PSYCHOLOGICAL AND PHYSICAL WELLBEING: WHY WE STRUGGLE TO KEEP OURSELVES HEALTHY AND WHAT WE CAN DO ABOUT IT.

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MY BACKGROUND

- Psychological Therapist (CBT) working for the NHS
- Personal Trainer for NHS and privately for 5 years.
- Physical Activitiy Clinical Champion for Public Health England.
- Keen interest in Evolutionary Psychology, Neuroscience, Social Psychology Behavioural Science and how these disciplines converge to explain complex human behaviour and health problems.

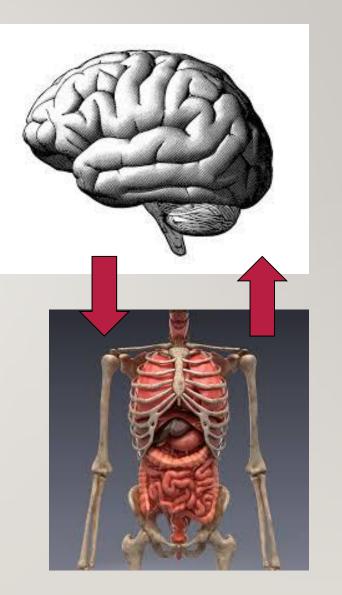


AIMS FOR TODAY

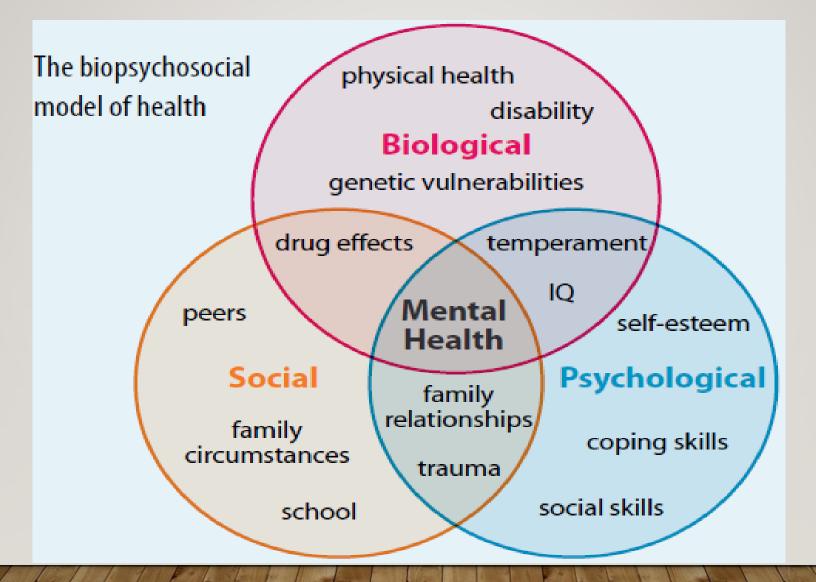
- Understand the reasons we can struggle to keep ourselves mentally and physically healthy.
- Learn what helps us maintain physical and mental wellbeing (evidence based).
- Learn ideas from cognitive behavioral therapy (CBT) that can help improve our wellbeing.
- Learn how to recognise thinking styles and become more self-aware.
- Learn how to change our behaviour and make habits stick.

THE MIND-BODY CONNECTION.

- Historically the brain and body assumed as working independently of one another.
- Doctors and specialists deal with physical health
 vs.
 - Psychiatrists, Psychologists and Psychotherapists deal with mental health.
- Now widely accepted that the brain and body's functioning is intimately connected.



BIO-PSYCHO-SOCIAL MODEL (ENGEL 1977)



NATURE VS. NURTURE

Are we blank slates that are infinitely malleable or genetically determined robots?

In reality there is no division- we have a genetic makeup that is similar to all other humans (and animals!) and this interacts with our environment and culture to influence the development of our brains, bodies and behaviours.

