



Boosting Self-Confidence Around Others

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EXETER

It can be hard to know where to turn to if you have difficulties with self-confidence when in the company of others. It can feel as though you are the only one struggling and that everyone else is doing fine. Well done in taking the first step towards tackling the problem and we hope this booklet will help you to boost your self-confidence around others.

This booklet is aimed at any student who struggles with self-confidence about social interaction. It includes two student examples to illustrate the different techniques. All the techniques in the booklet are based on Cognitive Behavioural Therapy (CBT) and we will talk more about what that is later in the booklet. You may be working through the booklet on your own or one to one with the support of a practitioner from the Wellbeing Centre. If working with a practitioner, you will be able to talk through how you have got on between sessions using the different techniques, and any problems that may have arisen with your practitioner.

Working on self-confidence can be a difficult and challenging process and there may be times when you feel as though you aren't getting anywhere. Just remember that we all have good days and bad days so try not to let the bad days feel as though you have taken 'two steps back'. It can also be helpful to talk to someone you trust such as a family member or a friend so you have their support throughout this process.

CBT techniques can seem difficult at first but much like exercise, the more you use them the easier they become, until you get to the point where they don't seem like any effort at all. Again, like exercise it is important to keep up with these techniques as much as possible so they become more of a habit and feel more natural to use.

The idea of this booklet is to give you the information you need to help yourself boost self-confidence. We suggest that you have a go at all of the techniques to find out which ones are the most helpful for you.

About Shyness and Social Phobia

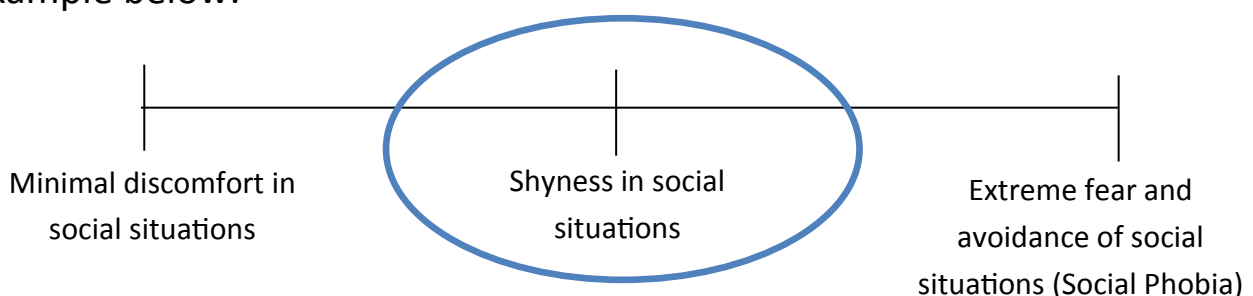
Everyone lacks confidence in social situations from time to time, and a certain level of anxiety is normal. Anxiety becomes a problem when it is persistent and starts to impact your day to day life. This is sometimes called shyness, or social phobia.

It is important to understand the difference between being shy and experiencing Social Phobia:

Shyness is common and is characterised by short and intermittent periods of discomfort and **low self-confidence** in certain social situations, e.g. meeting new people. People who experience shyness may be reluctant to participate in some social situations, however they are usually able to overcome their apprehension and nervousness to engage socially and are generally at peace once they get to know people.

Social Phobia, however, is a persistent and excessive fear of the negative judgement of others in most social situations. People who suffer from Social Phobia often experience significant distress before, during and after social interactions which considerably impairs their ability to go about their day to day life.

Shyness and Social Phobia are thought to exist on a continuum, such as the example below:



This booklet focuses on boosting self-confidence as a way of tackling shyness or anxiety around others.

Why Do We Experience Anxiety?

It is important to remember that all humans experience anxiety. Anxiety is the physical response to fear which has kept us safe over the course of evolution. These physical feelings can range from nervousness up to extreme panic or sheer terror.

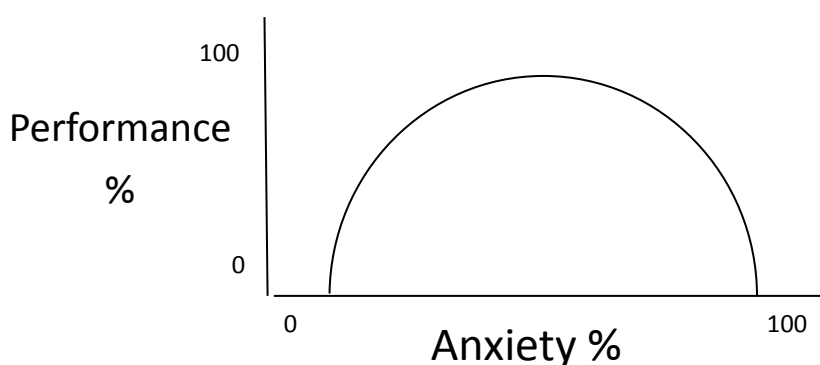
The fight, flight or freeze response

When we are exposed to a threat (whether physical or psychological) we experience a fight/flight/freeze response where adrenaline is released into our bodies and causes a series of physiological changes.

Anxiety tells us that there is something dangerous to pay attention to. This is why it feels so unpleasant; **it gets our attention**. Often this is a helpful response - for example, if a car was speeding towards us we would want to pay attention to this threat. Anxiety can also help improve performance, for example, the release of adrenaline helps athletes to perform better during a race.

In some situations this anxiety response is out of proportion to the event and is less adaptive, for example, freezing during an exam or in a social situation.

It can be helpful to be aware of the graph below which shows that some anxiety will improve your performance, however too much anxiety will impair your performance.



Physiological Response to Anxiety

When the fight, flight or freeze response is activated we experience an increase in adrenaline which causes a number of physiological responses. Whilst these can feel unpleasant, they all serve a specific protective purpose and are signs that your body is preparing to fight, to run away or to freeze until the threat passes.

1. **Glucose is released** into our blood stream to give us a surge of energy.

2. **Heart beats faster** to carry extra oxygen in the blood to our muscles and our brain. It may feel like your heart is pounding.

3. **Breathing faster** to increase our oxygen intake which is needed to convert the glucose into energy. You may start to yawn, notice breathlessness, tightness in your chest or dizziness.

4. **Tingling or feeling cold** where blood is diverted away from areas that are not so vital such as vital organs, skin, fingers and toes.

5. **Dry mouth and churning stomach** where blood is diverted from the digestive system to the muscles.

6. **Muscles tense** for action and can result in aches and pains, trembling or shaking.

7. **Sweating** is the body's way of cooling down.

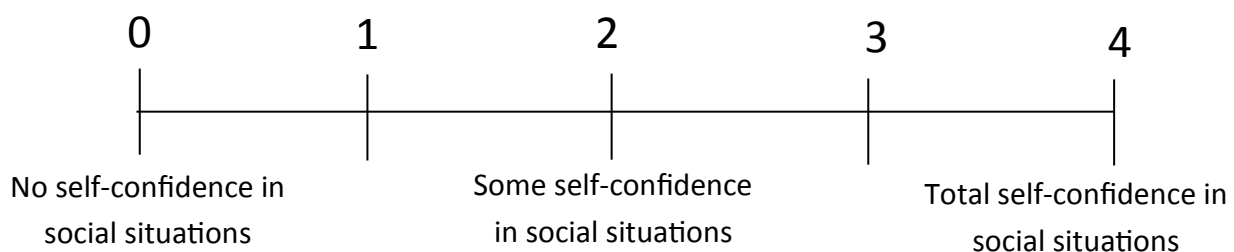
8. **Changes to vision or spots before your eyes** as pupils dilate to increase our field of vision.

