you might write about as you reflect on the exercise:

1. *How vivid was your experience of living a day in your life as Joe Holt? Did it feel real (like it was happening to you), like you were watching a movie, or somewhere in between? Briefly discuss how real or vivid your experience was.*
2. *How difficult was it for you to imagine a day in your life as Joe Holt? Were you able to feel what he might feel or think what he might think, or did you have difficulty feeling or thinking how he might think or feel? What made it difficult (or easy) to imagine a day in your life as Joe Holt?*
3. *How did you feel when you were writing about your life from the perspective of Joe Holt? What emotions or thoughts showed up while you were doing the assignment? How strong were the emotions that you experienced when doing the writing?*
4. *How does this exercise relate to some of the other exercises we did in class?*

**Part 4 (voluntary)**

* **IF YOU’RE WILLING, PLEASE FILL OUT THIS RATING SCALE ON THE BACK OF THIS PAGE AND TURN IT IN. YOU DO NOT NEED TO ATTACH IT TO YOUR PAPER. JUST TURN IT IN SEPARATELY**

After you watch the read the story and watch the video (but before you do Part 4), please fill out the following form. If you are willing to share your responses on this form for use in the research portion of this class, please bring the form to class and turn it in with your paper. This part of the assignment is completely voluntary and will not impact your grade in any way. Your responses here will not be linked to you or your written work in any way.

|  |
| --- |
| **Linking Code** |
| What is the first letter of your mother’s first name? \_\_\_\_\_\_What is the second letter of the city of your birth? \_\_\_\_\_\_ What is the month in which you were born? \_\_\_\_\_\_\_\_\_ |

Please rate you how you felt when you while reading the story and watching the video. How much did you feel:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Not at all** | **Very little** | **Somewhat** | **Moderately** | **Extremely** |
| Sympathetic | 1 | 2 | 3 | 4 | 5 |
| Soft-hearted | 1 | 2 | 3 | 4 | 5 |
| Touched | 1 | 2 | 3 | 4 | 5 |
| Distressed | 1 | 2 | 3 | 4 | 5 |
| Disturbed | 1 | 2 | 3 | 4 | 5 |
| Angered | 1 | 2 | 3 | 4 | 5 |
| Alarmed | 1 | 2 | 3 | 4 | 5 |

**Handout Class 5**

**Exercise 1: Writing a letter to a loved one**

*Imagine that this letter your loved one can take with him or her as she starts to recover. Do you want this letter to be a source of comfort? Of support? If you only had the space of this postcard below, what you tell your loved one who is hurting? Please write this letter below.*



**Exercise 2: Writing about your values toward people who are suffering.**

Write below about your values as you want to be toward people with psychological suffering – this includes people who might carry diagnoses like "schizophrenia", "bipolar disorder", "obsessive compulsive disorder," "depression," or any of the other diagnoses that we've talked about this term.

Don't write about what you think you should write…Instead, write about how you'd want to be, if you had a complete choice about how you'd act toward people who are suffering.

**Post-Intervention Assessment**

|  |
| --- |
|  Linking Code |
| This section helps you to generate a unique personal code that can be used to link your responses that you give now to those you give later in the class. It will not be used to link your responses to you in any way. What is the first letter of your mother’s first name? \_\_\_\_\_\_ |
|  |
| What is the second letter of the city of your birth? \_\_\_\_\_\_ In what month were you born? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Background information**

 Have you ever worked (paid or unpaid) in a mental health setting (e.g., mental health clinic, psychiatric hospital, substance abuse facility, community home, etc.)?

❑ Yes ❑ No ❑ Prefer not to answer

**AAQ-II**

Below you will find a list of statements. Please rate how true each statement is for you by circling a number next to it. Use the scale below to make your choice.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **1** | **2** | **3** | **4** | **5** | **6** | **7** |
| **never** **true** | **very seldom true** | **seldom** **true** | **sometimes** **true** | **frequently** **true** | **almost always true** | **always** **true** |
|

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Never** **true** | **→** | **Always****true** |

 |
| 1. My painful experiences and memories make it difficult for me to live a life that I would value.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. I’m afraid of my feelings.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. I worry about not being able to control my worries and feelings.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. My painful memories prevent me from having a fulfilling life.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. Emotions cause problems in my life.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. It seems like most people are handling their lives better than I am.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. Worries get in the way of my success.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |

**AAQ-S**

**Instructions:** Below you will find a list of statements. Please rate how true each statement is for you by circling a number next to it. Use the scale below to make your choice.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **1** | **2** | **3** | **4** | **5** | **6** | **7** |
| **never** **true** | **very seldom true** | **seldom** **true** | **sometimes** **true** | **frequently** **true** | **almost always true** | **always** **true** |
|  | **Never** **true** | **→** | **Always****true** |
| 1. My biases and prejudices affect how I interact with people from different backgrounds.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. I need to reduce my negative thoughts about others in order to have good social interactions.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. I stop doing things that are important to me when it involves someone I don’t like.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. I have trouble letting go of my judgments of others.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. I feel that my prejudicial thoughts are a significant barrier to me being culturally sensitive.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. I have trouble not acting on my negative thoughts about others.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. When I am having negative thoughts about others, I withdraw from people.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. When I have judgments about others, they are very intense.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. When talking with someone I believe I should act according to how I feel about him/her even if it’s negative.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. I often get caught up in my evaluations of what others are doing wrong.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. The bad things I think about others must be true.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. I feel that I am aware of my own biases.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. My negative thoughts about others are never a problem in my life.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. I rarely worry about getting my evaluations towards others under control.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. I’m good at noticing when I have a judgment of another person.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **1** | **2** | **3** | **4** | **5** | **6** | **7** |
| **never** **true** | **very seldom true** | **seldom** **true** | **sometimes** **true** | **frequently** **true** | **almost always true** | **always** **true** |

 |
|  | **Never****true** | **→** | **Always****true** |
| 1. When I evaluate someone negatively, I am able to recognize that this is just a reaction, not an objective fact.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. I am aware when judgments about others are passing through my mind.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. It’s OK to have friends that I have negative thoughts about from time to time.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. I don’t struggle with controlling my evaluations about others.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. When I’m talking with someone I don’t like, I’m aware of my evaluations of them.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. I accept that I will sometimes have unpleasant thoughts about other people.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. It’s always wrong to judge others.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. When I have a judgment about someone, I’ll try many things to get it out of my mind.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. I feel guilty when I have a negative thought or feeling about someone.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. I try hard to avoid negative feelings towards others.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. One should never have prejudiced thoughts about other people.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. I get angry with myself when I have a thought or feeling that might be considered prejudiced.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. When I have a negative thought about someone, I try to suppress it.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |

**IRI**

**Instructions:** Please rate how well each of the following statements describes you, with “A” meaning the statement does NOT describe you well and “E” meaning it describes you very well.

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Does NOT describe** **me well** | **→** | **Describes me very well** |
| 1. I often have tender, concerned feelings for people less fortunate than me.
 | A | B | C | D | E |
| 1. I sometimes find it difficult to see things from the "other guy's" point of view.
 | A | B | C | D | E |
| 1. Sometimes I don't feel sorry for other people when they are having problems.
 | A | B | C | D | E |
| 1. In emergency situations, I feel apprehensive and ill-at-ease.
 | A | B | C | D | E |
| 1. I try to look at everybody's side of a disagreement before I make a decision.
 | A | B | C | D | E |
| 1. When I see someone being taken advantage of, I feel kind of protective toward them.
 | A | B | C | D | E |
| 1. I sometimes feel helpless when I am in the middle of a very emotional situation.
 | A | B | C | D | E |
| 1. I sometimes try to understand my friends better by imagining how things look from their perspective.
 | A | B | C | D | E |
| 1. When I see someone get hurt, I tend to remain calm.
 | A | B | C | D | E |
| 1. Other people's misfortunes do not usually disturb me a great deal.
 | A | B | C | D | E |
| 1. If I'm sure I'm right about something, I don't waste much time listening to other people's arguments.
 | A | B | C | D | E |
| 1. Being in a tense emotional situation scares me.
 | A | B | C | D | E |
| 1. When I see someone being treated unfairly, I sometimes don't feel very much pity for them.
 | A | B | C | D | E |
| 1. I am usually pretty effective in dealing with emergencies.
 | A | B | C | D | E |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Does NOT describe** **me well** | **→** | **Describes me very well** |

 |
| 1. I am often quite touched by things that I see happen.
 | A | B | C | D | E |
| 1. I believe that there are two sides to every question and try to look at them both.
 | A | B | C | D | E |
| 1. I would describe myself as a pretty soft-hearted person.
 | A | B | C | D | E |
| 1. I tend to lose control during emergencies.
 | A | B | C | D | E |
| 1. When I'm upset at someone, I usually try to "put myself in his shoes" for a while.
 | A | B | C | D | E |
| 1. When I see someone who badly needs help in an emergency, I go to pieces.
 | A | B | C | D | E |
| 1. Before criticizing somebody, I try to imagine how I would feel if I were in their place.
 | A | B | C | D | E |

