

Empower Youth and Build Resilient Communities Through Skills That Impact Thoughts, Emotions, and Behaviors



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All case examples and sample dialogues are fictional. In the case examples, we use the pronouns they/them/ their to refer to a singular youth in order to increase the generalizability of the examples and for ease of reading.

N.B. The first author, Dr. Luana Marques, and second author, Dr. Nicole J. LeBlanc, contributed equally to this work.



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Meet the Developers of the TEB Skills



Meet the Developers of the TEB Skills

 \mathcal{How} ? This was the question that united the members of our team to develop the TEB skills. How do we get the bestquality evidence-based mental health care to everyone, everywhere? We've been tackling this question for more than ten years through our independent clinical and research projects and joint endeavors.



Luana Marques began her career at Massachusetts General Hospital in 2007 as a clinical psychologist with expertise in cognitive behavioral therapy (CBT). Her research initially focused on examining strategies to enhance CBT's impact on various mental health problems. Specifically, she sought to identify the best CBT treatment strategies for different disorders and to examine the ways these strategies could be combined and/or integrated to treat the disorders. However, what Luana found through this work was a disparity in access to mental health care. It might not matter which CBT treatment strategies were the most effective because most people didn't have access to mental health care. Period. So Luana made a pivot. She shifted her focus to answering the question, "How can we bring state-of-the-art CBT to everyone?" She decided to start by examining the barriers that prevent people from receiving evidence-based mental health treatments like CBT. And that's when she met Nicole LeBlanc.



In 2008, Nicole was completing her undergraduate degree in clinical psychology. She had just taken an abnormal psychology class and was inspired to dive into questions on how to improve CBT. She wanted to answer questions like "How does CBT work?" and "How can we improve CBT for people who don't initially respond to the treatment?" While looking for research opportunities to tackle these questions, she came across a posting to work with Luana at Massachusetts General Hospital on a study examining the barriers to mental health care for ethnic minorities. As they say, the rest is history. For more than ten years, Luana and Nicole have been collaborating on various research projects aimed at enhancing the impact of CBT. During this time, Nicole pursued a doctoral degree in clinical psychology to gain specialized training in the research tools needed to answer these questions. She earned her PhD in 2019 and jumped at the chance to return to Massachusetts General Hospital as a postdoctoral fellow to work with Luana to develop the TEB skills.

Throughout the early 2000s, Debra Kaysen had also been pushing the boundaries of what it meant to bring evidence-based mental health treatments to "everyone, everywhere." In 2010, while working as an associate professor of clinical psychology at the University of Washington, Deb received a cold call from a group at Johns Hopkins University. They wondered if Deb would be willing to travel to Northern Irag to adapt CBT to be delivered by community health-care workers helping torture survivors. Deb, who was already passionate about getting mental health treatment to individuals in areas that lack this type of care, jumped at the chance. This work fueled her passion for expanding access to effective care globally to underserved communities. By 2011, Deb was also doing research to examine strategies for training community health workers in providing CBT to female sexual-violence survivors in the Democratic Republic of Congo. Additionally, she had started work with rural Native American women to expand access within their community. On a Tuesday in 2011, she received yet another call. Luana was designing a research study to examine the best strategies for training community clinicians in CBT and needed advice from an expert on clinical training and supervision. Although Deb didn't recognize the number, she picked up the phone (times were different back then) and was so excited by Luana's project that she agreed to serve as an advisor for the study. That first phone call sparked the beginning of a long friendship between Deb

and Luana, fueled by their mutual commitment to answering the question, "How can we bring CBT to as many people as possible?" Deb is currently a professor at Stanford University and provided expert consultation on the development of the TEB skills.

In 2014, Luana founded a research center at Massachusetts General Hospital called the Community Psychiatry Program for Research in Implementation and Dissemination of Evidence-Based Treatments (Community Psychiatry PRIDE). The mission of the center is to promote research aimed at increasing access to CBT and other evidence-based mental health treatments for low-income and ethnic-minority individuals.

In the fall of 2016, Soo Jeong Youn completed her PhD in clinical psychology and applied for a postdoctoral fellowship to work with Luana at Massachusetts General Hospital. Within minutes of meeting Luana, Soo recognized their shared interest in and attraction to "how" questions: "How does CBT work?" "How can we best train and coach individuals to learn evidencebased mental health treatments as quickly and as effectively as possible?" "How can we use data to make these treatments stick?" The alignment of their mission and goals seemed too good to be true. Ultimately, a new "how" question solidified the partnership between Luana and Soo: "How can we empower people with CBT skills to change their lives?" Soo completed her postdoctoral fellowship at Community Psychiatry PRIDE in 2019 and stayed on staff as a clinical psychologist. The project to develop the TEB skills is the latest initiative in Soo and Luana's shared quest to disseminate CBT.



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The scope of projects at Community Psychiatry PRIDE grew over the years as the team took on ventures to bring CBT to a variety of different settings and communities. In 2018, Anna Bartuska joined the team as a clinical research coordinator to help manage new and ongoing projects. Anna had recently completed her undergraduate degree in neuroscience and global health and was fascinated by the question, "How can our understanding of the way the brain works help us increase access to mental health care globally?" She was thrilled by the opportunity to help develop the TEB skills and bring CBT to youth who have faced adversity. Luana, Nicole, Deb, Soo, and Anna each drew on her individual experience and expertise to inform the development of the TEB skills. This curriculum is the result of their shared commitment to create a teaching tool to bring CBT to youth who have faced adversity. We hope this curriculum will help you answer your own "how" question: "How can I use CBT to empower youth and build a more resilient community?" Let's get started!





How the TEB Skills Were Born

TEB stands for thoughts, emotions, and behaviors. Psychologists have long recognized that these three experiences are closely connected in our day-to-day lives. For example, when you woke up this morning, you probably had a thought about the upcoming day. Perhaps you thought, "I didn't sleep well last night, so I'm going to be dragging," which led to an emotion (nervousness) and a behavior (cancelling an appointment). Or maybe you thought, "I have some free time in my schedule, so I'm going to accomplish an important project," which led to an emotion (excitement) and a behavior (leaving early for work). The connection between our thoughts, emotions, and behaviors impacts our decisions, moods, and interactions with ourselves and with others. However, many of us are unaware of this process. We may experience persistent negative emotions without realizing that negative thoughts or unhealthy behaviors are to blame. Our team developed the TEB skills to help you observe the connection between your thoughts, emotions, and behaviors and learn strategies to break free of negative cycles that are impacting your life. The goal of this curriculum is to equip you with a basic knowledge of the TEB skills so that you can practice them on your own and teach these valuable skills to youth.



Cognitive Behavioral Therapy: The Origin of the TEB Skills

All of the skills you will learn in this curriculum derive from *cognitive behavioral therapy (CBT)*, a type of therapy that helps improve mental health through strategies that change cognitions (i.e., thoughts) and behaviors. Aaron T. Beck originally developed CBT in the 1960s as a treatment for adults with depression (Beck 2011, 1-16). Beck developed CBT based on his theory of why people become depressed. He believed that people



get depressed if they get stuck in a thinking pattern that is negative. Negative thoughts like "I'm worthless" or "My life will never get better" lead people to engage in unhelpful behaviors, such as skipping school or isolating. Together, these negative thoughts and behaviors lead to persistent negative emotions like sadness and hopelessness. To address this pattern, Beck developed strategies

to help people change their negative thoughts and behaviors. He designed CBT to teach people these skills so that they could recover from depression. The goal of CBT is to encourage people to practice these skills in daily life—in between sessions and beyond the end of therapy—in order to improve their mood. For example, patients learn to replace self-critical thoughts, such as "I'm worthless," with positive affirmations, such as "I'm trying my best." They also learn to "act opposite" to unhelpful behaviors, such as skipping school or isolating, by scheduling healthy activities, such as doing homework or seeing friends.

Since the 1960s, mental health professionals have developed and tested CBT for many different emotional challenges and have found it to be helpful for a wide range of problems in adults. These problems include depression, anxiety, anger, insomnia, post-traumatic stress disorder, and stress (Hofmann et al. 2012). CBT has also been adapted for the treatment of emotional difficulties in children and adolescents. Research studies show that CBT is helpful in treating mental health problems such as anxiety (Higa-McMillan et al. 2016), depression (Weersing et al. 2017), and disruptive behaviors (Fossum et al. 2016) in youth. Though the specific strategies for CBT treatments vary for different problems and populations, all CBT treatments teach skills to change unhelpful thoughts and behaviors that perpetuate negative emotions.

CBT has also been shown to help increase resilience and prevent mental illness among at-risk individuals. Studies show that CBT is effective in preventing major depressive disorder among youth with mild depression symptoms (Oud et al. 2019; Ssegonja et al. 2019). Youth learn strategies in CBT to cope with stress before that stress spirals out of control and causes depression. Once people learn skills to change their thoughts and behaviors, the positive impact of these skills continues beyond the end of treatment. Studies following youth for one year after ending CBT have shown that those who received the treatment continue to improve over time as they practice the CBT skills (Rith-Najarian et al. 2019). In fact, the benefits of CBT can last forever, as long as a person keeps using the skills.



"The benefits of CBT can last forever, as long as a person keeps using the skills."

Researchers have found that CBT also impacts the way that the brain processes emotions, which may explain why it is effective as a mental health treatment. In one study, researchers found that youth with posttraumatic stress disorder who improved following CBT showed weaker connections between the amygdala (a brain region that processes threats) and the insula (a brain region that processes the physical experience of emotions) after receiving CBT (Cisler et al. 2016). This finding suggests that CBT can help youth experience less physical distress in response to reminders of trauma, which can improve their sleep, concentration, and daily social life. In another study, researchers found that adults with social anxiety who improved following CBT showed stronger connections between the amygdala (a brain region that processes threats) and the prefrontal cortex (a brain region responsible for problem-solving and reasoning) after receiving CBT (Young et al. 2017). This finding suggests that CBT can help people learn to override their initial fear response in social situations if that response is unwarranted or unhelpful.

To summarize, more than fifty years of research on CBT has shown that it is the gold-standard therapy for emotional problems among adults and youth. The treatment works by teaching people concrete strategies to change unhelpful thoughts and behaviors that perpetuate negative emotions. Furthermore, scientists have shown that CBT strategies actually impact the way that the brain processes and regulates emotions. Given the data showing that CBT is helpful for treating emotional problems and increasing resilience in both adults and youth, our team designed this curriculum using skills derived from CBT. Specifically, this curriculum is for youth development professionals (community health workers, teachers, coaches, counselors, etc.) to use themselves and to teach to youth ages ten and older. However, we believe that everyone can benefit from practicing the skills outlined in this curriculum.