Self-Confidence

Self-confidence can be defined in many ways but it is ultimately a subjective experience. However, there are common qualities associated with having high self-confidence:

- ◇ A belief in your abilities and acceptance of your limitations
- ◇ Feelings of wellbeing
- ◇ An ability to manage anxiety
- ◇ Being comfortable with saying yes and no to others based on personal preference and/or values

As with shyness, self-confidence can be rated on a continuum as it is not a static quality. Use the scale below to rate your own levels of self-confidence.



What are the causes of low self-confidence?

- ◇ Life events, e.g. relationship breakup
- ◇ Learning difficulties
- ◇ Mental health problems
- ◇ Past experience, e.g. school
- ◇ Genetics, e.g. a shy personality

...and many more

FYI the word confidence can be understood from its Latin derivative which means “with trust”.

Student Stories

Ana's Story

Ana was in her first year studying Theology. It was her first time this far away from her family and friends. Ana had always struggled to deal with change and found the transition to university particularly difficult.

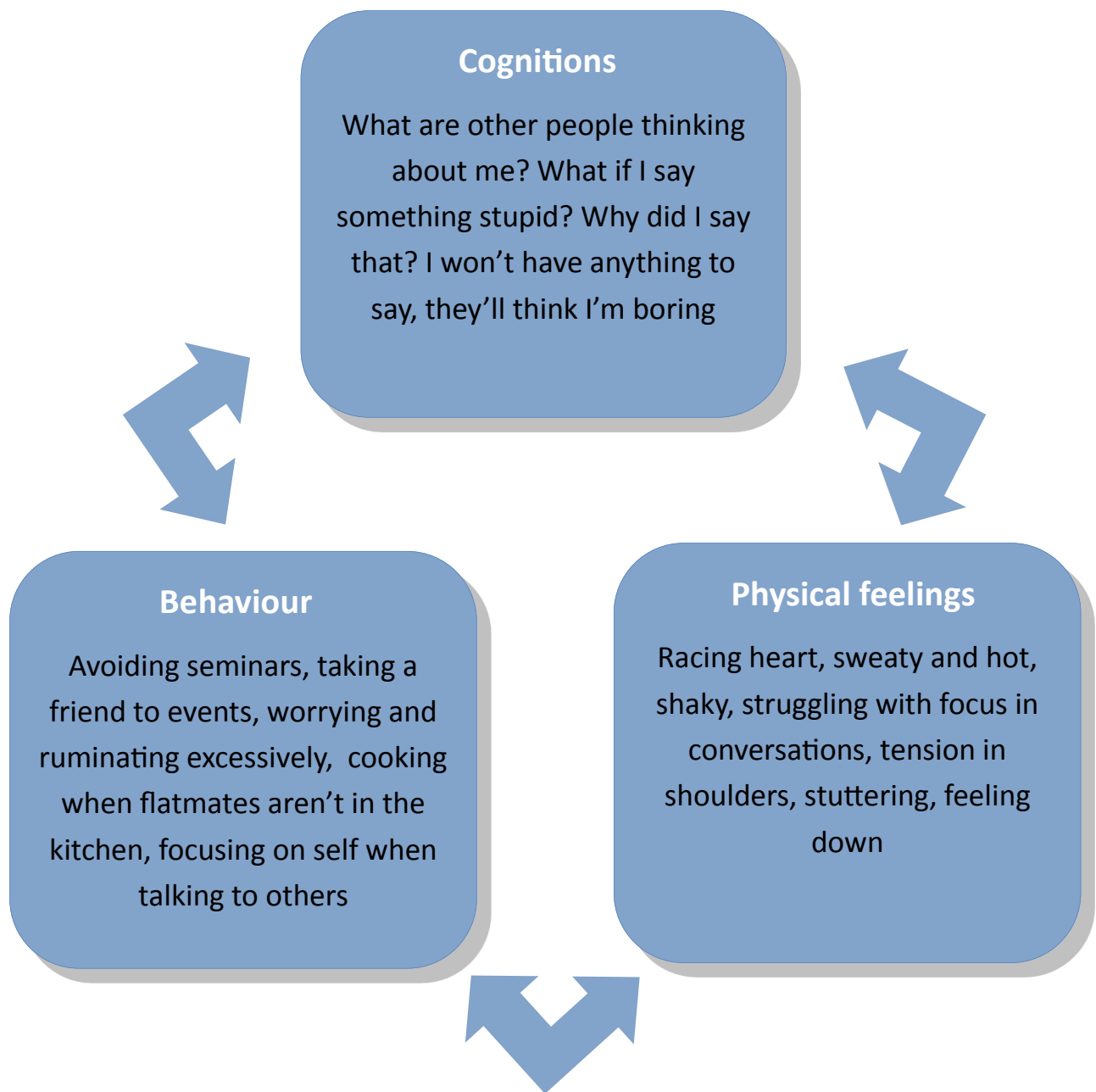
When Ana was around her flatmates and new course friends, she noticed she would feel nervous and experience physical symptoms such as sweating and a racing heart. Ana often worried she would say something wrong or not have anything to say at all, as a result she started to make excuses to avoid going to the pub with her flat and no longer offered to answer any questions in seminars.

Rory's Story

Rory was in his final year of his History degree and had recently been through a relationship breakup.

Since breaking up with his partner, Rory had been experiencing a low mood and started to feel anxious when socialising with his friends. He would often have negative thoughts such as “everyone else is having a better time than me” and “they must think I’m boring”. Rory started to plan possible conversations beforehand and rehearse what he was going to say to people. He found that after conversations he would go back over the things he said and feel embarrassed. As a result, Rory began to dread socialising with others.

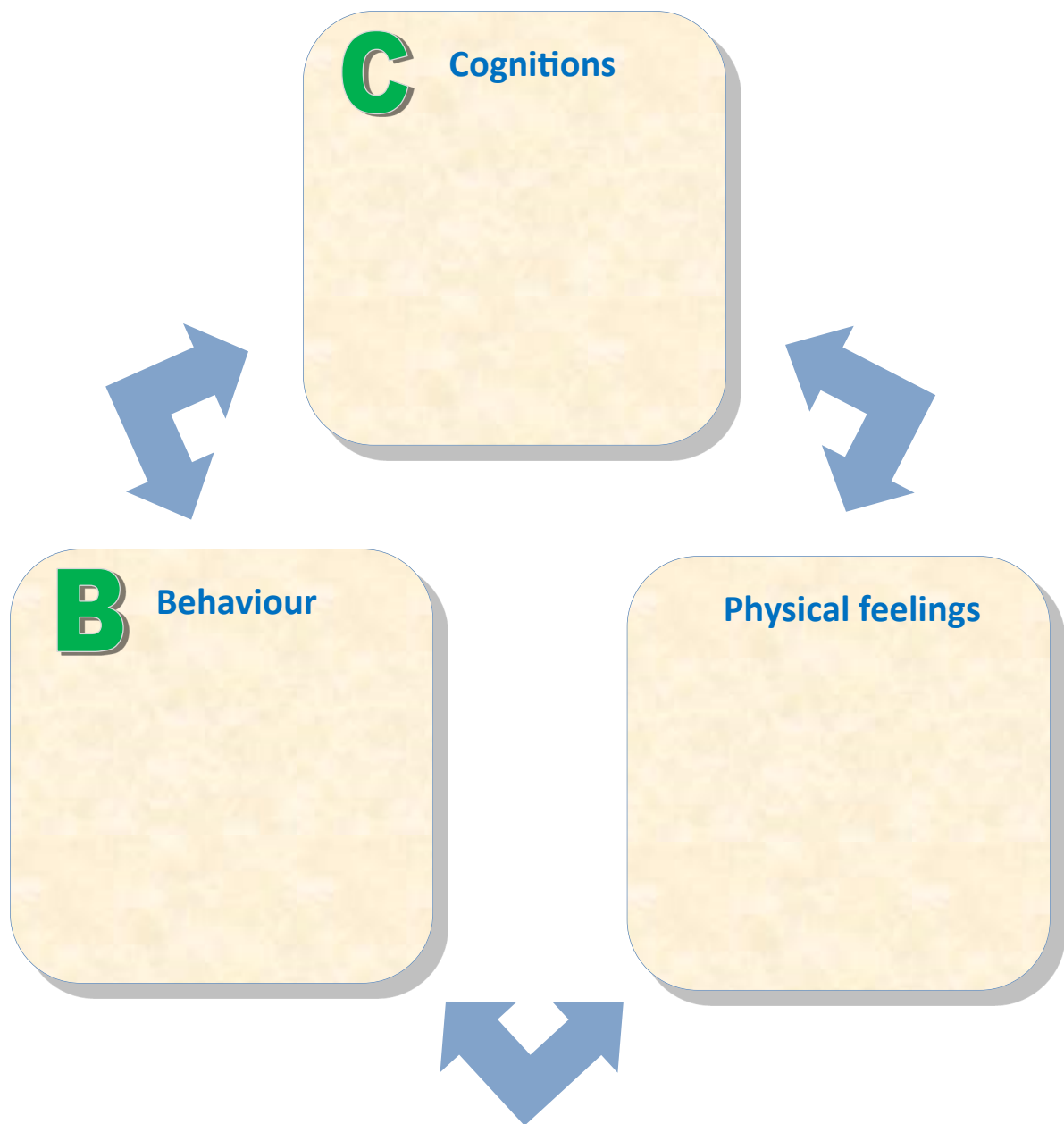
The Maintenance Cycle of Low Self-Confidence