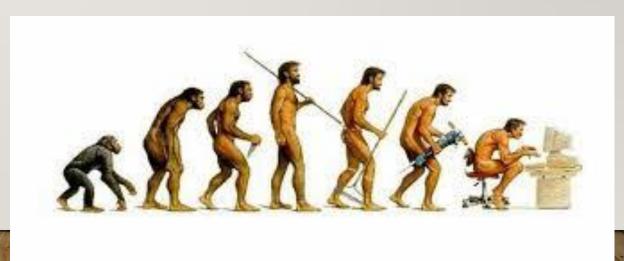
Many health problems are caused by an interaction between our underlying biology/genes and modern culture/environment.

e.g.

bodies/brains that are energy efficient in order to survive in environments that have scarce food availability + modern availability of easy access, high calorie food. = High prevalence of obesity and heart disease

DISTAL CAUSES- EVOLUTION BY NATURAL SELECTION/ GENES

- Evolutionary fitness based on if an organism can **survive** and **reproduce** in its environment.
- Homo Sapiens evolved in specific circumstances- Hunter Gatherers, scarce resources, cooperation essential to survival. (Environment of Evolutionary Adaptedness).
- Need to hunt/gather and natural scarcity of resources meant that resting when not necessary to move likely to be adaptive.



'FROM THE PERSPECTIVE OF NATURAL SELECTION, WHEN CALORIES ARE LIMITED, IT ALWAYS MAKES SENSE TO DIVERT ENERGY FROM NONESSENTIAL PHYSICAL ACTIVITY TOWARDS REPRODUCTION OR OTHER FUNCTIONS THAT MAXIMISE REPRODUCTIVE SUCCESS EVEN IF THESE TRADE-OFFS LEAD TO ILL HEALTH AND SHORTER LIFE SPANS.'

DANIEL LIEBERMAN-PROFESSOR OF EVOLUTIONARY BIOLOGY AND ANTHROPOLOGY WE NEED TO GRAPPLE WITH THE PROBLEM THAT ENGAGING IN VOLUNTARY PHYSICAL ACTIVITY FOR THE SAKE OF HEALTH AND FITNESS IS A BIZARRE, MODERN AND OPTIONAL BEHAVIOUR...OUR BRAINS HELP US AVOID PHYSICAL ACTIVITY WHEN IT IS NEITHER NECESSARY NOR FUN.

DANIEL LIEBERMAN-PROFESSOR OF EVOLUTIONARY BIOLOGY AND ANTHROPOLOGY

PROXIMAL CAUSES-ENVIRONMENTAL/CULTURAL FACTORS.

- Hyper Novel environments (Smart phones, super high calorie/processed food, increased emphasis on individual/ nuclear family vs tribe)
- Instant gratification.
- Modern society has made inactive living easier.
- Can survive, reproduce and socialise with minimal calorie expenditure.







BRAIN DISORDER OR COMMON HUMAN EXPERIENCE?

I in 4 people will experience a mental health problem of some kind each year in England.

I in 6 people report experiencing a common mental health problem (like anxiety and depression) in any given week in England.

Mental health problems are one of the main causes of the overall disease burden worldwide.

Mental health not just down to brain chemistry or genetics and very much linked to life experiences and environmental factors.

Do modern environments promote good mental health?

FUNCTION OF EMOTIONS

Anger- When frustrated, something we want is blocked, experiencing an injustice, someone putting us down. Can make us want to do something or retaliate.

Anxiety- focus on threats and danger- gives us urgency to escape danger or do something about it.

Shame- Makes us want to run away or close down and be submissive to avoid rejection- we experience this if we feel people look down on us.

Guilt- Makes us wary of exploiting or harming others and prompts us to repair relationships if we do.

WHY DOWE BECOME DEPRESSED?

- Route to a goal is blocked (can indicate when worth continuing to pursue something vs when it's right to give up).
- Constantly feeling lower/ subordinate to others.
- Adverse life experiences/upbringing/trauma.
- Loss of a loved one or attachment figure.



- Feeling trapped and no perceived solutions or ways of improving the situation (learned helplessness).
- Feeling personally responsible for failure (society making us feel things are our fault when they are not).

WHY DO WE BECOME ANXIOUS?

- Uncertainty, conflict, lack of control, lack of information.
- Constant exposure to threats/anxiety provoking information- news, health problems, social media.
- Fight or flight system built for survival becomes overactive.