**SD-MH**

**Instructions:** Please read the following story:

Here is a description of a 27-year-old man, let's call him Jim Johnson. About two years ago, he was hospitalized in a mental hospital because of problems he was having at the time. Now he appears to be recovered and is doing pretty well. Jim works at a job in a local business. He earns $20,000 a year before taxes and is doing well enough. He is well groomed and known for dressing neatly. At his job, he gets along well with his co-workers and is on friendly terms with them. He begins his days chatting briefly with the people he works with and then gets down to business. He takes coffee and lunch breaks during the day, just like everyone else, and returns to work when his co- workers do. While on the job, Jim checks his work carefully and doesn't pass it along until it is correct. This might slow Jim down a little, but he is never criticized for the quality of the work he completes. Jim is interested in meeting and dating young women in the community. He is considering joining a local church group to meet them. He is also looking for a job that gives him more responsibility and pays better than his current one.

**Please rate your answers to each of the following questions about the story you’ve just read. Use the scale below to make your choice.**

|  |  |  |  |
| --- | --- | --- | --- |
| **A** | **B** | **C** | **D** |
| **Definitely willing** | **Probably willing** | **Probably unwilling** | **Definitely unwilling** |
|  | **Willing** | **→** | **Unwilling** |
| 1. How would you feel about renting a room in your home to someone like Jim Johnson?
 | A | B | C | D |  |
| 1. How about being a worker on the same job as someone like Jim Johnson?
 | A | B | C | D |  |
| 1. How would you feel having someone like Jim Johnson as a neighbor?
 | A | B | C | D |  |
| 1. How about as the caretaker of your children for a couple of hours?
 | A | B | C | D |  |
| 1. How about having your children marry someone like Jim Johnson?
 | A | B | C | D |  |
| 1. How would you feel about introducing Jim Johnson to a young woman you are friendly with?
 | A | B | C | D |  |
| 1. How would you feel about recommending someone like Jim Johnson for a job working for a friend of yours?
 | A | B | C | D |  |

**SQ**

**Instructions:** In the numbered spaces below, please list the following people in order of who you feel is most similar to you with #1 being the MOST similar to you and #7 being the LEAST similar to you. For example, if you felt that your closest friend was the person on this list that was most similar to you, you would write “Closest friend” in the line marked #1. **Please make sure you put everyone on this list in only one spot and rank everyone on the list.**

* Your closest friend
* Your kindergarten teacher
* A person diagnosed with cancer
* A person living in London right now
* The family member you’re closest to
* A person diagnosed with schizophrenia
* Your favorite musician

Most similar to you 1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Least similar to you 7. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DQ**

**Instructions:** On the next three pages, you will be asked to make a series of judgments based on your preferences. There is no right or wrong answer. On each line you will be asked if you would prefer to receive an amount of money for yourself versus have an amount of money given to a particular organization or you will be asked to choose between two different **fictional** organizations. You may ONLY choose either option A **OR** option B. Please circle A or B to indicate which you would choose for EACH line.

**Background information:**

* The Cancer Help Society is a nationwide, community-based voluntary health organization dedicated to eliminating cancer as a major health problem. The Cancer Help Society supports research, patient services, early detection, treatment and education.
* The Mental Illness Advocacy Society is a nationwide non-profit advocacy group, representing families and people affected by mental illness. The Mental Illness Advocacy Society’s mission is to provide support, education, advocacy, and research for people and their families living with mental illness through various public education and awareness activities.