FYI 'Cognitive' refers to mental process such as thoughts, attention, memory.

All three areas can be affected by low self-confidence and each area can have additional 'knock on' effects on the other areas. For example, if you are worrying all the time it's likely that you'll feel tense and on edge and as a result you may change the way you behave in social situations. This can cause the pressure to build up and can lead you to worry more and to feel more anxious.

Your Maintenance Cycle



The above diagram shows how you can get 'trapped' in a vicious cycle that can be very difficult to break out of. CBT works by making gradual changes in your thoughts and/or behaviours to break this cycle.

Throughout this booklet, we will be looking at CBT techniques which focus on either your behaviours, cognitions or both. The above green 'B' and 'C' are used throughout the booklet to symbolise whether the intervention is focusing on changing behaviour, cognitions or both.

Goal Setting

Goal setting is an evidence-based technique which can be used to help you to make changes in your behaviours and/or cognitions by following a structured approach.

Tips for Successful Goal Setting

- ◇ Set short-term goals
- ◇ Focus on one or two goals at any one time
- ◇ Ensure your goals are positive

Moving towards something rather than away e.g. “To go for more walks” rather than “to stop sitting on the sofa”.

- ◇ Follow the SMART structure

Specific - *Be as clear as you can, you may want to ‘feel confident’ but ask yourself what ‘feeling confident’ means you will be able to do e.g. talk to strangers at work.*

Measurable - *How will you know when you have achieved this goal?*

Achievable - *Do you have the time and resources to achieve this? Is it a small enough step?*

Relevant - *It needs to be relevant to you, it should match your beliefs and values.*

Time-specific - *You should have a clear idea of when you want to achieve this goal by, e.g. in the next month.*

Ana's Goals

Ana decided to set some goals for her sessions with the Wellbeing Service. She wanted to focus on her behaviours as she felt her main problem was worrying and avoiding social events. She decided to start by setting one goal.

Todays date: 04/04/2017

Goal One:
To not feel anxious when socialising

I can do this now (circle a number)

☒ 0 (not at all) 1 2 (occasionally) 3 4 (Often) 5 6 (Anytime)

Ana initially set herself a goal to not feel anxious when socialising, however it is difficult to measure this. Making goals positive and SMART can help.

To strengthen her goal, Ana ensured it was a positive goal and that it followed the SMART structure.

Todays date: 04/04/2017

Goal One:
To say 'Hello, how are you?' to at least 2 people at the party on Saturday.

I can do this now (circle a number)

☒ 0 (not at all) 1 2 (occasionally) 3 4 (Often) 5 6 (Anytime)

Your Goals

Now have a go at setting your own goals. You can rate how able you are to achieve your goal *today* using the scale at the bottom of each box. It is helpful to revisit these goals each week and to set new ones once you have achieved them.

Today's date: _____

Goal One: _____

I can do this now (circle a number)

0 (not at all)	1	2 (occasionally)	3	4 (often)	5	6 (anytime)
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Today's date:

Goal Two:

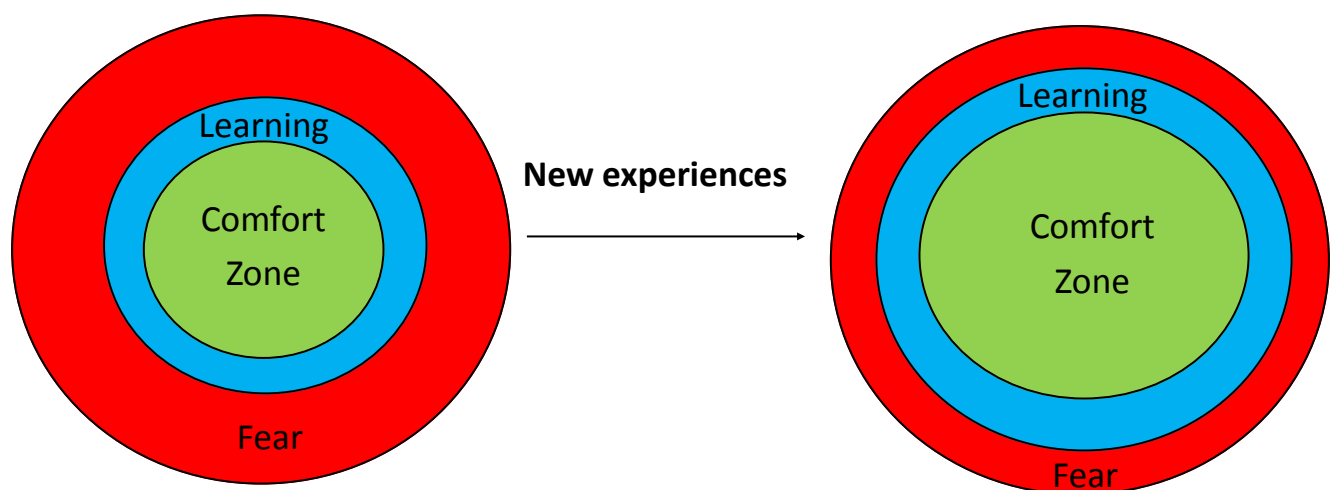
I can do this now (circle a number)

0 (not at all)	1	2 (occasionally)	3	4 (often)	5	6 (anytime)
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Breaking Out of Your Comfort Zone

When we lack self-confidence, we tend to stay within our comfort zones. This means that the range of life experiences we expose ourselves to becomes narrow. This prevents us from learning about what would happen if we put ourselves in those situations (we'd probably be OK!). In order to start pushing the boundaries of our comfort zones, we need to be open to trying new and different things which may initially cause us some anxiety. The more we do these new things, the easier they will become.

Setting goals can be the first step towards this, however it is important to start with small, gradual steps which may involve breaking larger or longer-term goals down.