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"The treatment works by teaching people concrete strategies to change unhelpful thoughts and behaviors that perpetuate negative emotions."

The Evolution from CBT to the TEB Skills

Given that CBT is helpful for an array of problems and populations, you might be wondering, "If CBT is effective, why do we need the TEB skills? Can't we just learn CBT?" To answer, there are challenges to existing CBT treatments that need to be addressed first in order to maximize CBT's effectiveness for adults and youth. In its current form, access to CBT is extremely limited. Research indicates that each year, only 41 percent of adults and 45 percent of youth who meet diagnostic criteria for a mental disorder

receive mental health treatment (Wang et al. 2005; Costello et al. 2014). Furthermore, only 22 percent of adults and youth who receive treatment are treated by a mental health specialist (Costello et al. 2014; Wang et al. 2005). This data tells us that very few individuals have access to evidence-based mental health treatments like CBT. Instead, many individuals receive unstructured or unspecified treatments (e.g., talk therapy) from providers who lack specialized training. Another problem with existing CBT treatments is that they do not work for all individuals. For example, researchers estimate that approximately 38 percent of youth who receive CBT for anxiety still have anxiety symptoms at the end of treatment



(Silverman, Pina, and Viswesvaran 2008). Taken together, these findings suggest that there is an opportunity for CBT



to be adapted to make it more accessible and powerful for both adults and youth.

Most existing CBT treatments focus on a single problem, such as depression or anxiety. However, in the real world, people usually have more than one type of problem (a phenomenon called comorbidity). For example, a teacher might primarily suffer from anxiety about public speaking but also have days when she feels sad and lonely. CBT that is focused on public speaking anxiety might not reduce her co-occurring symptoms of depression. Or a youth might primarily struggle with urges to use alcohol but also need help managing impulsive behaviors like physical aggression. CBT that is focused on alcohol use might not address his co-occurring symptoms of conduct disorder.

As you can see, focusing on one problem at a time is like changing the oil in your car but leaving the filter dirty—it might help a little, but you're still at risk of a breakdown. Furthermore, CBT treatments that focus on a single problem are difficult to disseminate because it takes a lot of time and resources to train mental health providers on each separate treatment. To address these challenges, experts suggest adapting CBT to make it applicable across a range of different problems when they are present at the same time (Weisz et al. 2019). This goal can be achieved by distilling the common principles and skills of CBT and packaging these elements into a single treatment. Psychologists call this type of comprehensive treatment *transdiagnostic treatment*.

Experts have also suggested adapting CBT to make the structure more flexible (Weisz et al. 2019). Most existing CBT treatments follow a set sequence of sessions. The content taught in each session builds on the material from the sessions before. This structure implies successive

lessons—that is, a person cannot understand the skills taught in session four unless they have had sessions one, two, and three. However, this format does not allow for the fact that people often experience symptom fluctuation as well as unexpected life events during treatment. For example, a youth who is receiving CBT for substance use would likely feel hurt and confused if he were to experience the death of a grandparent during treatment, but in the traditional CBT model, his provider would focus on unrelated skills simply because they are next in the lesson plan. A solution to this challenge is to package CBT skills in such a way that they can be learned and used in any order. Psychologists call this type of flexible treatment *modular* treatment. Modular CBT may be more powerful than standard CBT because it helps people cope with a range of problems in real time as they arise. This type of treatment acts like a ninja warrior who is able to ward off several attackers at once, rather than just one.



"Modular CBT may be more powerful than standard CBT because it helps people cope with a range of problems in real time as they arise."

Experts believe that adapting traditional CBT to make it transdiagnostic and modular could increase CBT access and boost its effectiveness. Emerging research seems to support these hypotheses. Specifically, clinical psychologist John Weisz and colleagues developed a transdiagnostic, modular CBT treatment called FIRST, which simultaneously addresses a range of symptoms and problems in youth, including depression, anxiety, and conduct problems (Weisz et al. 2017). The treatment involves teaching youth five core CBT skills that comprise the acronym FIRST: **f**eeling calm, **i**ncreasing motivation, **r**epairing thoughts, **s**olving problems, and **t**rying the opposite. An initial test of FIRST suggests that it is more beneficial than standard CBT treatments for youth that focus on one problem at a time (Weisz et al. 2017). It is also easier to train providers in FIRST than in standard CBT (Weisz et al. 2017). We developed the TEB skills with these research findings in mind and therefore designed the TEB skills to be both transdiagnostic and modular. We also made two additional modifications to further enhance CBT's effectiveness for adults and youth.

First, we designed the TEB skills so that they can be delivered anytime, anywhere. One challenge of standard CBT is that it is typically delivered in one-on-one therapy sessions that occur once per week (Weisz et al. 2019). However, this format may not be powerful enough to address environmental factors that affect mental health, such as work or school stress, family problems, and neighborhood violence. For example, a teacher might learn helpful skills in CBT each week, but then her life partner encourages her to use unhelpful coping strategies at home. This teacher will likely struggle to improve her overall mental health because new habits are only developed with repetition and consistency. In contrast, a youth might learn helpful skills from his guidance counselor each week, and then his teachers, coaches, and parents know to remind him to use those skills in daily life. This youth will likely see rapid improvement in his mood.

As these examples illustrate, we believe that the power of CBT can be enhanced if people learn and continuously practice these skills in their day-to-day lives—at home, in school, at work, during extracurricular activities, etc. We therefore designed the TEB skills to be applied throughout the facets of entire communities. All members of a workplace, school, or community organization can learn the skills together and support one another in practicing the skills. This approach allows adults and youth to reinforce the concepts that underlie the TEB skills each day, which may lead to faster learning and longer-lasting improvements.

Our second modification to standard CBT was that we designed the TEB skills to be used as skills, not therapy. Standard CBT is typically delivered by mental health providers, such as psychologists, social workers, and licensed mental health counselors (Weisz et al. 2017). However, many adults and youth do not have access to mental health providers because treatment with a mental health provider can be costly, and there are just not enough trained professionals to meet the needs of everyone who could benefit from treatment. In addition, the stigma associated with therapy may lead to embarrassment and prevent people from seeking help from a mental health provider. To address these challenges, we designed the TEB skills so that anyone, with training, can learn and teach the skills. Professionals like you, who work on the front lines with youth, can learn and practice the skills by reading this curriculum and attending our training and coaching programs. You can then teach these skills to all youth in your work environment, whether it is a classroom, an after-school program, or the football field. We encourage you to think of these skills as universal strategies and to teach them to all youth with whom you work. By framing the TEB skills in this way, you can reduce embarrassment and stigma about learning and practicing the skills. In addition, you can provide all youth with the opportunity to improve their mental health and increase their resilience by learning these strategies.



To summarize, the TEB skills are tools and strategies that come from CBT (cognitive behavioral therapy). The skills are both transdiagnostic (they can help with multiple problems at the same time) and modular (they can be used in any order). Furthermore, the TEB skills can be taught to anyone, anywhere, including in schools, workplaces, community centers, and camps—and even on the school bus or the street corner. They are universal skills designed to improve mental health and increase resilience for entire communities.

Determining the Five TEB Skills

The final step in developing the TEB skills was to determine which specific CBT skills to include in the program and to articulate clear step-by-step instructions for each skill. We met those challenges by drawing on our prior experience teaching CBT skills to professionals and youth. In 2014, our organization, the Community Psychiatry Program for Research in Implementation and Dissemination of Evidence-Based Treatments (Community Psychiatry PRIDE) at Massachusetts General Hospital, partnered with a nonprofit organization called Roca, Inc. This organization aims to disrupt the cycle of incarceration and poverty faced by young men ages seventeen to twenty-four who are involved in the criminal justice system by offering education, employment, and life-skills programming. The goal of our partnership with Roca was to develop an intervention to meet the mental health needs of this high-risk population. To meet this goal, we designed a CBT skills program to be delivered to the young men by frontline staff, both formally (e.g., through training groups held at Roca) and informally (e.g., through interactions on the go, regardless of the setting).

The program included ten CBT skills that were chosen to address mental health problems and unhealthy behaviors in this population. Focus groups and interviews with frontline staff, leadership, and the young men demonstrated that the program was feasible, acceptable, and perceived to be helpful by the young men and the staff (Valentine et al. 2019). In addition, engagement in the program was found to be associated with improved functioning. Specifically, young men who used at least one skill that was taught in the program had a a 65 percent higher chance of obtaining a job and a 66 percent lower risk of unenrolling from programming compared to those who did not use any of the skills (Marques et al. 2020). Through this partnership, we demonstrated that CBT skills can be delivered to high-risk youth by staff with no formal training in mental health treatment and can span different situations and environments. We emerged from this partnership energized to design a streamlined CBT skills program with broad applicability to both youth and frontline staff.

After concluding our partnership with Roca, in 2019 we partnered with Charlestown High School (CHS) in Boston to explore the possibility of disseminating CBT skills to adults and youth within a school setting. CHS is an innercity high school that serves a high-risk student population. To inform the dissemination of CBT skills at CHS, we held a six-week summer internship for CHS students at our research center at Massachusetts General Hospital. During the internship, eight students were empowered to learn CBT skills, apply them in their lives, and be co-creators of a refined version of the program. To accomplish this goal, our youth community partners learned and practiced a variety of CBT skills and provided our team with feedback on their impressions of the skills, their points of confusion, and the language used to describe the skills. These youth strongly endorsed CBT skills as being a helpful tool to improve mental health, support relationships, and increase focus, as demonstrated by these quotes:

"[CBT] – it's a way for you to calm down, first of all, and then not make a decision that you're going to regret later on."

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"I was just anxious and all over the place, and now I can just give myself a second to compartmentalize my thoughts and calm down."

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"[CBT] really helps me because I'm a rowdy person and I always get into fights with people that I love, and if I basically never used it, I would lose people."