**EXAMPLE:** Your answers to the following questions might look something like this:

|  |  |  |  |
| --- | --- | --- | --- |
| 1. | **A.** $1 for you | *OR* | **B.** $1 for you and $5 for X Society |
| 2. | **A.** $2 for you | *OR* | **B.** $1 for you and $5 for X Society |
| 3. | **A.** $3 for you | *OR* | **B.** $1 for you and $5 for X Society |
| 4. | **A.** $4 for you | *OR* | **B.** $1 for you and $5 for X Society |
| 5. | **A.** $5 for you | *OR* | **B.** $1 for you and $5 for X Society  |

**Please circle *A* or *B* for EACH item**

|  |  |  |  |
| --- | --- | --- | --- |
| 1. | **A.** $110 for you | *OR* | **B.** $75 for you and $75 for Mental Illness Advocacy Society |
| 2. | **A.** $125 for you | *OR* | **B.** $75 for you and $75 for Mental Illness Advocacy Society |
| 3. | **A.** $140for you | *OR* | **B.** $75 for you and $75 for Mental Illness Advocacy Society |
| 4. | **A.** $155 for you | *OR* | **B.** $75 for you and $75 for Mental Illness Advocacy Society |
| 5. | **A.** $170 for you | *OR* | **B.** $75 for you and $75 for Mental Illness Advocacy Society |
| 6. | **A.** $185 for you | *OR* | **B.** $75 for you and $75 for Mental Illness Advocacy Society |
| 7. | **A.** $200 for you | *OR* | **B.** $75 for you and $75 for Mental Illness Advocacy Society |
| 8. | **A.** $215 for you | *OR* | **B.** $75 for you and $75 for Mental Illness Advocacy Society |
| 9. | **A.** $230 for you | *OR* | **B.** $75 for you and $75 for Mental Illness Advocacy Society |
| 10. | **A.** $245 for you | *OR* | **B.** $75 for you and $75 for Mental Illness Advocacy Society |

**Please circle *A* or *B* for EACH item**

|  |  |  |  |
| --- | --- | --- | --- |
| 1. | **A.** $100 for Cancer Help Society | *OR* | **B.** $10 for Mental Illness Advocacy Society |
| 2. | **A.** $90 for Cancer Help Society | *OR* | **B.** $20 for Mental Illness Advocacy Society |
| 3. | **A.** $80 for Cancer Help Society | *OR* | **B.** $30 for Mental Illness Advocacy Society |
| 4. | **A.** $70 for Cancer Help Society | *OR* | **B.** $40 for Mental Illness Advocacy Society |
| 5. | **A.** $60 for Cancer Help Society | *OR* | **B.** $50 for Mental Illness Advocacy Society |
| 6. | **A.** $50 for Cancer Help Society | *OR* | **B.** $60 for Mental Illness Advocacy Society |
| 7. | **A.** $40 for Cancer Help Society | *OR* | **B.** $70 for Mental Illness Advocacy Society |
| 8. | **A.** $30 for Cancer Help Society | *OR* | **B.** $80 for Mental Illness Advocacy Society |
| 9. | **A.** $20 for Cancer Help Society | *OR* | **B.** $90 for Mental Illness Advocacy Society |
| 10 | **A.** $10 for Cancer Help Society | *OR* | **B.** $100 for Mental Illness Advocacy Society |

**In-Class Feedback Class 1**

|  |
| --- |
| **Linking Code** |
| What is the first letter of your mother’s first name? \_\_\_\_\_\_What is the second letter of the city of your birth? \_\_\_\_\_\_ What is the month in which you were born? \_\_\_\_\_\_\_\_\_ |

Please provide feedback based on **just this last section of class (about the last 40 minutes).**

1. **What was the most important thing you learned during this experiential learning process today?**
2. **What did you learn during this class about how the process of categorizing others works?**
3. **Please rate this last section of class on the following:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Strongly Disagree** |  |  |  | **Strongly Agree** |
| The content was clear and understandable  | 1 | 2 | 3 | 4 | 5 |

1. **Is there any other feedback or comments you’d like to give us about this last 40 minutes of class?**

**In-Class Feedback Class 2**

|  |
| --- |
| **Linking Code** |
| What is the first letter of your mother’s first name? \_\_\_\_\_\_What is the second letter of the city of your birth? \_\_\_\_\_\_ What is the month in which you were born? \_\_\_\_\_\_\_\_\_ |

Please provide feedback based on **just this last section of class (about the last 40 minutes).**

1. **What was the most important thing you learned during this experiential learning process today?**

1. **What did you learn about what happens when we try to “not have” thoughts we don’t like?**
2. **Please answer the following questions about the thought you wrote down on the three cards for this week.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| How distressing is this thought? | Not at all | Mildly | Somewhat | Moderately | Extremely |
| How often do you have this thought? | rarely | about once per month | about once per week | most days | many times per day |
| How much do you try to avoid or suppress this thought? | not at all | a little | somewhat | moderately  | very much |