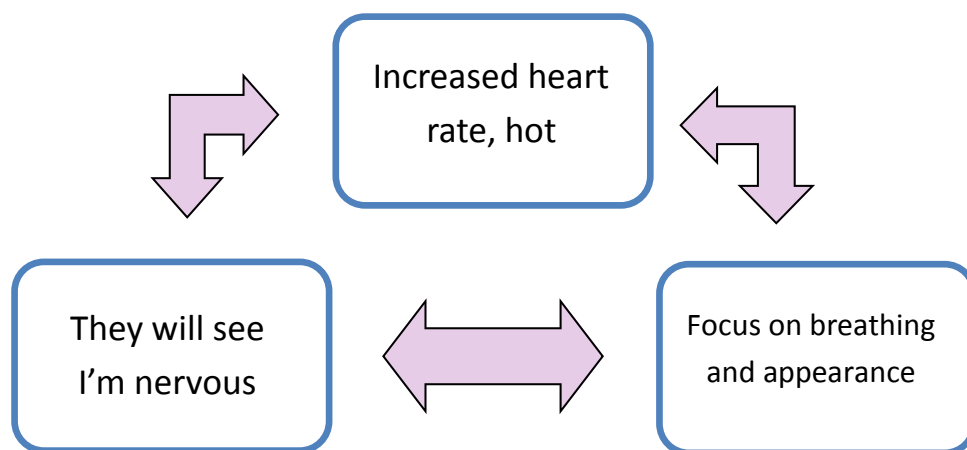
Rory's Example

Rory wanted to go to America for a 6 month internship following his degree. At the start of his sessions this is something which felt too far out of his comfort zone due to his anxiety around interacting with new people. He decided to break this goal down to fit closer to the boundaries of his comfort zone by planning to go to a society event without his housemate. Having accomplished this, he then felt more confident to attend the drop-in session to ask questions about the internship on his own.

Focus of Attention

As previously mentioned, the physical changes which occur during the fight, flight or freeze response help to prepare us to respond to a perceived threat. When we have concerns of how we will cope with a situation, e.g. “I won’t have anything to say”, we will monitor this internal threat. This increases the focus of attention on ourselves.

When we lack self-confidence, we often respond in this way. We tend to pay more attention to **what we are saying and doing** when interacting with others. Although some awareness of what you are saying and doing is important, **excessive** self-focus can make it more difficult to actively engage in interactions with others. As a result, we may not perform as well during social interactions, which can have a knock-on effect on our self-confidence.



Humans have limited capacity for attention, for example, it would be very difficult to pay full attention to two conversations at once. Therefore, when we are focused on ourselves during a social interaction, we have limited attention to pay to the interaction itself.

Following a social interaction, we may find ourselves thinking over the event. This can be known as **ruminating**. Rumination tends to be focused on what we believe to be the negative aspects of the interaction which can maintain low self-confidence and feelings of anxiety. Changing our focus of attention after a social interaction can reduce rumination and feelings of anxiety.

Exercising Your Attention



It is helpful to think of attention as a muscle. It is something we can exercise and strengthen. In order to tackle excessive self-focus, we can train ourselves to change our focus of attention. By having a better understanding of how to focus our attention, we can break the cycle of self-focus and boost our self-confidence.

Everyday Task Focusing

Everyday task focusing involves fixing your attention on mundane (day-to-day, 'normal') activities. You are not required to do anything extra in your day, it is just about changing how you pay attention to things you are already doing. By practicing focusing your attention on a chosen activity, your attention 'muscle' gets a good workout!

One way to help keep your attention on the task is to use the five senses: sight, hearing, smell, taste and touch. For example, what kind of noises can you hear? What can you see when doing this activity?

Write down some everyday, routine activities which you could use to practice this technique:

.....

.....

.....

.....

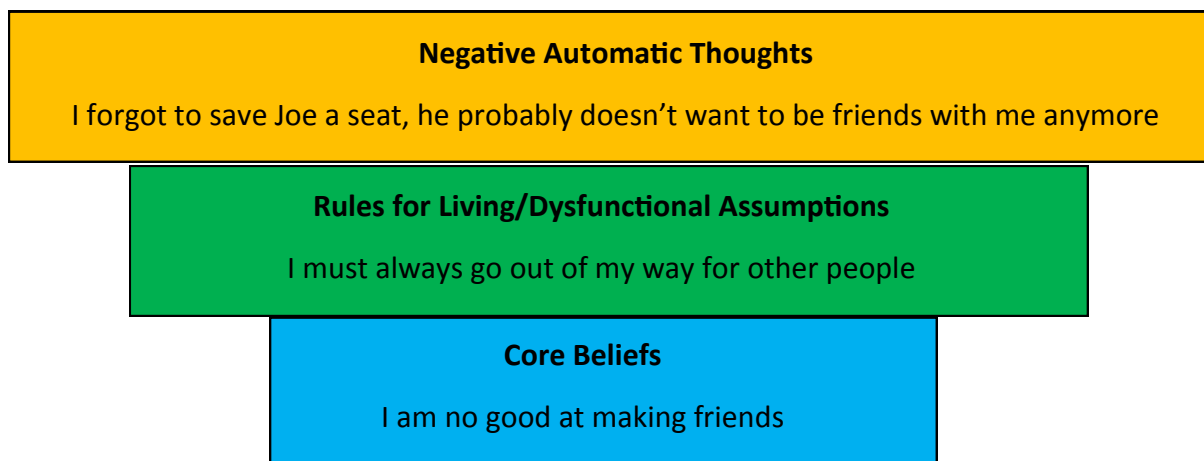
Negative Automatic Thoughts

When we are lacking self-confidence, we can often experience negative and unhelpful thoughts. The most common type of unhelpful thoughts are Negative Automatic Thoughts (NATs).

NATs are:

- **Automatic**—pop into our minds involuntarily
- **Believable**—seem real and true at the time
- **Situation-specific**—are related to your current situation
- **Distorted**—are not necessarily accurate, are based on how we feel at the time

NATs usually stem from other types of thoughts/beliefs which we generally have less conscious awareness of. These thoughts are known as **Core Beliefs** and **Rules for Living**.



Evidence suggests that it is best to work initially with NATs in order to break the vicious cycle at the cognitions.