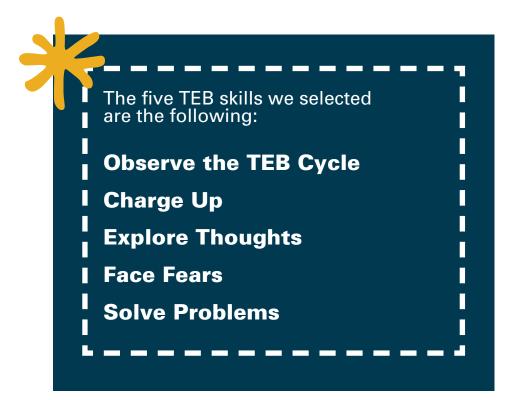
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The user-centric design with youth feedback, combined with our expert knowledge and the scientific literature on CBT, informed our selection of the five CBT skills that comprise the skills presented in this curriculum. In addition, it was through the Charlestown High School internship program that we renamed CBT skills to TEB skills. TEB stands for thoughts, emotions, and behaviors, and the acronym was selected because the youth suggested it

was easier to remember, refer to, and pronounce than CBT. The youth also began to use TEB vernacularly as a verb to describe the practice of the skills in daily life (e.g., "I am TEBbing myself"). To hear more about our youth partners' experiences and visions for the TEB skills, we invite you to watch a video at https://vimeo. com/483583312.



These five TEB skills are *evidence-based*, which means they have been shown through research to help adults and youth cope with a wide range of emotional challenges and problems. You will find information about the research supporting these skills in the sections that follow along with step-by-step instructions on how to practice the skills and teach them to youth. As you begin your journey sharing the TEB skills with youth, we encourage you to place equal emphasis on practicing the skills yourself. In our prior work bringing CBT skills to Roca, we found that the youth workers benefited tremendously from the skills as well. One Roca youth worker observed:

"To be honest, in the beginning even I didn't like it [CBT], but the more you teach it, the more you learn. It's like you always find something like, 'This applies to me,' and I can also apply this in my personal life."

Each one of us has benefited from learning and practicing the TEB skills in our own lives. We are excited to share them with you. Let's begin the journey by first diving into the science on emotions and emotion regulation.



Emotions, Emotion Regulation, and the TEB Skills

Whether you greet children boarding the bus each morning, support teens with homework in an after-school program, coordinate activities at a youth center, or are a full-time teacher or administrator, you know how rewarding working with youth is. You also know that each day brings unique and high-stakes challenges, most of which have *little* to do with academics and *a lot* to do with social and emotional issues. As a frontline worker, you might recall a time when a child exhibited concerning behaviors, such as excessive shyness, social withdrawal, or aggression. Or maybe you worked with teenagers who completely checked out, hung around a crowd that wasn't good for them, cut class, or showed disrespect toward their family. Perhaps you tried to help by encouraging a shy child to play with others or by reprimanding a teen for disrespectful behavior, which only seemed to make things worse. Such situations may leave you feeling confused and helpless. Why do youth engage in these unhelpful and destructive behaviors, and how can you support them to overcome these challenges?

A Time of "Storm and Stress"

The transition from childhood to adulthood is often described as a time of "storm and stress" (Casey et al. 2010). During this time, youth experience exciting changes as they gain independence, develop peer relationships, and experiment with different identities. However, it is also a time when emotions can run rampant. Youth are bombarded with increasingly complex challenges, such as romantic relationships, academic stress, and financial worries. Furthermore, they must cope with these challenges before a brain region called the prefrontal cortex is fully developed. This region is responsible for decisionmaking and problem-solving. As a result, many young adults find themselves overwhelmed by stress and hijacked by their emotions. They might skip school, shout at a parent, use drugs or alcohol, or isolate themselves because they don't know what else to do. It's no surprise that youth are at risk for mental health problems during this life stage. Studies show that 50 percent of people who experience a mental disorder in their lifetime will develop the disorder by age fourteen (Kessler et al. 2005). Furthermore, 50 percent of adolescents in the United States meet criteria for a mental disorder (Ries Merikangas et al. 2010). Scientists believe that youth are at risk for mental health problems, in part, because they have difficulty coping with the emotions that occur during this life stage (Casey, Jones, and Hare 2008; McLaughlin, Garrad, and Somerville 2015). This belief is worth repeating in another way. It's not necessarily the stressors that youth experience that cause them harm; rather, it's the trouble they have regulating the emotions caused by those stressors.



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Scientists believe that youth are at risk for mental health problems, in part, because they have difficulty coping with the emotions that occur during this life stage (Casey, Jones, and Hare 2008; McLaughlin, Garrad, and Somerville 2015)." *Emotion regulation* is the ability to impact the way we experience and express our emotions (Gross 1998). As adults, we use strategies to regulate our emotions on a daily basis. Emotion-regulation strategies help us to keep our cool during a traffic jam, for instance. But children are not born with emotion-regulation skills.

Anyone who has seen a two-year-old throw a tantrum knows that. Rather, children and adolescents learn these skills as they grow and gain insight into how to understand and manage their emotions (Zeman et al. 2006). Parents and other adults also help them develop these skills by modeling healthy emotion-regulation strategies. Youth who become adept at regulating their emotions get along well with others and are more likely to be accepted by their peers (Spinrad et al. 2006). However, some youth struggle to learn



emotion-regulation skills. Exposure to adverse life events, such as violence, poverty, or neglect, can negatively impact the development of these skills (McLaughlin et al. 2016; Hanson, Hariri, and Williamson 2015). Unhealthy adult modeling (or a lack of adult modeling) may also prevent youth from acquiring emotion-regulation skills. Youth who struggle to learn these skills can become overwhelmed by their emotions and engage in behaviors that have negative consequences. We see examples of this all around us: the child who gets into repeated fights on the playground, the teen who experiences rumination or loss of sleep over an argument with a friend, and the young adult who chain-smokes or vapes during finals week at university. The bottom line is that when youth lack emotionregulation skills, they are at risk for volatile emotions, risky behaviors, and the development of mental health problems (McLaughlin et al. 2011).

Childhood and adolescence are therefore critical time periods to support youth in acquiring healthy emotionregulation skills to prevent mental health problems. Studies show that youth who develop mental health problems are at higher risk for dropping out of school, using drugs and alcohol, and committing crimes (Coker et al. 2014; Conway et al. 2016; Mojtabai et al. 2015). They are also at higher risk for having thoughts about suicide and making a suicide attempt (Nock et al. 2013). Sadly, the negative effects of mental health problems in adolescence continue into adulthood. Studies show that youth with mental disorders have more problems as adults, including lower job status, more financial difficulties, more health problems, and lower life satisfaction (Crawford et al. 2008; Ormel et al. 2017). The stakes are high to help youth learn emotionregulation skills, especially youth who are disadvantaged and have faced adversity.



So what do you do? Can you even help? Is there any way to teach youth to better understand themselves, process their feelings, and work toward their goals? Can you support a child's mental health? And what about your own? The short answer is yes! You do not have to be a lifelong researcher or

medical doctor or have a degree in education to provide interventions to children who need emotional guidance and tools to help them regulate their emotions. And at the end of the (long) day, you too don't have to feel burned out, overwhelmed, and helpless. The goal of this curriculum is to help today's youth—and those who work with them—to learn healthy emotion-regulation skills so that they can weather emotional storms, bounce back from difficulties, and become more resilient in the face of life's challenges.

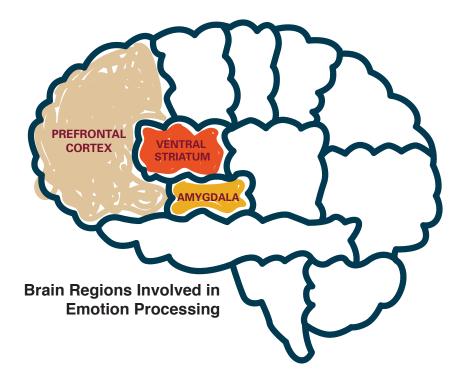
This curriculum describes a program of five emotionregulation skills called the TEB skills that can be used by anyone, anywhere. These skills are designed to be delivered to youth by frontline staff, including educators, community workers, and other youth development professionals (YDPs), to improve youths' emotionregulation abilities. And the added benefit is that learning these skills will be beneficial to you as well—the caring adults on the front lines—as you practice observing, understanding, and managing your own emotions. Nobody wants anger, fear, sadness, anxiety, or frustration to get in the way of a job they love or to disrupt a close relationship. We believe the skills in this program can improve emotion regulation for anyone who learns them.

Inside the Developing Brain

While it's impossible to read what's going on inside the minds of the youth you work with or serve (although that would be a really useful superpower at times!), scientists have a basic understanding of brain development and the impact of brain maturation on emotion processing. Understanding the intricate process by which the developing brain registers and regulates emotions will help you to more effectively implement the TEB skills with youth. We turn now (briefly, we promise!) to a crash course on the neurobiology of emotions and emotion regulation.

You may already be aware that the brain is comprised of many smaller regions. These regions communicate with one another in a system of networks. Signals within these networks are responsible for everything we do—from breathing, blinking, and digesting our food; to thinking, behaving, and reacting; to perceiving space, remembering, and moving our bodies. Since our focus is emotions, we will zero in on the brain regions and networks involved in emotion processing and emotion regulation.

Emotion processing is a complex mental action that involves multiple processes and different brain regions (Ochsner and Gross 2014, 23-42). The first stage of emotion processing is perception: the brain registers the presence of a stimulus in the environment (Ochsner and Gross 2014, 23-42). For example, cells in our eyes send signals to a brain region called the occipital lobe that



to a brain region called the temporal lobe that processes auditory information (80). Signals from these sensoryprocessing areas are then sent to brain regions responsible for recognizing and reacting to the environment. In other words, sensory-processing regions recognize that we are seeing a tall moving figure or hearing a noise, but additional parts of the brain are used when we notice that it is our friend walking on the street playing a popular rap song and we decide to wave. We will focus on two brain regions that process information about the emotional meaning of a stimulus: the amygdala and the ventral striatum.

The *amygdala*, mentioned earlier in this book, is a brain region involved in many different mental processes, and scientists are learning more about it every day. One of the functions of the amygdala is to respond when we perceive something threatening in the environment, such as when we see an angry face or hear a loud noise (Hariri 2015a, 22). Scientists believe that the amygdala evolved to serve a defensive function against anything threatening or deadly, like hungry lions, poisonous snakes, or angry people from the settlement down the road. In response to a perceived threat, the amygdala sends signals to other brain regions to activate the body's stress response (Hariri 2015a,



22-23; Chrousos and Gold 1992). This stress response, which is sometimes called the fight, flight, or freeze response, includes physical changes that we all know well: our heart beats faster, our breathing picks up, we begin sweating, and our muscles feel tight. These physical changes are all designed to keep us safe from threats like lions, snakes, and angry people—our hearts pump extra blood to our muscles so that we can run faster and fight harder, and our muscles tense so that they can spring into action at a moment's notice. These physical changes occur very quickly and automatically as soon as the amygdala detects a threat (Hariri 2015a, 22-23). This is because in life-or-death situations, waiting to devise an appropriate response can get you eaten by a lion.