1. **Please rate just this last section of class on the following:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Strongly Disagree** |  |  |  | **Strongly Agree** |
| The content was clear and understandable  | 1 | 2 | 3 | 4 | 5 |

1. **Is there any other feedback or comments you’d like to give us about this last 40 minutes of class?**

**In-Class Feedback Class 3**

|  |
| --- |
| **Linking Code** |
| What is the first letter of your mother’s first name? \_\_\_\_\_\_What is the second letter of the city of your birth? \_\_\_\_\_\_ What is the month in which you were born? \_\_\_\_\_\_\_\_\_ |

Please provide feedback based on **just this last section of class (about the last 40 minutes).**

1. **What was the most important thing you learned during this experiential learning process today?**

1. **What did you learn about other people’s suffering by doing the “suffering name tag” exercise?**
2. **Please rate just this last section of class on the following:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Strongly Disagree** |  |  |  | **Strongly Agree** |
| The content was clear and understandable  | 1 | 2 | 3 | 4 | 5 |

1. **Is there any other feedback or comments you’d like to give us about this last 40 minutes of class?**

**In-Class Feedback Class 4**

|  |
| --- |
| **Linking Code** |
| What is the first letter of your mother’s first name? \_\_\_\_\_\_What is the second letter of the city of your birth? \_\_\_\_\_\_ What is the month in which you were born? \_\_\_\_\_\_\_\_\_ |

Please provide feedback based on **just this last section of class (about the last 40 minutes).**

1. **What was the most important thing you learned during this experiential learning process today?**
2. **Please answer the following question in relation to the exercise where you were asked to close your eyes and simply observe your thoughts:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Strongly Disagree |  |  |  | Strongly Agree |
| **My thoughts seemed like a voice or a sound in my head.**   | 1 | 2 | 3 | 4 | 5 |
| **My thoughts appeared as images or pictures in my head.**  | 1 | 2 | 3 | 4 | 5 |

1. **Please rate the following statement according to your own views:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Strongly Disagree** |  |  |  | **Strongly Agree** |
| If I were like other people, I’d have more control over my thoughts and feelings. | 1 | 2 | 3 | 4 | 5 |
| If I think a thought, that will necessarily determine my actions. | 1 | 2 | 3 | 4 | 5 |
| I can have thoughts without acting on them. | 1 | 2 | 3 | 4 | 5 |

1. **Please rate just this last section of class on the following:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Strongly Disagree** |  |  |  | **Strongly Agree** |
| The content was clear and understandable  | 1 | 2 | 3 | 4 | 5 |

1. **Is there any other feedback or comments you’d like to give us about this last 40 minutes of class?**

**In-Class Feedback Class 5**

|  |
| --- |
| **Linking Code** |
| What is the first letter of your mother’s first name? \_\_\_\_\_\_What is the second letter of the city of your birth? \_\_\_\_\_\_ What is the month in which you were born? \_\_\_\_\_\_\_\_\_ |

Please provide feedback based on **just this last section of class (about the last 40 minutes).**

**1. What was the most important thing you learned during this experiential learning process today?**

**2. What did you learn about your values in relation to people who are suffering?**

**3. Please rate how strongly you felt each of the following during the last 40 minutes of this class:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Not at all** | **Very little** | **Somewhat** | **Moderately** | **Extremely** |
| Sympathetic | 1 | 2 | 3 | 4 | 5 |
| Soft-hearted | 1 | 2 | 3 | 4 | 5 |
| Touched | 1 | 2 | 3 | 4 | 5 |
| Distressed | 1 | 2 | 3 | 4 | 5 |
| Disturbed | 1 | 2 | 3 | 4 | 5 |
| Angered | 1 | 2 | 3 | 4 | 5 |
| Alarmed | 1 | 2 | 3 | 4 | 5 |

**4. Please rate this just this last section of class on the following:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Strongly Disagree** |  |  |  | **Strongly Agree** |
| The content was clear and understandable  | 1 | 2 | 3 | 4 | 5 |