AWFULNESS X LIKLIHOOD RESCUE + COPING

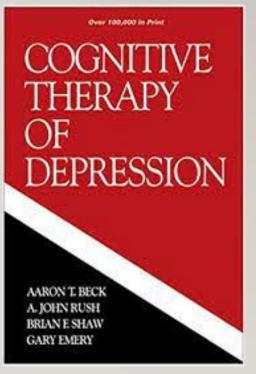


WHAT HELPS?

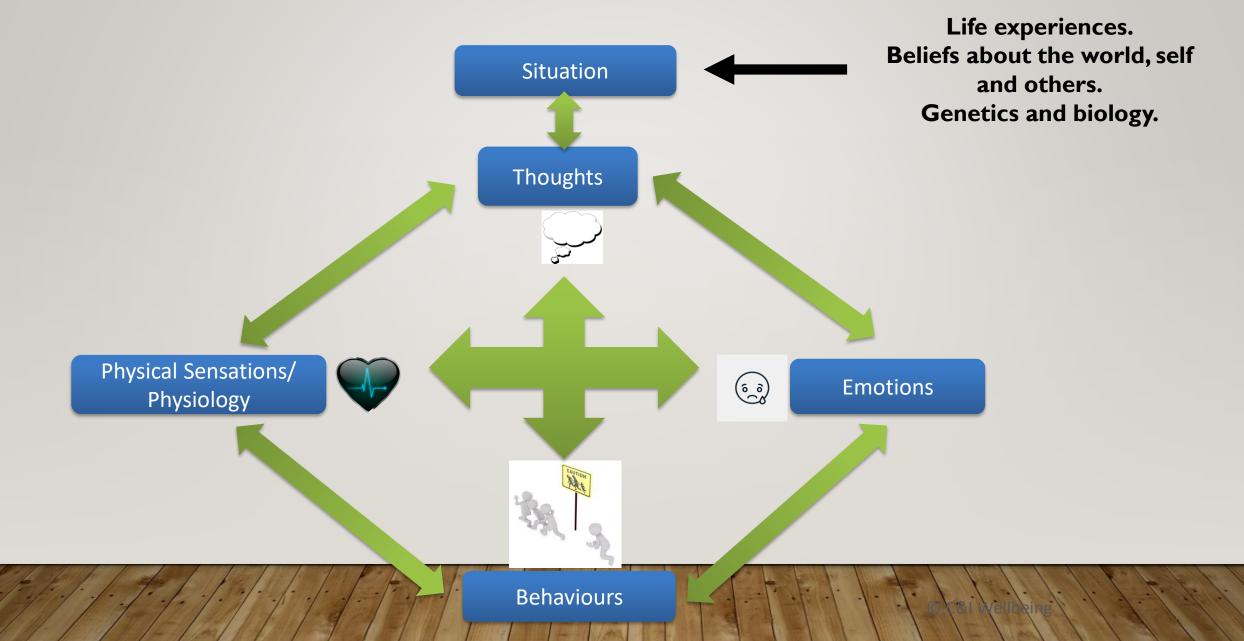
- Physical activity.
- Time spent in green space.
- Social connection.
- Getting enough sleep.
- Psychological therapy
- Reframing Thoughts.
- Mindfulness.
- Medication.
- Establishing a routine- balancing routine and pleasurable activities.
- Finding something purposeful/ meaningful to pursue and working towards it

IDEAS FROM COGNITIVE BEHAVIOURAL THERAPY (CBT)

- Developed in the 1970's by Aaron Beck.
- Helps people recognise patterns of thoughts and behaviours that maintain mental health difficulties.
- A 'doing' therapy that is *here and now* focussed rather than exploring the past or relationships.
- Has a strong evidence base supporting its efficacy in improving symptoms of numerous mental health difficulties.



A PSYCHOLOGICAL UNDERSTANDING



NEGATIVE AUTOMATIC THOUGHTS (NATS)

• NATS are:

Negative Automatic Believable Biased

- In CBT we encourage people to:
- **Recognise/monitor negative thoughts**
- Notice unhelpful thinking patterns
- Step back and evaluate how accurate thoughts are