Another brain region that is important for emotion processing is the *ventral striatum*. This brain region is responsible for processing rewards, which are things that make us feel good (Hariri 2015b, 114-117). When we perceive something rewarding in the environment, such as a piece of chocolate cake, signals from the ventral striatum are sent to areas of the brain responsible for movement (110-111). The result of this process is something called goal-directed behavior-we move forward, grab a fork, and take a big bite of the cake (110-111). Scientists believe that the ventral striatum also evolved to serve a survival function because it responds to things that are critical to the survival of our species, including food and sex (114-117). Over time, things that humans associated with these basic survival needs, such as money or the face of a romantic partner, began to activate the ventral striatum as well (114-117). Scientists have found that most drugs of abuse, including alcohol, cocaine, marijuana, and nicotine, also activate the ventral striatum, which explains why they are so addictive (114). Just like the amygdala, the ventral striatum responds automatically to the environment (114-117).

The amygdala and the ventral striatum are essential for our survival, but that's not the whole story. If it were, we would be running from every potential sign of danger and constantly pursuing food and money with abandon. Thank goodness that through evolution, we developed the ability to respond to the environment in a more rational way. The amygdala and the ventral striatum both send signals to another part of the brain called the *prefrontal cortex* (Hariri 2015b, 110; 2015a, 18). The prefrontal cortex is the region of the brain that is responsible for analytical processes like decision-making, planning, and problem-solving. This brain region has two important roles in emotion processing.



First, the prefrontal cortex combines signals from many different brain regions including the amygdala, the ventral striatum, the hippocampus (the brain region responsible for processing memory), and the insula (the brain region responsible for processing sensations within our bodies) to determine the emotional meaning of a stimulus (Hariri 2015a, 30-31). For example, the amygdala will react to the sound of a thunderclap and the sound of fireworks on the Fourth of July, but it is the prefrontal cortex that combines information from other brain regions to determine whether we should seek shelter or stand in awe.

The second role of the prefrontal cortex is to help us regulate the way we experience and express our emotions (Hariri 2015b, 122-123; 2015a, 30-31). Instead of just responding to signals from the amygdala and ventral striatum, the prefrontal cortex allows us to slow down this reactive process and choose a course of action that fits with our short- and long-term goals. It's the part of the brain that helps us keep our cool during a traffic jam, run an important meeting even when we're terrified of public speaking, and bypass the ice cream aisle at the supermarket. One way that the prefrontal cortex helps us to regulate our emotions is by changing the emotional significance of a stimulus (Ochsner and Gross 2014, 23-42). For example, the amygdala might initially respond to the sight of a snake in the grass, causing you to jump and your heart to pound, but the prefrontal cortex can override this message by prompting the thought, "It's just a garden snake; it can't hurt me." Another way that the prefrontal cortex helps us to regulate our emotions is by allowing us to override our instinctive behavioral response to a stimulus (23-42). For example, the prefrontal cortex can help us override the impulse to reach for a pint of ice cream or a glass of wine at the end of a long day, if we have decided those things are not good for our long-term health.

It is critical to note that the prefrontal cortex continues to mature into our twenties (Sowell et al. 2003; Sowell et al. 2001), so if you wonder why a twelve- or thirteen-year-old continues to engage in impulsive or risky activities, remember that their decision-making and problem-solving abilities are not fully developed yet. In fact, researchers believe that adolescents are at risk for mental health problems because emotion-processing brain regions (e.g., the ventral striatum and the amygdala) mature before the prefrontal cortex during this life stage (Casey, Jones, and Hare 2008; McLaughlin, Garrad, and Somerville 2015). As a result, many youth experience intense emotional responses to their environments and lack the capacity to regulate these emotions. Said another way, youth are frequently hijacked by their emotions. Youth who have been exposed to adversity may be particularly susceptible to this emotional hijack, as research shows that early life adversity, such as violence or neglect, can negatively impact the development of the prefrontal cortex (Berens, Jensen, and Nelson III 2017).

The good news is that emotion-regulation skills can be learned and mastered over time through practice, repetition, and reinforcement. In fact, the brain has the ability to drastically change over time in response to experience. This characteristic is called *brain plasticity*, and it allows individuals to develop new neural connections in order to learn new things (von Bernhardi, Eugenínvon Bernhardi, and Eugenín 2017, 1-15). Adolescence is a time of heightened brain plasticity, which means that the brain changes substantially during adolescence as youth mature and interact with the world. Heightened brain plasticity enables adolescents to learn new skills quickly (Arain et al. 2013). Skill learning results in the development and strengthening of connections between brain regions referred to as signal pathways. Repeated practice strengthens these pathways through a process known as long-term potentiation, which supports future skill application (Matsuzaki et al. 2004; Whitlock et al. 2006). Programs (like the TEB skills) that teach youth emotionregulation skills can capitalize on this period of heightened brain plasticity to improve mental health outcomes over the course of the youths' lives.

The Five TEB Skills

The *TEB skills* are five emotion-regulation skills that youth can learn to influence the way they experience and express their emotions. At the level of the brain, the TEB skills help youth engage the prefrontal cortex to overcome reactivity and impulsivity in the service of working toward their goals. The five TEB skills are:



Observe the TEB Cycle serves as the foundation for the four other skills, which makes it the most important skill. By learning to Observe the TEB Cycle, youth gain the ability to recognize their thoughts, emotions, and behaviors on a moment-to-moment basis, and they become aware of how these components interact to cause negative moods and unhealthy behaviors.

For example, eleven-year-old Gina learns that negative thoughts about school like "I'll never make friends" are leading her to feel fearful and avoid school. Sixteen-year-old Jared notices that the exhilaration he feels when drinking with his friends leads to thoughts like "I'm young; I deserve to have fun" and the tendency to skip work to drink. And ten-year-old Jesse learns that thoughts like "My mom forgot to pick me up" lead him to feel sad and to cry uncontrollably. Once youth (and their parents, teachers, coaches, and guidance counselors) understand the link between thoughts, emotions, and behaviors, they can use the other TEB skills to regulate their emotions.



For example, Gina eventually learns to manage her anxiety by using *Explore Thoughts* to reconsider her negative predictions about school. After talking the situation over with her dad, Gina begins to remind herself that it takes time to build close friendships. She changes her thoughts related to her new environment from "I'll never make friends" to "This is an opportunity to meet new people" and begins to feel more comfortable in class. She then uses *Face Fears* to slowly begin interacting with the other students. She starts by saying hello to a few people in class and works her way up to chatting with other students at lunch. By the middle of the school year, Gina is feeling content during class and even plans a sleepover with a few close friends.

Jared also makes use of the TEB skills—in his case, to drink less alcohol. Jared discovers that he has been feeling tired and depressed and that he drinks when he is feeling down. Therefore, he decides to use *Charge Up* to improve his mood. He begins lifting weights at home three times a week. Exercise helps him to feel more energized and to drink less; however, he's still succumbing to the urge to drink when he is around his friends. Jared's gym teacher helps him to use Solve Problems to overcome this challenge. By using this skill, Jared decides to join the soccer team so that he will have something to do after school that does not involve drinking. He goes straight to soccer practice after school so that he won't see his friends who drink and be tempted to drink with them. Eventually, he makes new friends on the team and develops a love for soccer.

Even ten-year-old Jesse makes use of the TEB skills to regulate his emotions. His basketball coach helps him to use *Explore Thoughts* to consider other reasons why his mom might be late to pick him up, such as a traffic jam. Jesse, his mom, and his coach also use *Solve Problems* to brainstorm ways Jesse can pass the time while he waits for his mom to arrive after practice. They decide that Jesse will practice dribbling around cones (one of his favorite activities) until his mom pulls into the parking lot.

As mentioned earlier, the TEB skills were designed to be flexible strategies that can apply to a range of different emotions and situations. Part 2 of this curriculum will provide you with clear instructions for how to use the five TEB skills and how to teach them to youth. We have dedicated a section to each skill, and these sections include step-by-step instructions, sample dialogues, teaching tips, and scientific information to help you maximize the benefits of the skills for youth. We have also created worksheets for each skill that you can use while teaching them; these worksheets can be found in the appendix.

TEB and Your Emotional Health

Supporting the social and emotional needs of at-risk youth can be challenging. Hearing stories from youth who have faced abuse and neglect may make you feel sad and hopeless. Interactions with youth who are experiencing volatile emotions and aggressive urges may make you feel exhausted or scared. Over time, exposure to these kinds of stressors can lead to burnout. Burnout occurs when chronic work stress causes emotional exhaustion, cynicism, and helplessness (Maslach, Schaufeli, and Leiter 2001). Burnout can lead to missing work, lower productivity, and negative interactions with coworkers (Maslach, Schaufeli, and Leiter 2001).



Fortunately, the TEB skills can help reduce workrelated stress and prevent burnout. First, you can use the TEB skills to cope with negative emotions that arise on the job. Research shows that these skills are effective at reducing workplace stress for teachers and other professionals (Joyce et al. 2016; von der Embse et al. 2019). Second, the TEB skills can help prevent burnout by improving your overall work environment. Most interventions for burnout help people cope with stress but fail to address the job-related factors that are actually causing the stress (Maslach, Schaufeli, and Leiter 2001). The TEB skills are different. These skills will increase your efficacy to help youth regulate their emotions so that they will engage in fewer negative behaviors like self-harm or violence. Furthermore, the TEB skills will also provide you and your coworkers with a shared set of tools to support one another. In this way, the TEB skills can help you feel happier and more effective at work.



Throughout the sections in part 2 of this curriculum, we have created a special feature called "Your Turn," which depicts a fictional youth development professional named Myra. Myra acts as a representative for all youth development professionals. Just like you, she has good days and bad days and finds herself overwhelmed by her own emotions as they relate to her daily struggles and challenges. It is our intention that as you read about how Myra practices each of the five TEB skills, you will begin to see a clearer picture of how to use each skill in your own life and receive the benefit of creating a positive TEB cycle as a result. We hope you will find the TEB skills as helpful as we have found them to be in our own lives. By taking your oxygen first, you can cause a ripple effect of emotion regulation that reaches the youth you work with and your entire organization as a whole.

A Road Map for Your TEB Skills Journey

Before we turn to part 2 of this curriculum, "Learning and Teaching the TEB Skills," which covers in more detail each of the five TEB skills and how to teach them to youth, we want to offer a general road map to learning and teaching these skills.