**5. Looking back over the past 5 weeks please rate how you feel about the things we were doing at the end of those classes overall.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Strongly Disagree** |  |  |  | **Strongly Agree** |
| I felt what we did was meaningful | 1 | 2 | 3 | 4 | 5 |
| I learned something important that will impact my life outside of class | 1 | 2 | 3 | 4 | 5 |

**5. Do you have any other comments or feedback about your overall experience of these more experiential activities we did over the last 5 weeks at the end of class?**

**Post-Intervention Assessment**

|  |
| --- |
|  Linking Code |
| This section helps you to generate a unique personal code that can be used to link your responses that you give now to those you give later in the class. It will not be used to link your responses to you in any way. What is the first letter of your mother’s first name? \_\_\_\_\_\_ |
|  |
| What is the second letter of the city of your birth? \_\_\_\_\_\_ In what month were you born? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**AAQ-II**

Below you will find a list of statements. Please rate how true each statement is for you by circling a number next to it. Use the scale below to make your choice.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **1** | **2** | **3** | **4** | **5** | **6** | **7** |
| **never** **true** | **very seldom true** | **seldom** **true** | **sometimes** **true** | **frequently** **true** | **almost always true** | **always** **true** |
|

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Never** **true** | **→** | **Always****true** |

 |
| 1. My painful experiences and memories make it difficult for me to live a life that I would value.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. I’m afraid of my feelings.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. I worry about not being able to control my worries and feelings.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. My painful memories prevent me from having a fulfilling life.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. Emotions cause problems in my life.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. It seems like most people are handling their lives better than I am.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. Worries get in the way of my success.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |

**AAQ-S**

**Instructions:** Below you will find a list of statements. Please rate how true each statement is for you by circling a number next to it. Use the scale below to make your choice.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **1** | **2** | **3** | **4** | **5** | **6** | **7** |
| **never** **true** | **very seldom true** | **seldom** **true** | **sometimes** **true** | **frequently** **true** | **almost always true** | **always** **true** |
|  | **Never** **true** | **→** | **Always****true** |
| 1. My biases and prejudices affect how I interact with people from different backgrounds.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. I need to reduce my negative thoughts about others in order to have good social interactions.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. I stop doing things that are important to me when it involves someone I don’t like.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. I have trouble letting go of my judgments of others.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. I feel that my prejudicial thoughts are a significant barrier to me being culturally sensitive.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. I have trouble not acting on my negative thoughts about others.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. When I am having negative thoughts about others, I withdraw from people.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. When I have judgments about others, they are very intense.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. When talking with someone I believe I should act according to how I feel about him/her even if it’s negative.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. I often get caught up in my evaluations of what others are doing wrong.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. The bad things I think about others must be true.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. I feel that I am aware of my own biases.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. My negative thoughts about others are never a problem in my life.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. I rarely worry about getting my evaluations towards others under control.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. I’m good at noticing when I have a judgment of another person.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **1** | **2** | **3** | **4** | **5** | **6** | **7** |
| **never** **true** | **very seldom true** | **seldom** **true** | **sometimes** **true** | **frequently** **true** | **almost always true** | **always** **true** |

 |
|  | **Never****true** | **→** | **Always****true** |
| 1. When I evaluate someone negatively, I am able to recognize that this is just a reaction, not an objective fact.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. I am aware when judgments about others are passing through my mind.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. It’s OK to have friends that I have negative thoughts about from time to time.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. I don’t struggle with controlling my evaluations about others.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. When I’m talking with someone I don’t like, I’m aware of my evaluations of them.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. I accept that I will sometimes have unpleasant thoughts about other people.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. It’s always wrong to judge others.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. When I have a judgment about someone, I’ll try many things to get it out of my mind.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. I feel guilty when I have a negative thought or feeling about someone.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. I try hard to avoid negative feelings towards others.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. One should never have prejudiced thoughts about other people.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. I get angry with myself when I have a thought or feeling that might be considered prejudiced.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 1. When I have a negative thought about someone, I try to suppress it.
 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |

**IRI**

**Instructions:** Please rate how well each of the following statements describes you, with “A” meaning the statement does NOT describe you well and “E” meaning it describes you very well.