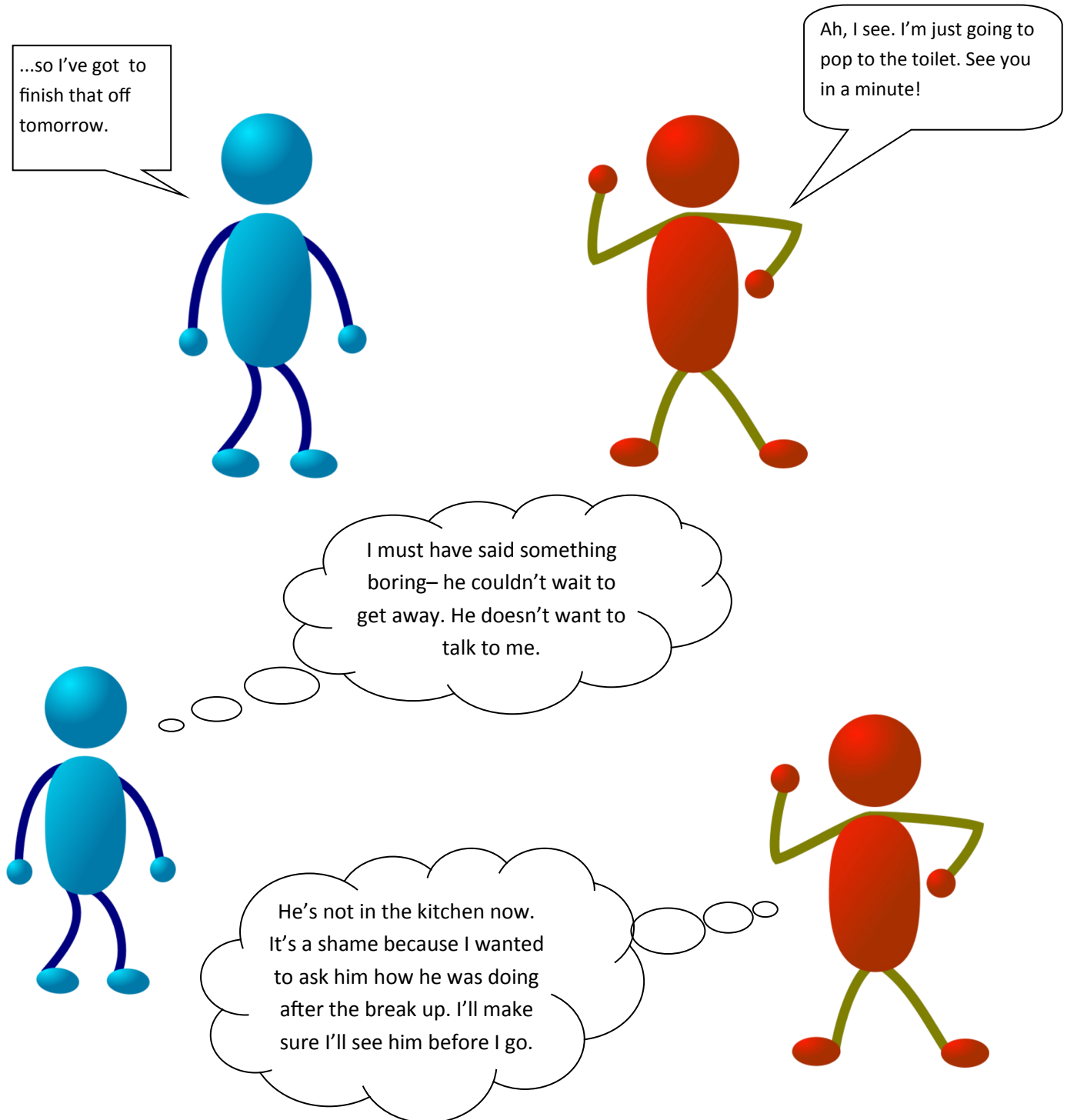
Unhelpful Thinking Styles

When we are lacking in self-confidence, we often fall into unhelpful thinking styles. See if you can identify any of your own unhelpful thinking styles in the table below.

All or nothing thinking (sometimes called 'black and white thinking') Seeing only one extreme or the other. There are no in-betweens or shades of grey. 	Jumping to conclusions Mind-reading Assuming we know what someone else is thinking. Fortune telling Predicting what's going to happen in the future. 
Over-generalising Seeing a pattern based upon a single event or being overly broad in the conclusions we draw. Tends to involve the words always, everyone, never. 	Emotional reasoning Assuming that because we feel a certain way what we think must be true. 
Magnification and minimisation Blowing things out of proportion (catastrophising), or inappropriately shrinking something to make it seem less important. 	Shoulds and musts Putting unreasonable demands or pressure on yourself or others. Using critical words which make us feel guilty or like we have failed. 
Mental filter Only paying attention to certain types of information such as noticing failures but not successes. 	Personalisation Blaming yourself or taking responsibility for something that wasn't completely your fault or blaming other people for something that was your fault. 
Disqualifying the positive Discounting the good things that have happened or that you have done. 	Labelling Assigning labels to ourselves or other people. 
Compare and despair Seeing only the good points in others compared with the bad ones in yourself. 	Memories Current situations triggering memories of past upsetting events. 

Rory's Experience of Unhelpful Thinking

Rory had a conversation with a friend from his course at a party. They were discussing an essay that's been set.



What unhelpful thinking styles was Rory using?

Cognitive Restructuring: Challenging Your Thoughts



Cognitive Restructuring is a technique that aims to change unhelpful thinking by identifying and challenging negative thoughts. This technique helps you to rebalance negative thoughts by generating factual evidence for and against them. Challenging negative thoughts can be difficult at first, but over time and with practice this will get easier.

Think back to Rory's example of unhelpful thinking. Were his thoughts based on factual evidence?

The Three Steps of Cognitive Restructuring

1

Recording your thoughts in a Thought Diary

2

Looking at evidence for and against your thoughts

3

Revising your initial thought

1

Recording Your Thoughts



Firstly, you need to identify the content of your unhelpful thoughts. Each time you notice a change in your mood or level of anxiety, complete the initial three columns of the Thought Diary sheet.

- In the first column write down a brief description of the situation you were in when the thought occurred, i.e. where you were and what you were doing.
- In the second column write down one or two emotional words to describe the feelings you had as a result of the thought, e.g. sad, anxious or angry. Also rate how intense those feelings were on a scale of 0-100%.
- In the third column write down what the thought was, i.e. the words that went through your mind or the image that occurred. Then rate how much you believe that thought to be true from 0-100%.
- For the time being, ignore the last two columns; we return to complete these in the final stage of the process. It is suggested you collect your thoughts in this way for **one or two weeks**, depending on how frequently unhelpful thoughts are occurring for you.

Rory spent a week noting down unhelpful thoughts as they arose. See below for how he recorded his thoughts.

Situation Where you were and what you were doing	Feeling Emotion experienced and rating of how bad it was (0-100%)	Thought Words that went through your mind and rating of how much you believe this thought (0-100%)	Revised Thought Words of new thought and rating of how much you believe this thought (0-100%)	Feeling Emotion experienced and rating of how strong it was (0-100%)
At a party talking to Steve. Steve left the conversation to go to the toilet	Embarrassed (40%), worried (60%)	"He doesn't want to talk to me" (70%)		

Worksheet A - Thought Diary

Situation Where you were and what you were doing	Feeling Emotion experienced and rating of how bad it was (0-100%)	Thought Words that went through your mind and rating of how much you believe this thought (0-100%)	Revised Thought Words of new thought and rating of how much you believe this thought (0-100%)	Feeling Emotion experienced and rating of how strong it is (0-100%)

2 Challenging Your Thoughts



Next you examine your thoughts in an objective way. We do this by collecting evidence for and against a thought to see whether it is accurate or not.

Start with the thought with the highest belief rating, this is known as a **hot thought**. Write the thought down in the top left corner of the Evidence Table sheet and note the percentage belief rating in the top right box.

Then, imagine that you are the judge in a court where the evidence for and against your thought is being examined. Write down the evidence for each side in the table. Remember that the evidence should be **factual** and that you need to present the full picture so that a fair decision can be made.

Next Rory chose a hot thought and considered the evidence for and against it.

Thought	% Belief
"He doesn't want to talk to me"	70%
Evidence For	Evidence Against
He left the conversation	I saw him yesterday in a lecture and we had a good conversation
He hadn't replied to a text earlier in the day	He's known for being slow at replying to texts
	He did actually go to the toilet
	He came over to say goodbye before he left the party

Generating Evidence Against Your Thoughts

It can help to imagine that you are a judge in the court house and that evidence needs to be presented for and against the thought. In court cases evidence provided needs to be **factual and concrete**, it is exactly the same for the evidence here. We want to get to the bottom of whether this thought is based on the facts or whether its based on how you feel.



It can be really difficult coming up with concrete evidence to start with, particularly against the thought as you may be in the habit of looking for evidence to **support** your negative thoughts. Below are some tips for generating evidence against.

What alternative views are there?

- If you rate the belief in your thought as 75%, what makes up the remaining 25%?
- How would a friend or someone who cares about you view this situation?
- How would I view someone else in my situation?

Does this thought fit with any of the thinking styles on page 17?

- If your thought does fit with an unhelpful thinking style, then this means you are only looking at this from one perspective. What are the other perspectives?
- For example, if you notice the thought fits into a 'catastrophising' style of thinking then write down all of the other possibilities for what happened.