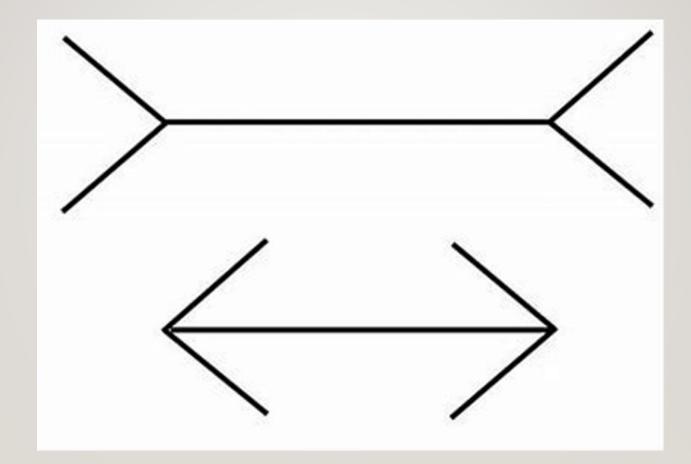


Mental filter

- We all use thinking shortcuts to process information quickly
- If we have a negative idea about ourselves, we end up letting through the negative ignoring or downplaying the positive.
- Allowing all the information to sink in can create a more balanced view about ourselves



NATS AS RULES OF THUMB



COMMON THINKING STYLES



Mental Filter

When we notice only what the filter wants or allows us to notice, and we dismiss anything that doesn't 'fit'. Like looking through dark

blinkers or 'gloomy specs', or only catching the negative stuff in our 'kitchen strainers' whilst anything more positive or realistic is dismissed



Judgements

Making evaluations or judgements about events, ourselves, others, or the world, rather than describing what we actually see and have evidence for

Mind-Reading

Assuming we know what others are thinking (usually about us)



Emotional Reasoning I feel bad so it must be bad! I feel anxious, so I must be in danger





Prediction

Believing we know what's going to happen in the future



Mountains and Molehills

Exaggerating the risk of danger, or the negatives. Minimising the odds of how things are most likely to turn out, or minimising positives

COMMON THINKING STYLES

Compare and despair

Seeing only the good and positive aspects in others, and comparing ourselves negatively against them



Catastrophising

Imagining and believing that the worst possible thing will happen





Critical self Putting ourselves down, selfcriticism, blaming ourselves for events or situations that are not (totally) our responsibility

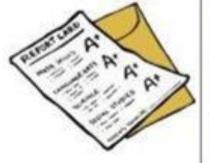


Black and white thinking

Believing that something or someone can be only good or bad, right or wrong, rather than anything inbetween or 'shades of grey'

Shoulds and musts

Thinking or saying 'I should' (or shouldn't) and 'I must' puts pressure on ourselves, and sets up unrealistic expectations



Memories

Current situations and events can trigger upsetting memories, leading us to believe that the danger is here and now, rather than



in the past, causing us distress right now

MONITORING YOUR THOUGHTS

Simple Thought Monitoring Record

Situation Who were you with? What were you doing? Where were you? When did it happen?	Emotions & body sensations What did you feel? (Rate the intensity of your feelings 0–100%)	Thoughts What was going through your mind as you started to feel this way? (Thoughts, images, or memories)		
		°		

TAKE YOUR THOUGHT TO COURT

Situation / Event? Friend cancelled on me at short notice

Emotion (s) I'm feeling? Sad, frustrated, annoyed

Negative / Unhelpful thought? I must have done something to upset him.

Evidence For: He did cancel on me.

Evidence against:

He gave me a plausible reason for cancelling. He have had many good times together. I am catastrophising + thinking in a black and white way.



Balanced perspective? He did cancel on me but its unlikely this is because I've upset him.

COACHING STYLE

Coach A: The bully



Vs.

Coach B: The compassionate motivator



THE POWER OF STORIES

- We are very good at thinking in narratives and metaphor.
- We often hold onto assumptions and rules about ourself and often unconsciously live my them. 'I must never say no' 'I'm not good enough' 'I'm not the kind of person who exercises'.