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Does NOT describe** **me well** | **→** | **Describes me very well** |
| 1. I often have tender, concerned feelings for people less fortunate than me.
 | A | B | C | D | E |
| 1. I sometimes find it difficult to see things from the "other guy's" point of view.
 | A | B | C | D | E |
| 1. Sometimes I don't feel sorry for other people when they are having problems.
 | A | B | C | D | E |
| 1. In emergency situations, I feel apprehensive and ill-at-ease.
 | A | B | C | D | E |
| 1. I try to look at everybody's side of a disagreement before I make a decision.
 | A | B | C | D | E |
| 1. When I see someone being taken advantage of, I feel kind of protective toward them.
 | A | B | C | D | E |
| 1. I sometimes feel helpless when I am in the middle of a very emotional situation.
 | A | B | C | D | E |
| 1. I sometimes try to understand my friends better by imagining how things look from their perspective.
 | A | B | C | D | E |
| 1. When I see someone get hurt, I tend to remain calm.
 | A | B | C | D | E |
| 1. Other people's misfortunes do not usually disturb me a great deal.
 | A | B | C | D | E |
| 1. If I'm sure I'm right about something, I don't waste much time listening to other people's arguments.
 | A | B | C | D | E |
| 1. Being in a tense emotional situation scares me.
 | A | B | C | D | E |
| 1. When I see someone being treated unfairly, I sometimes don't feel very much pity for them.
 | A | B | C | D | E |
| 1. I am usually pretty effective in dealing with emergencies.
 | A | B | C | D | E |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Does NOT describe** **me well** | **→** | **Describes me very well** |

 |
| 1. I am often quite touched by things that I see happen.
 | A | B | C | D | E |
| 1. I believe that there are two sides to every question and try to look at them both.
 | A | B | C | D | E |
| 1. I would describe myself as a pretty soft-hearted person.
 | A | B | C | D | E |
| 1. I tend to lose control during emergencies.
 | A | B | C | D | E |
| 1. When I'm upset at someone, I usually try to "put myself in his shoes" for a while.
 | A | B | C | D | E |
| 1. When I see someone who badly needs help in an emergency, I go to pieces.
 | A | B | C | D | E |
| 1. Before criticizing somebody, I try to imagine how I would feel if I were in their place.
 | A | B | C | D | E |

**SD-MH**

**Instructions:** Please read the following story:

Here is a description of a 27-year-old man, let's call him Jim Johnson. About two years ago, he was hospitalized in a mental hospital because of problems he was having at the time. Now he appears to be recovered and is doing pretty well. Jim works at a job in a local business. He earns $20,000 a year before taxes and is doing well enough. He is well groomed and known for dressing neatly. At his job, he gets along well with his co-workers and is on friendly terms with them. He begins his days chatting briefly with the people he works with and then gets down to business. He takes coffee and lunch breaks during the day, just like everyone else, and returns to work when his co- workers do. While on the job, Jim checks his work carefully and doesn't pass it along until it is correct. This might slow Jim down a little, but he is never criticized for the quality of the work he completes. Jim is interested in meeting and dating young women in the community. He is considering joining a local church group to meet them. He is also looking for a job that gives him more responsibility and pays better than his current one.

**Please rate your answers to each of the following questions about the story you’ve just read. Use the scale below to make your choice.**

|  |  |  |  |
| --- | --- | --- | --- |
| **A** | **B** | **C** | **D** |
| **Definitely willing** | **Probably willing** | **Probably unwilling** | **Definitely unwilling** |
|  | **Willing** | **→** | **Unwilling** |
| 1. How would you feel about renting a room in your home to someone like Jim Johnson?
 | A | B | C | D |  |
| 1. How about being a worker on the same job as someone like Jim Johnson?
 | A | B | C | D |  |
| 1. How would you feel having someone like Jim Johnson as a neighbor?
 | A | B | C | D |  |
| 1. How about as the caretaker of your children for a couple of hours?
 | A | B | C | D |  |
| 1. How about having your children marry someone like Jim Johnson?
 | A | B | C | D |  |
| 1. How would you feel about introducing Jim Johnson to a young woman you are friendly with?
 | A | B | C | D |  |
| 1. How would you feel about recommending someone like Jim Johnson for a job working for a friend of yours?
 | A | B | C | D |  |

**SQ**

**Instructions:** In the numbered spaces below, please list the following people in order of who you feel is most similar to you with #1 being the MOST similar to you and #7 being the LEAST similar to you. For example, if you felt that your closest friend was the person on this list that was most similar to you, you would write “Closest friend” in the line marked #1. **Please make sure you put everyone on this list in only one spot and rank everyone on the list.**

* Your closest friend
* Your kindergarten teacher
* A person diagnosed with cancer
* A person living in London right now
* The family member you’re closest to
* A person diagnosed with schizophrenia
* Your favorite musician

Most similar to you 1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Least similar to you 7. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DQ**

**Instructions:** On the next three pages, you will be asked to make a series of judgments based on your preferences. There is no right or wrong answer. On each line you will be asked if you would prefer to receive an amount of money for yourself versus have an amount of money given to a particular organization or you will be asked to choose between two different **fictional** organizations. You may ONLY choose either option A **OR** option B. Please circle A or B to indicate which you would choose for EACH line.