A Road Map for Learning the TEB Skills

Learning the TEB skills involves several steps: 1) reading this curriculum, 2) practicing the skills, 3) attending a training workshop, 4) receiving coaching, and 5) building a TEB skills community within your organization. Each step builds upon

Scan me to learn more about TEB training and coaching

the one before, allowing you to deepen your expertise as you move through the program. Below, we provide a description of what to expect from each step as you learn the TEB skills. Our team is here to support you every step of the way. For more information about our training workshops and coaching sessions, visit our website at https://www.massgeneral.org/psychiatry/education-andtraining/pride-training-institute.page.

I. *Read this curriculum*. The best way to begin learning the TEB skills is to read this curriculum. While we expect youth development professionals to turn to the skills section that is immediately relevant to their current challenges, we recommend beginning with the "Observe the TEB Cycle" section. This skill serves as the foundation for the other TEB skills, so it is important to learn it first. From our experience, individuals struggle to learn the other skills when they have not mastered Observe the TEB Cycle. After learning to Observe the TEB Cycle, the other skills can be read according to your needs and interest. Within each skills section, we provide step-by-step instructions for how to practice the skills and teach them to youth.



2. Practice the skills. To become an expert on the TEB skills, we encourage you to practice them yourself. The experience of using a TEB skill to regulate a negative emotion or to address an unhelpful behavior can be transformative and will certainly enhance your ability to teach the skills to youth. To help you practice these skills, throughout this curriculum we have included a recurring feature on self-application called "Your Turn." Studies have shown that active-learning strategies, like self-practice, are essential for learning new treatments (Beidas and Kendall 2010). In addition, research shows that practicing CBT can make your job less stressful (Joyce et al. 2016).

3. Attend a training workshop. After you read this curriculum, we encourage you to attend one of our in-person training workshops to gain further knowledge about teaching the TEB skills to youth and practicing the skills yourself. Research indicates that individuals who attend training workshops deliver new treatments more effectively than individuals who try to learn the treatments on their own (Miller et al. 2004).

4. *Receive coaching.* The TEB skills are straightforward in principle but complex in practice. You may find yourself wondering which skill to use for a specific problem or how to modify your approach if a skill is not helping. Our TEB skills coaching program will provide you with an opportunity to receive expert answers to these questions as they arise in your work with youth. It will also allow you to gain mastery of the skills as you teach them again and again with support from our team. Research indicates that individualized coaching and feedback are essential for developing lasting expertise in a new skill (Miller et al. 2004; Monson et al. 2018).

5. Build a TEB skills community within your organization. Researchers believe that mental health tools for youth are most effective if they are spread throughout a youth's environmental context (Caldwell et al. 2019). Widespread TEB skills knowledge within your organization will enable youth to get many "doses" of the skills throughout their day-to-day lives. It will also allow everyone within your organization to benefit from the skills. Finally, a TEB skills community within your organization will help you and your colleagues to support one another in learning and applying the TEB skills. Studies have shown that programs that address organizational-level barriers to training are more successful than programs that do not address these barriers (Beidas and Kendall 2010). The act of building a TEB skills community within your organization will ensure that all of your colleagues are aligned in the shared mission to practice the skills and teach them to youth. Consistency is key.

A Road Map for Teaching the TEB Skills to Youth

The general process of teaching the TEB skills to youth mirrors the process of learning the skills—it also proceeds in steps. We recommend 1) introducing the skills to youth at a time of low stress, 2) helping them to practice the skills with worksheets, and 3) guiding youth to use the skills in their day-to-day lives when they face challenges.

1. Introduce the skills at the right

time. Introduce the TEB skills to youth at a time of low stress. Research shows that stress can disrupt our ability to engage the prefrontal cortex, the region of the brain responsible for planning, reasoning, and problem-solving, which are necessary elements for learning new skills (Schwabe and Wolf 2013). Therefore, it is best to begin teaching the TEB skills to youth when they are calm and can digest the material. You can choose a format to teach the skills that fits your organization (e.g., during class, group meetings, or one-on-one meetings).



2. Practice with worksheets. The more youth practice, the more they will benefit. In this way, the TEB skills are similar to exercise. A person who goes to the gym every day will get faster and stronger relatively quickly, compared to a person who goes to the gym once a month. Encourage youth to practice the skills using the worksheets provided in the appendix. You can complete these worksheets together and also ask the youth to complete them independently. The TEB skills are most effective when youth practice them so much that they can perform the skills in their head during emotionally challenging situations. It takes repetition to learn the skills well, so we urge you to practice them with the youth as often as possible. The worksheets in the appendix are a great tool to do so.

3. Support youth under pressure. Guide youth to select and practice TEB skills in the moment when they are experiencing negative emotions and/or urges to engage in risky behaviors. For example, Observe the TEB Cycle is a great tool to help youth label negative emotions and prevent unhelpful behaviors. Youth will likely need prompting at first to use the TEB skills when they are feeling distressed. The goal is for youth to get enough practice with the skills in emotionally challenging situations that they can eventually use them without coaching or support.





Observe the TEB Cycle

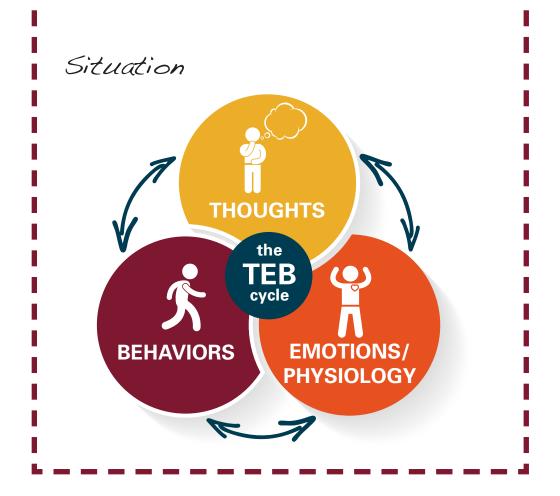
THOUGHTS EMOTIONS BEHAVIORS



Observe the TEB Cycle

TEB stands for thoughts, emotions, and behaviors. These three experiences occur in response to situations in daily life. For example, the sight of a friend walking down the street might lead to the thought "I want to chat with her," which triggers happiness (an emotion) and then walking over and saying hello (a behavior). In this way, our thoughts, emotions, and behaviors form a cycle, as each experience influences the other. From the example above, we see that a positive thought about a friend leads to a positive emotion and the behavior of walking over to socialize. However, if the sight of your friend leads to the negative thought "She probably doesn't want to talk to me," you might feel sad (an emotion) and walk by with your head down (a behavior). As you can see, thoughts, emotions, and behaviors constantly interact. The interaction between our thoughts, emotions, and behaviors is called the TEB cycle. The first TEB skill, Observe the TEB Cycle, involves identifying thoughts, emotions, and behaviors and noticing how they interact with one another.





Youth can learn to Observe the TEB Cycle as it unfolds in daily life by pausing to assess their thoughts, feelings, and behaviors. This skill teaches youth to observe their emotions without reacting to them. Over time, youth will learn that their emotions are often accompanied by physical sensations and urges, which can be quite uncomfortable. Sadness may be accompanied by fatigue and the urge to isolate, whereas anger may be accompanied by muscle tension and the urge to fight. Some youth can become so overwhelmed by these sensations and urges that they act in ways that lead to negative consequences. For example, a youth who is overwhelmed by sadness might skip school, and a youth who is intensely angry might start a fight with a friend. However, youth can interrupt this process when they practice the Observe the TEB Cycle skill. The act of labeling emotions reduces the intensity of emotions (Brooks et al. 2017). As a result, youth can use this skill to lower their emotional temperature and respond more effectively in the moment, instead of engaging in impulsive or unhealthy behaviors.

Another benefit of learning to Observe the TEB Cycle is that it helps youth understand patterns that get them stuck spinning in repeated negative emotions and unhealthy behaviors in their lives. For example, a youth might observe that homework usually triggers thoughts like "I'm stupid," followed by sadness (an emotion) and an urge to play video games (a behavior). Another youth might observe that meeting new people usually leads to anxiety (an emotion), thoughts like "They will notice I'm nervous," and an urge to run away (a behavior). When youth experience the same kinds of TEB cycles again and again, it's as if they are on a negative emotional carousel and can't get off. Round and round they go, stuck spinning in a negative TEB cycle. Once youth understand the patterns that keep them stuck spinning, they can use the other TEB skills to work toward positive change and get unstuck.



How to Observe the TEB Cycle: A Three-Step Approach

Before we can fix a problem, we need to understand it. This is why Observe the TEB Cycle is the foundation for all of the other TEB skills. It helps youth understand the patterns that keep them stuck spinning in negative TEB cycles that lead to overwhelming emotions and unhealthy behaviors. For this reason, it is important to learn and teach this skill first before moving on to the other four skills.

You can also turn to this skill if a youth is distressed or in crisis. The act of identifying and labeling emotions engages a part of the brain called the prefrontal cortex. The prefrontal cortex, as you may remember, is responsible for planning, reasoning, and problem-solving, and it is the part of the brain that we use to regulate our emotions. In fact, a review of studies found that the act of naming emotions is associated with reduced activation in the amygdala, a brain region responsible for processing threats (Brooks et al. 2017). Consequently, the act of labeling emotions, as described in step 2 below, can reduce the intensity of emotions at the level of the brain. If a youth is experiencing a strong emotion and you are unsure of how to help, always start by prompting them to Observe the TEB Cycle.

You can use the Observe the TEB Cycle worksheet in the appendix to walk through these steps with a youth or to practice them yourself.

Step 1: Anchor on a situation. Ask the youth to identify and describe the specific situation that is causing them distress. For example, a youth who struggles with anxiety might anchor on a recent episode of anxiety in class, like being called on and getting the answer wrong. A youth who struggles with anger might anchor on a recent time they got into a fight with a friend.

Step 2: Identify your thoughts, emotions, and

behaviors. Next, ask the youth to identify their thoughts, emotions, and behaviors in response to the situation they have named. Because thoughts, emotions, and behaviors interact in a cycle, the youth can observe the cycle in any order.

Thoughts. Thoughts are words or images that pop into our minds about a situation. They are interpretations about what is happening or predictions about what could happen. Ask the youth to identify their thoughts. What were they telling themselves as the situation unfolded? For instance, the student with anxiety might have thought, "Everyone thinks I'm stupid" after being called on and getting the answer wrong.