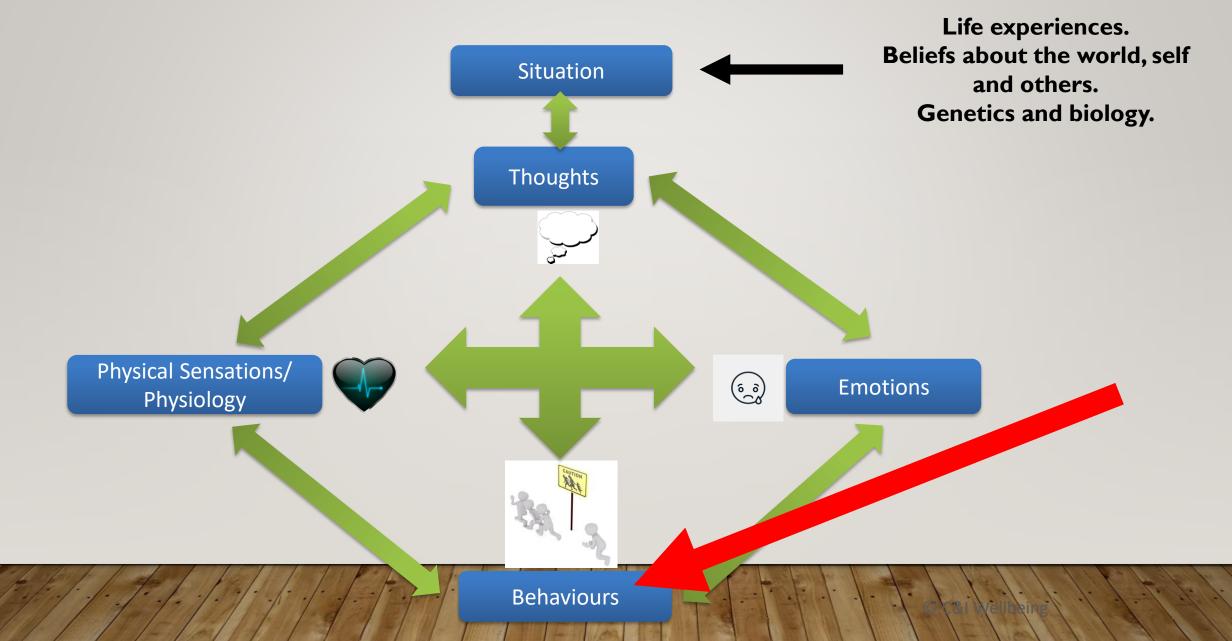


HOW COULD I BE MORE COMPASSIONATE TOWARDS MYSELF?

AM I PRONE TO CERTAIN UNHELPFUL THINKING STYLES?

WHAT RULES AM I UNCONSCIOUSLY FOLLOWING?