**Background information:**

* The Cancer Help Society is a nationwide, community-based voluntary health organization dedicated to eliminating cancer as a major health problem. The Cancer Help Society supports research, patient services, early detection, treatment and education.
* The Mental Illness Advocacy Society is a nationwide non-profit advocacy group, representing families and people affected by mental illness. The Mental Illness Advocacy Society’s mission is to provide support, education, advocacy, and research for people and their families living with mental illness through various public education and awareness activities.

**EXAMPLE:** Your answers to the following questions might look something like this:

|  |  |  |  |
| --- | --- | --- | --- |
| 1. | **A.** $1 for you | *OR* | **B.** $1 for you and $5 for X Society |
| 2. | **A.** $2 for you | *OR* | **B.** $1 for you and $5 for X Society |
| 3. | **A.** $3 for you | *OR* | **B.** $1 for you and $5 for X Society |
| 4. | **A.** $4 for you | *OR* | **B.** $1 for you and $5 for X Society |
| 5. | **A.** $5 for you | *OR* | **B.** $1 for you and $5 for X Society  |

**Please circle *A* or *B* for EACH item**

|  |  |  |  |
| --- | --- | --- | --- |
| 1. | **A.** $110 for you | *OR* | **B.** $75 for you and $75 for Mental Illness Advocacy Society |
| 2. | **A.** $125 for you | *OR* | **B.** $75 for you and $75 for Mental Illness Advocacy Society |
| 3. | **A.** $140for you | *OR* | **B.** $75 for you and $75 for Mental Illness Advocacy Society |
| 4. | **A.** $155 for you | *OR* | **B.** $75 for you and $75 for Mental Illness Advocacy Society |
| 5. | **A.** $170 for you | *OR* | **B.** $75 for you and $75 for Mental Illness Advocacy Society |
| 6. | **A.** $185 for you | *OR* | **B.** $75 for you and $75 for Mental Illness Advocacy Society |
| 7. | **A.** $200 for you | *OR* | **B.** $75 for you and $75 for Mental Illness Advocacy Society |
| 8. | **A.** $215 for you | *OR* | **B.** $75 for you and $75 for Mental Illness Advocacy Society |
| 9. | **A.** $230 for you | *OR* | **B.** $75 for you and $75 for Mental Illness Advocacy Society |
| 10. | **A.** $245 for you | *OR* | **B.** $75 for you and $75 for Mental Illness Advocacy Society |

**Please circle *A* or *B* for EACH item**

|  |  |  |  |
| --- | --- | --- | --- |
| 1. | **A.** $100 for Cancer Help Society | *OR* | **B.** $10 for Mental Illness Advocacy Society |
| 2. | **A.** $90 for Cancer Help Society | *OR* | **B.** $20 for Mental Illness Advocacy Society |
| 3. | **A.** $80 for Cancer Help Society | *OR* | **B.** $30 for Mental Illness Advocacy Society |
| 4. | **A.** $70 for Cancer Help Society | *OR* | **B.** $40 for Mental Illness Advocacy Society |
| 5. | **A.** $60 for Cancer Help Society | *OR* | **B.** $50 for Mental Illness Advocacy Society |
| 6. | **A.** $50 for Cancer Help Society | *OR* | **B.** $60 for Mental Illness Advocacy Society |
| 7. | **A.** $40 for Cancer Help Society | *OR* | **B.** $70 for Mental Illness Advocacy Society |
| 8. | **A.** $30 for Cancer Help Society | *OR* | **B.** $80 for Mental Illness Advocacy Society |
| 9. | **A.** $20 for Cancer Help Society | *OR* | **B.** $90 for Mental Illness Advocacy Society |
| 10 | **A.** $10 for Cancer Help Society | *OR* | **B.** $100 for Mental Illness Advocacy Society |