What action could I take?

- Am I assuming I can do nothing to change my situation?
- Am I assuming any solutions to my problems won't work?

Are there any good reasons to be so worried?

- Have you been wrong about similar things in the past?
- Will this problem matter in a week/month/year?

Worksheet B - Evidence Table

Thought	% Belief
Evidence For	Evidence Against

3 Revising Your Initial Thought



Finally, you revise the original thought by taking all of the evidence into consideration. Try to come up with a revised thought based on **both sides** of the argument.

- Write down the new thought in the fourth column of the Thought Diary on page 21 and rate how strongly you believe this thought on a scale from 0-100%.
- In the final column re-rate your feeling using the same 0-100% scale. Notice if your emotion has changed as a result of changing your thought.

Finally Rory looked back at his initial thought and, considering all the evidence he had noted both for and against the thought, came up with an alternative thought.

Revised Thought	Feeling
What is your new more balanced thought? How much you believe this thought (0-100%)?	Re-write the emotion you had previously. State how strong the emotion is when you have your new thought (0-100%)
"Steve probably does want to talk to me, he just needed the toilet" (70%)	Worried (30%) Embarrassed (20%)

Remember, unhelpful thinking takes time to change. It may often be necessary to challenge your thoughts several times before you notice a difference in how you feel or a change in the belief rating. As you become more expert in this approach you will start to find that the process becomes more automatic and you are able to catch the thoughts and judge them as they actually happen.

You can also think about thoughts like pathways in a field; the more you have a thought the more entrenched the path becomes, until it becomes the automatic route you take. By challenging these thoughts, you are stopping yourself going down that automatic path and instead creating a new path. This might feel weird at first because you have not used this 'path' before, but the more you use it and the less you use the 'old' path, the more entrenched it will become. Eventually the new way of thinking will be the one which you automatically go down.

Noticing The Positives

When we have low self-confidence, it is common for us to fall into the unhelpful thinking style of **disqualifying the positives** (page 17). This means that we may pay less attention to the things that have gone well for us. This pattern of thinking contributes to the negative cycle of low self-confidence as this makes it harder to acknowledge positive or neutral information about ourselves. Noticing and remembering the positives is a way of breaking the cycle by re-balancing this bias in our attention.

At the end of each day, write down 5 things that happened during the day that were positive. You may find it helpful to keep these in a diary or as notes on your phone. These positives can be anything, no matter how big or small they may seem.

Ana's Five Positives

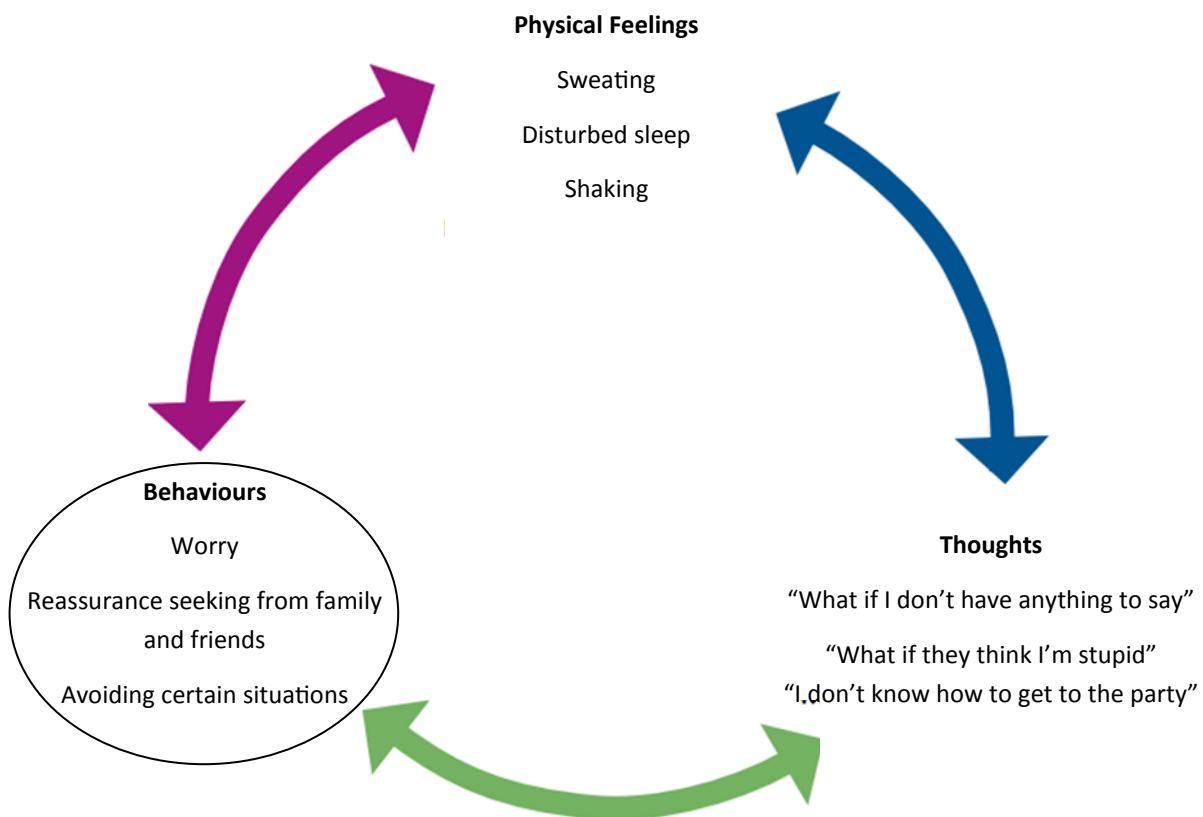
1. I walked to my lecture with my housemate
2. I had a nice conversation with my Mum on the phone this afternoon
3. I made my favourite meal spaghetti bolognese for dinner
4. I did my laundry
5. Someone let me go in front of them in the Costa queue

Dealing with Worry

Worrying from time to time is normal, however for some people it can become a problem in itself. Worrying can be identified as the process of repetitively thinking over an actual or potential problem.

Similarly to NATs, worrying thoughts tend to present as words or images, e.g. 'what if I blush?' or imagining yourself blushing during a presentation. However, worrying thoughts tend to be future-focused and based on uncertainty, i.e. something *could/may* happen. If we choose to attend to these thoughts and actively **worry** about them, they can start impact on our mood and self-confidence.

When **worrying** is identified as the problem to focus on, we want to tackle worry as a **behaviour** instead of challenging the content of the thoughts (as we would do with NATs).



Cycle adapted from Cedar Dealing with Worry

Dealing With Worry

Typically, there are two types of worries:

Practical worries - these worries have a practical solution; you can do something about it now

Hypothetical worries - these worries do not have a practical solution *right now* and tend to be future-focused

It can be tricky to classify a worry as either practical or hypothetical. It can be helpful to ask yourself **can I do anything about this now?**

The first step in dealing with worry is to keep a Worry Diary. This will help you to identify and classify your worries. It can also be useful to keep a record of your worries so you can pick up any patterns, e.g. you tend to worry more just before you're going to meet friends.

Ana's Worry Diary

Date and time	Situation Where were you, what were you doing	Emotion Rating How did you feel? How intense was this emotion (0-100%)?	Worry	Classification Was it hypothetical (H) or practical (P)?
Monday at 09:30	Walking to campus for my group presentation	Anxious 60%	What if I say something stupid?	H
Friday at 12:00	Going to the Ram for lunch with course friends	Anxious 75%	What if I have nothing to say?	H
Saturday at 10:30	Sitting on my bed on Facebook	Stressed 40%	I haven't given Ross his birthday card	P

My Worry Diary

[illegible]

Dealing with Worry



Classifying worries helps us to determine the way we manage them. There are two techniques for managing worry depending on whether the worry is hypothetical or practical.