Emotions. Ask the youth to name their emotion in the situation. What were they feeling in their heart? Try to help the youth name a specific emotion instead of just "good" or "bad." For instance, the student who was

called on and got the answer wrong might describe her emotion as embarrassment. Emotions are accompanied by physical sensations and range in intensity from mild to extreme, so ask the youth to describe their physical sensations and the intensity of their emotion as well.

- Physical sensations. Ask the youth to describe the physical sensations that accompanied their emotion. What were they feeling in their body? If a youth is struggling to identify a specific emotion, physical sensations can provide clues. For example, a racing heart might indicate fear, while crying might indicate sadness. Use table 1 ("Sample TEB Cycles for Common Emotions") on the next page to help youth use physical cues to identify an emotion.
- **Intensity.** Ask the youth to rate the intensity of their • emotion from zero (not intense) to one hundred (very intense). With younger children, you can use a picture of a thermometer to ask them to rate their emotional temperature. Intensity ratings are helpful because they allow youth to observe the fact that emotions vary in strength. For instance, anger can range from mild annoyance to extreme agitation. Intensity ratings also allow youth to observe whether the TEB skills are helping them regulate their emotions. They can literally measure their progress. For example, the student who raised her hand in class and got the answer wrong might rate her embarrassment as an eighty. However, after practicing other TEB skills for several weeks, she might rate her embarrassment as a thirty, even though she got another answer wrong in front of the class.

Behaviors. Ask the youth what they did in the situation. The student who felt embarrassed because she thought, "Everyone thinks I'm stupid" might say she put her head down on her desk until class ended. Be on the lookout for avoidance behaviors, which are behaviors that the youth uses to reduce fear or anxiety in the moment. We will learn more about avoidance behaviors when we discuss the TEB skill Face Fears.



Table 1. Sample TEB Cycles for Common Emotions

Emotion	Physical Sensations	Example Thought	Example Behavior
Fear	Heart racing, breathing fast, sweating	"I'm in danger"	Run away (an avoidance behavior)
Sadness	Tired, empty, lump in throat, crying	"Nothing ever works out"	Sleep
Anger	Hot, breathing fast, tense muscles, gritted teeth, clenched fists	"He hurt me on purpose"	Yell
Joy	Energetic	"l'm a good friend"	Hang out with friends
Shame	Feeling small, tense, pit in stomach	"Everyone will reject me"	Hide
Guilt	Hot, jittery, tense	"I hurt her feelings"	Apologize
Pride	Standing tall, smiling	"l'm capable"	Work hard



Step 3: Observe the "spinning" cycle. Talk with the youth about the connection between their thoughts, feelings, and behaviors. Observe how a negative thought about a situation (e.g., "Everyone thinks I'm stupid") leads to a specific emotion (embarrassment) or how a negative behavior (e.g., not participating) leads the youth to additional negative thoughts about themselves (e.g., "I'm a failure"). Over time, help the youth notice patterns in their TEB cycles. Are the same kinds of thoughts, emotions, and behaviors occurring again and again? For example, does the student who thought, "Everyone thinks I'm stupid" feel embarrassed in all of her classes, and so she avoids participating? If so, she is stuck spinning in a negative TEB cycle. However, once she understands this spinning cycle, she can use other TEB skills to change it. For example, she could use Explore Thoughts to change her negative thoughts or Face Fears to reduce her avoidance behavior.

The TEB cycle can also be used to support positive patterns. For example, healthy coping behaviors (e.g., asking for help) lead to positive emotions (e.g., hope) and constructive thoughts (e.g., "I can learn this material"). Over time, these positive cycles lead to more positive cycles. Scientists call this pattern an upward spiral, and they believe that these positive TEB cycles can protect youth against mental illness (Layous, Chancellor, and Lyubomirksy 2014). Specifically, scientists believe that positive TEB cycles promote the types of thoughts (e.g., optimistic) and behaviors (e.g., exercise, social interaction) that elevate mood and help youth cope with adversity. Be sure to discuss both negative and positive TEB cycles with youth so that they understand that the cycle spins in both directions.



"Be sure to discuss both negative and positive TEB cycles with youth so that they understand that the cycle spins in both directions."



TEB Skills in Action: JAMES

Eighteen-year-old James is completing a job-training program at a local community organization. He lives with his parents and two younger brothers, and they are a closeknit family. Over the summer, James's cousin was killed in a gang-related shooting. James never talks about his cousin's death, but he often complains of feeling stressed and tired.

One day, James asks a youth development professional (YDP) at the organization for help with his résumé. While reviewing James's résumé, the YDP notices James often fidgets and checks his phone. He seems distracted and wipes his brow and sighs in distress. The YDP decides to help him use Observe the TEB Cycle.

Sample Dialogue: A YDP Observes the TEB Cycle with James

YDP:	You seem stressed, James.
James:	Yeah, it sucks.
YDP:	Can I tell you about something called the TEB cycle to help us both understand why you're feeling stressed?
James:	l know why l'm stressed. My brother won't text me back.
YDP:	<i>Okay, so that's the situation—your brother won't text you back—and it's making you feel stressed.</i>
James:	Yeah, I guess.
YDP:	And what does that feel like in your body?
James:	My chest hurts, and my head is pounding.

YDP:	Anything else?
James:	My hands are sweaty.
YDP:	What emotion would you call it?
James:	Scared.
YDP:	How intense is the fear on a scale of zero to one hundred?
James:	l don't know forty? No, fifty. I'd say fifty.
YDP:	Okay, and what thoughts are going through your mind?
James:	"Why hasn't he texted me back?"
YDP:	You're wondering, "What's going on? Why hasn't he texted?" Do you have a guess? What is the thought that's making you feel scared?
James:	<i>"He could be hurt."</i>

Teaching Tip

Youth may state their thought as a question (e.g., "Why hasn't my brother texted me back?"). If youth state their thought as a question, ask them about the answer to that question. There is typically an implied answer that is leading to the negative emotion (e.g., He hasn't texted me back because he's hurt."). Prompt youth to rewrite their thought as a statement.



YDP:	You think he might be hurt. And what do you do when you have that thought?
James:	l text him again.
YDP:	You text him again—that's the behavior. What happens next?

James:	Well, he still hasn't texted me back, so now I'm really scared. He might be dead.
YDP:	"He might be dead"—that's another thought—and it's making you feel really scared. Do you see how your thoughts, feelings, and behaviors are all connected here? You think your brother is hurt, so you feel scared and you text him. He doesn't respond, so you feel more scared because you think he might be dead. The fear keeps getting more intense as the thoughts, feelings, and behaviors build on each other. Has this ever happened before?
James:	lt happens pretty much every day. I don't feel better until he gets home from school.
YDP:	So you're stuck spinning in the same cycle every day, and it's really stressing you out. But now that we understand your TEB cycle, I have some ideas about how to help

Teaching Tip

If a youth is distressed, ask them to Observe the TEB Cycle using the Observe the TEB Cycle worksheet (found in the appendix). This exercise helps the youth to think critically and engage the prefrontal cortex, which is essential for effective emotion regulation.



TEB Skills in Action: SIERRA

Fifteen-year-old Sierra is a sophomore in high school. She is naturally bright; however, she is at risk for failing several classes this year due to frequent absences from school. On the days she is at school, she seems tired and lacks focus. Sierra runs track and holds the school record in the two-hundred-meter dash. She wants to get a scholarship to run track in college, but she needs to improve her grades in order to reach this goal. She feels stressed because no matter how hard she tries, she can't seem to focus in school or get her work done.

A youth development professional (YDP) at Sierra's school wants to help her feel less hopeless. She discusses positive TEB cycles with Sierra to help her see that when she works hard, she is able to progress toward her goals.

Sample Dialogue: A YDP Observes the TEB Cycle with Sierra

YDP:	l heard that you had a great track meet yesterday.
Sierra:	Yeah, I broke my own record in the two- hundred-meter dash.
YDP:	Congratulations! How did that make you feel?
Sierra:	Good, I guess.

Teaching Tip

Youth might initially label an emotion as good or bad. However, it is important to help them identify a specific emotion. Questions about associated thoughts and physical sensations can help.



YDP:	What was the best part about breaking the record?
Sierra:	<i>My coaches could see that I've been working hard.</i>
YDP:	So you had the thought, "My coaches know that I've been working hard." How did that make you feel?
Sierra:	Happy proud
YDP:	What did the pride feel like in your body?
Sierra:	l smiled; l held my head up high.
YDP:	And now what will you do?
Sierra:	I want to break the record again!
YDP:	How will you do that?
Sierra:	l'm going to work harder; l'm going to do extra sprints at the end of practice.
YDP:	This is such a good example of a positive
	TEB cycle. You worked hard to achieve a goal, and you felt proud when you reached it. The pride makes you want to work hard toward another goal. Could this apply to any other area of your life?
Sierra:	goal, and you felt proud when you reached it. The pride makes you want to work hard toward another goal. Could this apply to
Sierra: YDP:	goal, and you felt proud when you reached it. The pride makes you want to work hard toward another goal. Could this apply to any other area of your life?
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YDP: Sierra:	 goal, and you felt proud when you reached it. The pride makes you want to work hard toward another goal. Could this apply to any other area of your life? Like what? Like the test you have next week. Do you have a goal in mind? I need to pass the test, but I can't study. When you sit down to study, what
YDP: Sierra: YDP:	 goal, and you felt proud when you reached it. The pride makes you want to work hard toward another goal. Could this apply to any other area of your life? Like what? Like the test you have next week. Do you have a goal in mind? I need to pass the test, but I can't study. When you sit down to study, what thoughts go through your mind?
YDP: Sierra: YDP: Sierra:	 goal, and you felt proud when you reached it. The pride makes you want to work hard toward another goal. Could this apply to any other area of your life? Like what? Like the test you have next week. Do you have a goal in mind? I need to pass the test, but I can't study. When you sit down to study, what thoughts go through your mind? "I can't do this I'm going to fail."

Sierra:	Sad.
YDP:	What does the sadness feel like in your body?
Sierra:	l feel tired and heavy.
YDP:	How intense is the sadness from zero to one hundred?
Sierra:	One hundred.
YDP:	I'm sorry to hear that. It sounds like you have been feeling really sad and hopeless while studying. When you feel that way, what do you do?
Sierra:	l cry l stare at my textbook.
YDP:	And that probably makes it hard to prepare for your test.
Sierra:	Yeah, it's basically pointless.
YDP:	Does this same pattern happen with other situations at school?
Sierra:	Yeah whenever I sit down to study or do homework, I get overwhelmed.



YDP: It sounds like you're stuck spinning in a negative TEB cycle.

Sierra: What does that mean?