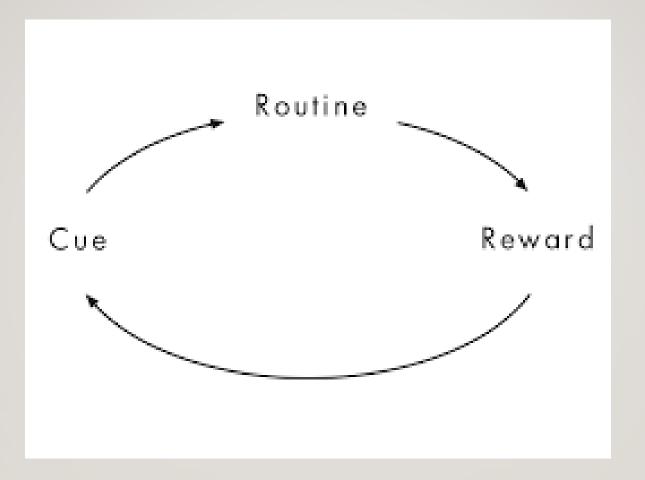
A PSYCHOLOGICAL UNDERSTANDING



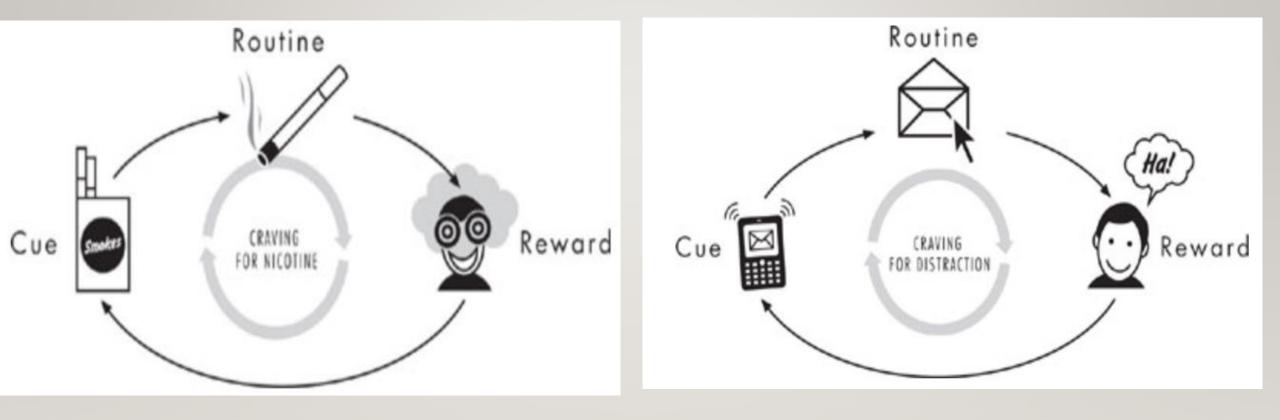
BEHAVIOURAL CHANGE



THE TRUTH ABOUT HABITS

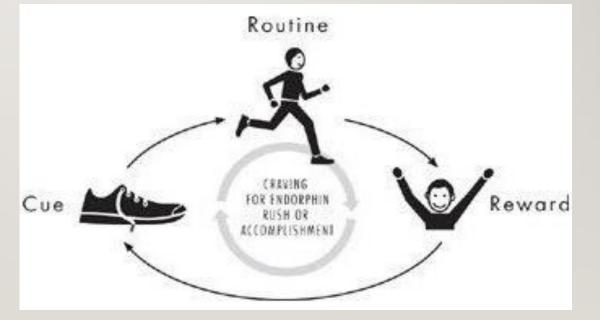


CRAVINGS AND REWARD



CUES, REWARDS AND CRAVING.

- 'Healthy' behaviours often do not bring instant gratification
- The behaviour required can feel uncomfortable or unpleasant
- Positive emotion is key to creating habits!



ACTIVITY SCHEDULING

What: Brisk walk When: 6:00-6:30pm Where: Local Park Who: By Myself



		Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning	What							
	Where							
	When							
	Who							
	What							
	Where							
	When							
	Who							
Afternoon	What							
	Where							
	When							
	Who							
	What							
	Where							
	When							
	Who							
Evening	What							
	Where							
	When							
	Who							

What: Call James When: 7:00- 7:30pm Where: Living room Who: James

CONTEXT, CONTEXT, CONTEXT!

- Choice architecture a key idea of behavioural science- no such thing as a neutral design.
- How you arrange your environment will influence how likely we follow through on plans.



LOW MOTIVATION CONTEXTS

- It is inevitable that certain contexts will require greater effort to exercise.
- Planning environment can help manipulate cues and make habit formation easier.
- Make use of priming and things that will subconsciously 'nudge' you towards better habits.



REWARD SUBSTITUTION.

'Do the right thing for the wrong reason!'

Dan Ariely- Professor of Psychology and Behavioural Economics 'If you want people to change their behaviour, make it as easy as possible for them to do so.'

> Paul Dolan-Professor of behavioural science

HOW CAN YOU DESIGN YOUR ENVIRONMENT TO HELP YOU BE MORE ACTIVE/ ENCOURAGE HEALTHY BEHAVIOURS?

IN SUMMARY

- Interactions between underlying biology and modern environments often cause mental and physical health problems.
- Difficult emotions and mental health difficulties are a normal part of being human.
- There are ways of improving our mental and physical health.
- CBT can help us make changes in our thinking styles and behaviours.

RESOURCES

Staff support

- https://www.lincolnsinn.org.uk/members/wellbeing/
- Self help
- https://www.cci.health.wa.gov.au/Resources/Looking-After-Yourself
- https://www.getselfhelp.co.uk/

Mental health charities

- https://www.mind.org.uk/
- https://www.thecalmzone.net/
- https://www.rethink.org/

NHS support

Find a local mental health service: <u>https://www.nhs.uk/Service-Search/other-services/NHS%20psychological%20therapies%20services%20(IAPT),%20including%20cognitive%20behavioural%20therapy%20(CBT)/LocationSearch/10008</u>

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