Hypothetical Worries

A technique called Worry Time is used for hypothetical worries. Worry Time is a set period in your day dedicated to worrying about any previously gathered hypothetical worries. Worry Time allows you to:

- ♦ postpone worry so that you are able to refocus on the here-and-now
- ♦ choose how, when, where and for how long you worry
- ♦ reduce the total amount of time in your day spent worrying

Consider how long you would need for your Worry Time (we would suggest 10-30 minutes) and when you would be able to set this time aside each day (e.g. 19:30-20:00). It is essential that Worry Time is free from distractions and that you spend the time worrying only about the hypothetical worries recorded in your diary.

We would also recommend that your worry time is *at least* two hours before bedtime to allow yourself to relax and refocus before sleep.

Once you have classified your worry as hypothetical and set it for Worry Time, it is important that you then **refocus on the here-and-now**.

Understandably, this can be very difficult to do at first, but this will get easier with practice. You may find it helpful to visit page 15 for tips on how to refocus your attention.

Dealing with Worry



Practical Worries

When we feel overwhelmed, we can often find it difficult to address practical worries. Problem Solving is a structured technique used to break the worry cycle **as the worry occurs**. Problem Solving involves creating and carrying out a plan of action and consists of four steps:

1. Converting the worry into a problem

Ana's practical worry — "I haven't given Ross his birthday card"

Ana's problem—Decide whether to give Ross his birthday card

2. Identifying all potential solutions to the problem

- Post the card
- Give him the card in person
- Ask somebody else to take it
- Put the card in the bin

3. Weigh up your options and choose a solution

Ana decided to give the card to Ross in person.

4. Make a clear plan to carry it out

1. Text Ross to see when he's free
2. Put 30 minutes in my diary
3. Add a reminder in my phone
4. Walk to Ross' halls to deliver card

As with the goals, it is helpful to make sure your plan is SMART. Consider details such as when, where, who and how.

Worry Tree

This diagram demonstrates how to classify and address worries.

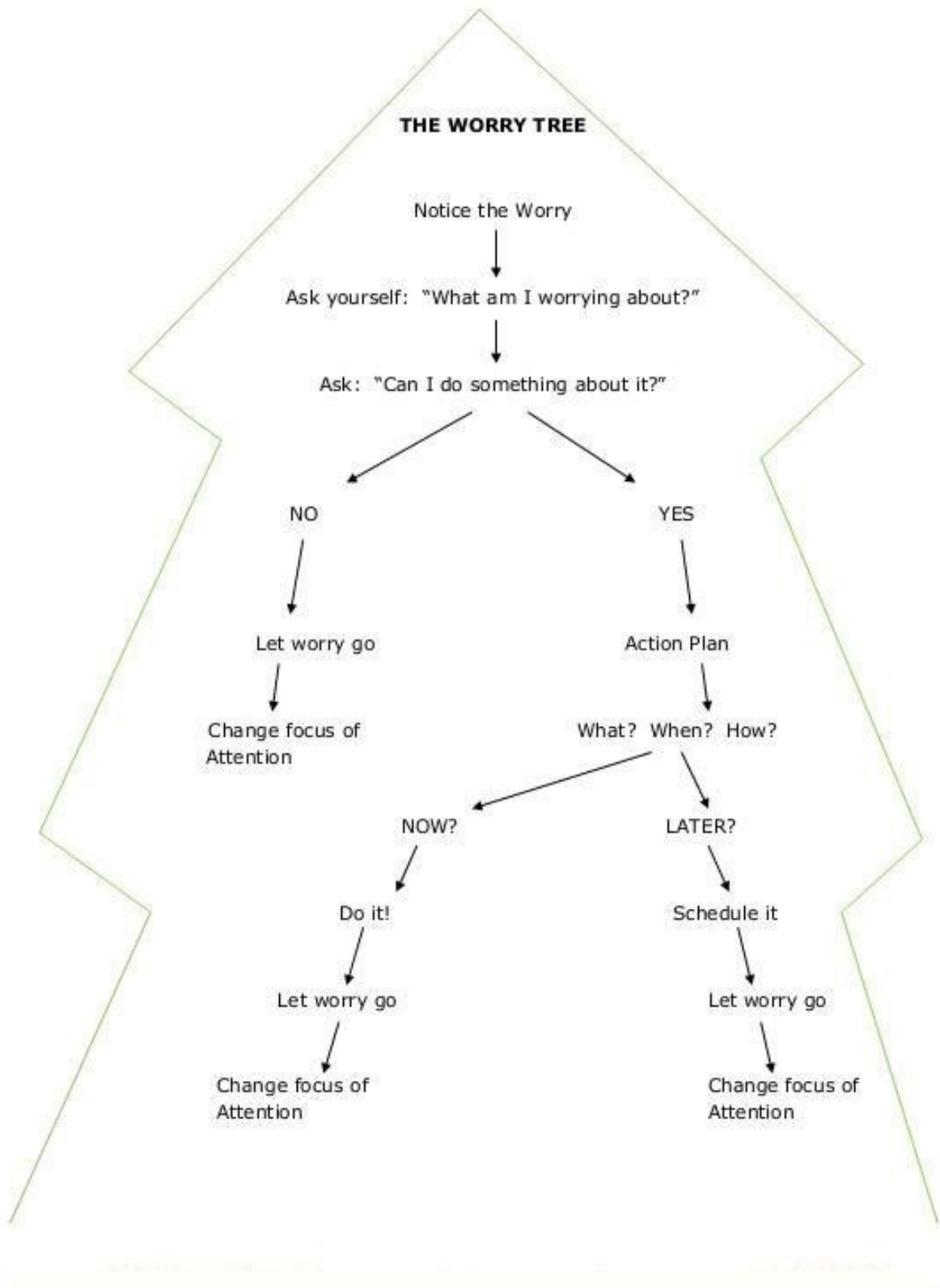


Image adapted from Worry Tree by getselfhelp.co.uk

Negative Predictions

When we don't feel confident, it is common for us to make negative predictions about what's going to happen in the future. Predicting the worst tends to lead us to engage in unhelpful behaviours such as avoidance and safety behaviours.

It is normal for us to want to avoid the outcome of our negative predictions, therefore we may avoid situations all together or use particular behaviours which we believe will prevent this from happening. For example, if we predict that at a social event we will have nothing interesting to say, we may pretend to be using our phone to detract attention from ourselves. This type of behaviour is known as a **safety behaviour**.

Avoidance and safety behaviours can make us feel better in the short-term, however they contribute to maintaining the problem. This is because we do not have the opportunity to test the negative predictions and experience what would really happen in those situations.

How Do We Tackle Negative Predictions?

To tackle negative predictions we need to experience what would **actually** happen in the situations we are avoiding or using safety behaviours in. Therefore, in terms of the vicious cycle we target both the behaviours (avoidance/safety behaviours) and the cognitions (negative predictions). **Behavioural Experiments** are a systematic way of doing this.

Behavioural Experiments



A Behavioural Experiment involves selecting a prediction to test, planning how you are going to test it, carrying out the experiment, and reviewing the outcome. The emphasis is on what you have **learnt** from the experiment, regardless of the outcome.