YDP: Let's compare your TEB cycles when you're running track and when you're doing schoolwork. When you run track, you have positive thoughts like "I'm working hard; I can achieve my goals," which lead to pride and doing extra sprints after practice. But when you study for your test or do homework, you have negative thoughts like "I can't do this; I'm going to fail," which make you feel sad and distract you from learning. You're stuck spinning in a negative TEB cycle because these same thoughts, emotions, and behaviors are happening over and over again when you try to do schoolwork. They're preventing you from reaching your goal of improving your grades. What we need to do is practice some skills to help make your TEB cycle while studying look more like your TEB cycle while running track. Does that make sense?

Sierra: Yes, I think so.



Myra is a youth development professional who teaches math at a local high school. She loves her job and has always found great meaning in empowering youth to reach their potential. However, Myra notices she's been arriving home feeling stressed and irritable and has been snapping at her husband. Every day she promises herself she will not snap at him when she gets home, and every day she ends up arguing with him about something. She feels frustrated with herself and confused about how to change the pattern. Today, when she gets home from work, she uses the Observe the TEB Cycle worksheet (found in the appendix) to observe her TEB cycle.

To get started, Myra writes down the situation she is currently experiencing: I'm sitting at the kitchen table thinking about a student who dropped out of school. My husband is asking me what I want to do this weekend. Next, Myra asks herself what she's feeling in this situation. She notices that she's feeling quite angry, a sixty out of one hundred, and that she has a headache and her shoulders are tense. Myra turns her attention to her thoughts: He doesn't care about my work. He doesn't care about the youth I work with. As Myra reflects on her emotions and thoughts, she recognizes that they are related to the behavior that has been causing fights with her husband: Snap at him. Tell him to leave me alone because I am tired.

Now that Myra understands that her irritable behavior was caused by her thoughts and emotions, she can use other TEB skills to regulate her anger and change the outcome. For example, she can use Explore Thoughts to reconsider her negative automatic thought that her husband doesn't care about her work. She can also use Solve Problems to come up with a plan to help her relax on the way home from work, so she won't feel so tense when she walks in the door.

Charge Up THOUGHUS ENOTIONS BEHALORS



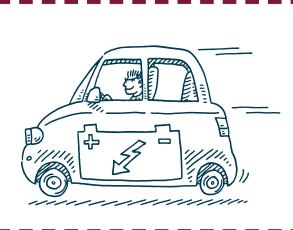
Charge Up

Sir Isaac Newton's first law of motion states that an object at rest will stay at rest unless something gives it a push. It turns out that people are the same. Stressors like bullying, academic pressure, family fights, or food insecurity can overwhelm youth to the point that they completely shut down and disengage. When this happens, they become stuck in a negative TEB cycle of sadness and inertia. Negative thoughts like "Nothing will ever get better" lead to feelings of sadness and frustration and leave youth with little motivation to *do* anything to stop the spinning cycle. They might know that healthy behaviors like doing their homework or exercising could help, but negative thoughts and emotions keep getting in the way. We've all had thoughts like "There's no point" and know firsthand how detrimental these thoughts can be.

Youth might turn to unhealthy self-soothing or escape behaviors like isolating or using drugs and alcohol because they don't know what else to do or don't feel like doing anything else. These behaviors tend to make youth feel worse and keep the negative TEB cycle spinning. Youth may become so stuck that they feel hopeless or have suicidal thoughts.

Charge Up is a skill youth can use to break this negative TEB cycle. It works by capitalizing on Newton's first law of





motion—we help youth overcome sadness, hopelessness, and inertia by giving them a little push to get moving again. Specifically, Charge Up works by supporting youth as they practice small, manageable activities that help them build energy. Think about a time when your car battery died. After jump-starting the car, you probably had to drive around for

a while in order to recharge the battery. Charge Up works in the same way. Youth learn to use action to create more energy and motivation. The skill of Charge Up helps youth to *do* something different to improve their lives, even when they *think* change is impossible and *feel* hopeless. The skill involves purposefully scheduling, completing, and tracking activities that, over time, lead to positive thoughts and emotions. Youth choose small activities that are doable even when they are feeling down. Small successes in these activities, over time, lead to positive thoughts (e.g., "I'm capable," "I'm respected," "I'm smart," etc.) and more motivation.

Charge Up is based on a skill from cognitive behavioral therapy called *behavioral activation*. Behavioral activation is often used as one component of cognitive behavioral therapy (Beck 2011, 256-276), and it is also effective as a stand-alone treatment for youth and adults with depression (Cuijpers, van Straten, and Warmerdam 2007; Tindall et al. 2017). Research studies show that behavioral activation also helps with many symptoms and problems beyond depression. For example, behavioral activation reduces anxiety symptoms in youth and improves their quality of life (Tindall et al. 2017). Among adults, behavioral activation is helpful for treating problematic substance use (Daughters et al. 2018) and improving wellbeing (Mazzucchelli, Kane, and Rees 2010).

Scientists believe that behavioral activation works by changing the way the brain processes rewards. Research shows that depression may be associated with reduced activation in a brain region called the ventral striatum, which you may remember is responsible for processing rewarding stimuli such as food, money, music, humor, and other enjoyable things. Specifically, some studies show that people with depression have less activation in the ventral striatum when they think about and receive rewards (Keren et al. 2018). Reduced activation in this brain region may explain why people with depression lose interest and pleasure in their activities and why they struggle to engage in goal-directed behavior (Hariri 2015b, 128-129). Fortunately, behavioral activation appears to overcome this problem. After practicing behavioral activation, people with depression show more activation in the ventral striatum when they think about rewards (Dichter et al. 2009). In this way, behavioral activation may increase a person's motivation to engage in activities and pursue goals.



The key to Charge Up is for youth to schedule and complete activities even when they don't *think* it will help or don't *feel* like doing anything. Even the smallest activity can build energy and turn the cycle in a positive direction. In fact, the times when youth don't feel like doing anything are often the most important moments to get out and do something positive! You can capitalize on your relationship with youth to support and encourage them to practice this skill, especially when they are feeling down and hopeless.



How to Charge Up: A Three-Step Approach

You can use the Charge Up worksheet in the appendix to walk through these steps with a youth or to practice them yourself.



Step 1: What to do. Work with the youth to choose an activity that will help them build energy. You can reference table 2 ("Example Activities That Build Energy") on the next page for ideas. However, you do not need to choose an activity from the table; you and the youth know best which activities might help them build energy. Just make sure that you choose an activity that is doable, measurable, and repeatable.

Doable. Doable means that the youth is confident they can complete the activity in the near future. "Run three miles" is not a good choice for a youth who has never run before. "Walk five minutes a day" is a better activity. Help the youth choose an activity they can succeed at.

Measurable. Measurable means that the youth can collect data to determine if they completed the activity. "Talk to friends" is not a good choice because it is too vague. "Text



two friends a day" is a better activity. You should be able to visualize exactly what the youth will be doing. Help the youth choose an activity that is specific.

Repeatable. Repeatable means that the youth can repeat the activity several times a week. "Get a haircut" is not the best choice because it only happens occasionally. "Take a shower three times this week" might be a better choice. Help the youth choose an activity they can do again and again to create a positive TEB cycle.



Table 2. Example Activities That Build Energy*

Relationship Activities	Education Activities	Employment Activities	Leisure Activities	Health Activities
Text a friend	Work on five math problems	Brainstorm ten job ideas	Read for ten minutes	Shower
Visit a grandparent	Stay after school for extra help	Job search for five minutes	Attend lacrosse practice	Put on clean clothes
Give a friend a compliment	Answer one question in class	Work on résumé for ten minutes	Practice piano for five minutes	Eat a healthy breakfast
Join a pickup basketball game with neighbors	Read science textbook for fifteen minutes	Study for job exam for ten minutes	Volunteer at an animal shelter	Walk for ten minutes
Eat dinner with a parent	Write one page of English essay	Practice mock job interview	Attend religious services	Clean bedroom for five minutes

(Note: These are examples. You should choose an activity that is tailored to the individual)



Step 2: How to do it. Work with the youth to make a plan for when they will do their chosen activity. You can use the Charge Up worksheet in the appendix to help them schedule the activity. Ask the youth to track their progress by placing a check mark on the schedule every time they complete the activity.

Schedule activities. The youth should plan to complete the activity several times a week (and every day if possible). Use the schedule on the Charge Up worksheet to create a specific plan for when the youth will complete the activity. Encourage the youth to stick to the plan, even if they don't feel like doing the activity, by reminding them that the only way to build energy is through action.

Track progress. Each day, the youth should keep track of whether or not they did their chosen activity. Ask the youth to track their progress on the Charge Up worksheet by placing a check mark on the schedule every time they complete the activity. To increase the likelihood they will stick to the schedule, tell the youth that you will review the worksheet with them next week.



Step 3: Why to do it. The next week, review the Charge Up worksheet with the youth. Praise the youth for any small activity they accomplished. Initially, you are using your relationship with the youth to keep them motivated. However, once the youth has built momentum and feels more hopeful, help them choose and schedule more-challenging activities that are related to their long-term goals.

Leverage your relationship. Initially, use your relationship with the youth to keep them motivated to practice their activities. Review the Charge Up worksheet with the youth each week to keep them accountable. Be their cheerleader! Praise any small activities that they accomplished. Help the youth problem-solve anything that got in the way of completing activities. Perhaps they chose an activity that was too difficult—help them make it easier. Or perhaps the youth lacked the materials to complete their activity—help them figure out a way to obtain those materials. Work with them to make a new schedule for the next week.

Connect activities to goals. Once the youth is regularly practicing their activities and beginning to feel more hopeful, talk with the youth about their goals. Goals are things that we care about or want to have happen. For example, a youth might have a goal of finishing high school or becoming a chef. Help the youth choose and schedule Charge Up activities related to this goal. The process of connecting activities to goals will help youth stay motivated to practice Charge Up without your continued support and encouragement.



TEB Skills in Action: TAMARA

Thirteen-year-old Tamara is a student in the eighth grade. Her teachers are worried about her because she has become more and more withdrawn over the course of the school year. She has stopped doing her schoolwork and sometimes falls asleep in class. One of her teachers called Tamara's mother to share these concerns, but her mother said that Tamara was "just being lazy" and would "snap out of it." Tamara's teachers decide to refer her to a youth development professional (YDP) in the guidance office for support.

Tamara arrives late for her meeting with the YDP. She sits down and says that she feels tired and needs a nap. The YDP decides to use Charge Up to help Tamara build some energy.