How to Carry Out a Behavioural Experiment

- 1** Write the prediction you wish to test and rate how strongly you believe this prediction to be true (0-100%)
- 2** Write an alternative prediction and rate how strongly you believe this to be true (0-100%)
- 3** Design the experiment – What will you do to test the prediction? Where? When? For how long? With whom?
- 4** Consider any safety behaviours that you would need to stop or reduce
- 5** Consider any potential problems with carrying out the experiment and how you could overcome them
- 6** Record what happened—what did you actually do and how did you feel?
- 7** Note what you learnt and re-rate your belief in the original prediction (0-100%)

Rory's Behavioural Experiment

Step 1: Negative thought or belief to be tested	How much do you believe this prediction? (0-100%)
<i>If I speak to someone I won't be able to hold a conversation for more than one minute</i>	80%
Step 2: What is an alternative prediction?	How much do you believe this prediction? (0-100%)
<i>I will be able to hold a conversation for more than one minute</i>	15%
Step 3: Design your experiment. What will you do to test the prediction? Where? When? For how long? With whom?	
<i>I will go into the kitchen and talk to a housemate for at least one minute. I will do this on Thursday at 7pm after I make dinner. I will do this on my own.</i>	
Step 4: What safety behaviours would you need to stop or reduce?	
<i>I will not rehearse or prepare what I'm going to say, and I will make sure that I go on my own.</i>	
Step 5: What things may get in your way? How will you overcome these?	
<i>There may not be anyone in the kitchen—if this were to happen I would try again at 8pm. The person I choose may be too busy to talk—I could try and speak to somebody else at the time or try again at 8pm.</i>	
Step 6: Record what happened when you carried out the experiment	
<i>I went to the kitchen at 7pm and spoke to Jakob. We spoke for more than 10 minutes. There were a few pauses in conversation but we talked about our dissertations and what we were having for dinner. I felt a bit nervous and self-conscious at first, but after a while I felt relaxed and really enjoyed catching up with Jakob.</i>	
Step 7: What can you learn from this? How much do you believe your original prediction?	
<i>I have learnt that I am able to hold conversations for more than one minute, and no longer believe my original prediction as strongly (30%). However, Jakob is someone I've known for 2 years and I do worry about holding conversations with people I don't know so well.</i>	

Behavioural Experiments



As you saw in Rory's Behavioural Experiment, sometimes your belief in the original prediction may reduce after just one go. However, this isn't always the case and you may need to repeat your Behavioural Experiment and change some variables. For example, Rory may want to repeat this experiment with someone he doesn't know as well as Jakob.

On some occasions the outcome of your Behavioural Experiment may support your original prediction. If this does happen, it is important to first consider some of the questions below.

Is there another explanation for what happened?

What else was happening at that time?

Are there other ways of viewing what happened?

If you have identified something that has influenced the outcome of the Behavioural Experiment, consider repeating the experiment to give a more accurate reflection of what you are testing.

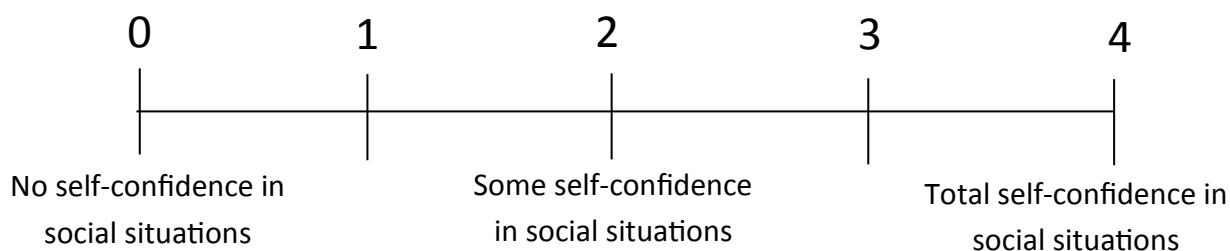
If none of these questions can be answered, this may indicate that your original prediction was supported. If this is the case, you should consider what you can learn from this experience and how you can change things in the future. You may find **Problem Solving** helpful at this point (page 31).

Behavioural Experiment Worksheet

Step 1: Negative thought or belief to be tested	How much do you believe this prediction? (0-100%)
Step 2: What is an alternative prediction?	How much do you believe this prediction? (0-100%)
Step 3: Design your experiment. What will you do to test the prediction? Where? When? For how long? With whom?	
Step 4: What safety behaviours would you need to stop or reduce?	
Step 5: What things may get in your way? How will you overcome these?	
Step 6: Record what happened when you carried out the experiment	
Step 7: What can you learn from this? How much to you believe your original prediction?	

Continuing Progress

This booklet has been looking at CBT techniques to overcome low self-confidence. If you remember, you rated your self-confidence at the beginning of the booklet. It can be helpful, once you've practiced some of these techniques, to re-rate your self-confidence levels and reflect on the progress you've made so far.



Further Tips

It's OK to...

- * Break eye contact
- * Have comfortable silences
- * Not do things which contradict your personal values or beliefs, e.g. drinking alcohol
- * Make small talk
- * Take a chance
- * Not be perfect

The types of questions we use when talking to others can play a big role in how the conversation flows. When we lack self-confidence around others, it can feel difficult for us to maintain the flow of conversation. We can use two general types of question:

- * Closed questions, e.g. "Are you enjoying university?"
Closed questions are used to elicit a single answer (such as yes or no) and can stop the flow of conversation.
- * Open questions, e.g. "How are you finding university?"
Open questions tend to lead to a fuller response which can facilitate development and flow of conversation.

Staying Well

Well done on getting to the end of this booklet! It can be helpful to look back over the techniques you have used so far and think about what has been the most helpful for you. Remember to give yourself enough time to give each technique a fair try. You may find it helpful to give yourself regular check-ins to see how you are progressing.

What have you learned?

Which techniques have worked best for you?

Have you met your original goals? Are there any further goals you'd like to set?

Are there any areas you would still like to work on?

What techniques will you use to do this?

Further Support

If you have tried all of the techniques in the booklet and are still struggling with low self-confidence around others, there are other support options available to you.

The **Depression and Anxiety Service (DAS)** in Exeter is an NHS service offering group and one-to-one support for people suffering from depression and/or anxiety. You can self-refer via their website or be referred by your GP.

Website: www.devonpartnership.nhs.uk/Depression-and-Anxiety-Service.385.0.html

Telephone: 01392 675630

The **University of Exeter Wellbeing Service** offers advice and support on managing mental health problems and keeping well at university. You can self-refer by email, phone or in person.

Website: www.exeter.ac.uk/wellbeing

Telephone: 01392 724381

Address: Reed Mews Wellbeing Centre, Streatham Drive, Streatham Campus, EX4 4QP

Your **GP** can signpost you to further support options for any wellbeing issues. If you are registered at the Student Health Centre, you are able to book an appointment on their website or by telephone.

Website: <https://www.exeterstudenthealthcentre.co.uk/>

Telephone: 01392 676606

Emergency Support Services

It is relatively common when people are feeling stressed or low to have thoughts that they would be better off dead or to hurt themselves in some way. These may just be brief passing thoughts or reflect a sense of feeling trapped, but without any intention to do anything.

On the other hand, some people find themselves thinking about death a lot, or having thoughts about ending their lives. They may have even had thoughts about how they might kill themselves or have a plan to end their life. If any of these cases are true for you, we strongly urge you to talk to someone about these thoughts.

If you are having suicidal thoughts or thoughts of hurting yourself in any way, please **contact your GP surgery** to make an urgent appointment with a doctor. In an emergency, the GPs at the **Student Health Centre** on Streatham Campus can also see students who are not registered with a GP in Exeter.

If you require out-of-hours support, please contact one of the services listed below:

- **Devon doctors** – For urgent support when your surgery is closed call 111
- **The Samaritans** – A confidential service and support for anyone in crisis - 01392 411 711 or www.samaritans.org.uk
- **Exeter Student Nightline** - A listening service run by students, available from 8pm to 8am every night during term time. You can call them on 01392 724000 or access their instant messaging service on www.exetervoice.co.uk
- **A&E**—You can also attend **A&E** for emergency support at any time