Sample Dialogue: A YDP Introduces Charge Up to Tamara

YDP:	l'm sorry you've been feeling so tired lately. It sounds like it's been hard to stay awake in class and to get your work done.
Tamara:	l guess. I just don't really care anymore.
YDP:	You're feeling drained, and it's hard to care.
Tamara:	Yeah. I know I need to get better grades, but I can't focus. I'm tired of trying.
YDP:	You're feeling tired and stuck. It happens to all of us sometimes. And when we get stuck, it feels like nothing will ever improve. We just want to give up.
Tamara:	Yeah, exactly.

YDP:	What we need to do is to help you recharge your batteries. Do you know the best way to do that?
Tamara:	Take a nap.
YDP:	Good guess, but it's actually the opposite. The best way to help you get reenergized is to get you moving again.
Tamara:	What does that mean?
YDP:	Your teachers told me that you started to feel really down and tired this school year. If we think back to the last school year, are there some things you were doing then that you aren't doing now?

Teaching Tip

Asking youth about activities that they used to do but have stopped doing is a good way to brainstorm activities for Charge Up.



Tamara:	l used to walk my neighbor's dog. I haven't done that in a while.
YDP:	Is that something you used to enjoy?
Tamara:	Yes, I loved it. The dog is a golden retriever, and she is so cute.
YDP:	And is walking your neighbor's dog something you could start doing again?
Tamara:	Yes, I think so. I could try to do it one day after school this week.
YDP:	Great! But actually, what I would like you to do is to come up with a schedule for

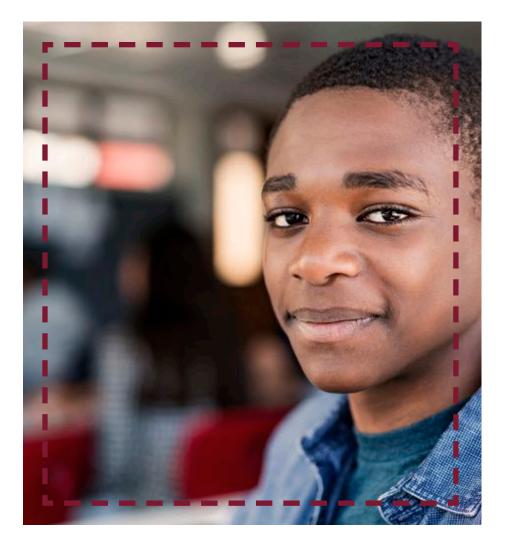
exactly when you'll walk the dog. [YDP takes out the Charge Up worksheet.] What time do you get home from school each day? Tamara: Three o'clock. YDP: Would you want to walk the dog as soon as you got home? Tamara: Sure. YDP: Okay, and how much time would a walk take? Tamara: It depends on how far I go. YDP: Yes, that's true. Let's imagine that you're feeling really tired. How far of a walk could you take even if you were feeling really tired? Tamara: Probably just once around my block. It would take ten minutes. YDP: *Could you do that every day?* Tamara: Yes, I think so. YDP: Great. I'll put that on the schedule. So, the plan is to walk your neighbor's dog once around the block from three to three-ten every day after school. Some days you might feel really tired and want to skip the walk, but I want you to try to do it anyway. Remember that we're using this activity to help you recharge your batteries. Make a check mark on the schedule every day that you walk the dog. How does that sound? Tamara: Okay I guess. I don't see how it will help. YDP: You might not feel better right away, but the goal is just to get moving again. I'll check in with you next week to ask how it went.

Tamara: Okay.

TEB Skills in Action: JACKSON

Ten-year-old Jackson is attending a summer program at the local Boys & Girls Club. His counselors observe that he is often irritable and refuses to participate in group activities. When they prompt him to join in the activities, he says that he doesn't feel like it or that the activities are boring. His counselors are worried because the other campers have started to avoid Jackson.

Jackson's primary counselor decides to use Charge Up to help Jackson build energy and connect with his interest in music. He introduces Charge Up to Jackson, and Jackson agrees to practice the drums for twenty minutes during "free time" at camp each afternoon. The next week, this youth development professional (YDP) reviews the Charge Up worksheet with Jackson.



Sample Dialogue: A YDP Reviews the Charge Up Worksheet with Jackson

YDP:	How are you today?
Jackson:	Fine.
YDP:	Last week you said that you were feeling down. Do you feel any better this week?
Jackson:	Not really.
YDP:	I know we talked about using Charge Up to improve your mood. You were planning to play the drums for twenty minutes during free time. How did that go?
Jackson:	l didn't do it.
YDP:	What got in the way?
Jackson:	l didn't feel like doing it. It won't help.
YDP:	<i>True it's possible that playing the drums won't help, but it's also possible that it might make you feel better.</i>
Jackson:	l doubt it.
YDP:	It sounds like you're feeling stuck. You're pretty sure playing the drums won't help, but you also want to do something to feel better.



Avoid lecturing youth on why they need to practice TEB skills. Instead, gently remind them of their personal reasons for wanting to use the skills. Only they can decide if the potential payoff is worth the time and effort it takes to practice.



Jackson:	Yeah.
YDP:	Are there any activities you think might help?
Jackson:	l don't know.
YDP:	It seems like the only way to know for sure if an activity will help is to test it out. We could start with a small activity that would be doable even if you were feeling down or tired. Maybe playing the drums for twenty minutes was too big of an activity. You said you're hoping to join the school band this fall. What would be a smaller, easier activity related to this goal?
Jackson:	I could play the drums for a shorter time.
YDP:	For how long? One minute?
Jackson:	No, I could do at least five minutes.
YDP:	That's a great idea. When could you schedule that this week?
Jackson:	l don't know.
YDP:	It seems like you did not feel comfortable practicing during free time. It can be hard to practice with other people around. Could you stay after camp ends to practice for five minutes each day?
Jackson:	Yeah, that would be easier.
YDP:	Great! Let's put that on the worksheet. I'll check in with you every day after camp to ask how it went. Sound okay?
Jackson:	l guess so.



Myra is a teacher who notices that she has been feeling very tired and has lost interest in her hobbies and friends outside of work. When she gets home each night, she has little energy to do anything besides eat snack foods and watch TV. She knows that she should do something to manage her stress level, so she decides to try Charge Up.

First, Myra thinks about healthy activities that would help her recharge her batteries. She could go for a five-mile run or make a sandwich and a salad for dinner. Myra remembers that the activity has to be something that she can actually do; she has to have a way to determine that she actually completed it; and it has to be something she can do several times. Going for a fivemile run, which she hasn't done in two years, is definitely not doable. Therefore, she decides to make a sandwich and a salad for dinner each night after work. To know whether she has successfully completed the activity, she decides that she has to make both a sandwich and a salad for dinner four out of the five evenings this week. After deciding on the activity, Myra makes a plan to help herself actually do it. She develops a menu of sandwich and salad combinations for the five evenings this week, starting with ingredients that she has at home and scheduling a grocery trip midweek to buy additional vegetables and other sandwich fillings. To track her progress, Myra uses the Charge Up worksheet to check off when she has completed the activity. She praises herself when she makes the sandwich and salad for dinner each night, and she reminds herself that this activity is also in line with her long-term goal of eating a more balanced diet with fruits and vegetables.

Explore Thoughts

THOUGHTS EMOTIONS BEHAVIORS



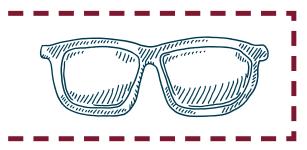
Explore Thoughts

We've all heard of or read The Little Engine That Could story, which celebrates the determination of the meek engine as it accepts the challenge to pull a long train over a steep mountain. In the story, the little engine's only defense against what the much-bigger engines considered to be an insurmountable task is the motto "I think I can." The repetition of this motto ultimately helps the little engine to succeed and overcome the hurdle, teaching children and adults of all ages the power of our thoughts. We are here to tell you that there is truth in this children's story and that our thoughts can make the difference between resilience and despair. Recall from the "Observe the TEB Cycle" section that positive thoughts like "I'm capable" or "My friends like me" lead to positive emotions and healthy behaviors like hard work and socializing. In contrast, frequent negative thoughts about ourselves, others, the world, or the future can keep us stuck spinning in negative TEB cycles.

Explore Thoughts is a skill that involves teaching people to rethink their negative thoughts (e.g., "I think *I can't*") in daily life. Youth who have experienced difficult



things (e.g., bullying, neighborhood violence, academic struggles, poverty) may have learned to view the world



through negative lenses. These negative lenses lead them to have frequent negative thoughts in response to situations in their lives. For example, a youth who gets a poor grade might say to himself, "I'm stupid," and a youth who makes a mistake at work might

predict, "I will be fired." These negative thoughts occur quickly and automatically. In fact, they happen so fast that they are called *negative automatic thoughts*. And because these thoughts are automatic, youth typically accept them without stopping to question whether they are accurate or helpful. Explore Thoughts is a skill that helps youth to slow down their thinking and notice negative automatic thoughts as they happen. The result is that youth stop automatically accepting these thoughts and begin to question them.

Explore Thoughts also teaches youth to generate alternative thoughts that are more accurate and helpful in daily life. It gives youth practice in viewing the world through clearer lenses. For instance, the youth who thinks "I'm stupid" after getting a poor grade will learn to consider the evidence for and against this belief. He might note that science is a particularly difficult subject for him but that he is getting passing grades in his other classes. This evidence could lead him to the alternative thought, "I'm generally a good student, but science is hard for me. This means I need to study extra for my next science test." Or the youth who predicted "I'll be fired" after making a mistake at work might consider that her coworkers have made mistakes at work, and not one of them has ever been fired for a single mistake. This reasoning could help her generate the alternative thought, "It's very unlikely that I'll be fired."

Notice that Explore Thoughts is not simply about looking on the bright side or thinking positively. Thoughts like "I'm brilliant" in response to a failing grade are not helpful because they can interfere with proactive coping skills like studying. And thoughts like "I definitely won't be fired" are not accurate because we can never know the future for sure. Instead, the goal of Explore Thoughts is to help youth generate alternative thoughts that are more in line with the facts so that they can respond more effectively to life's challenges.

Explore Thoughts is a core skill taught in CBT (Beck 2011, 167-186). People receiving CBT learn to systematically identify their negative automatic thoughts, critically examine these thoughts, and generate moreaccurate and helpful alternative thoughts. Research shows that this skill is helpful for mental health. Youth and adults who are adept at this skill have fewer symptoms of anxiety, depression, and post-traumatic stress (Schäfer et al. 2017; Kazantzis et al. 2018).

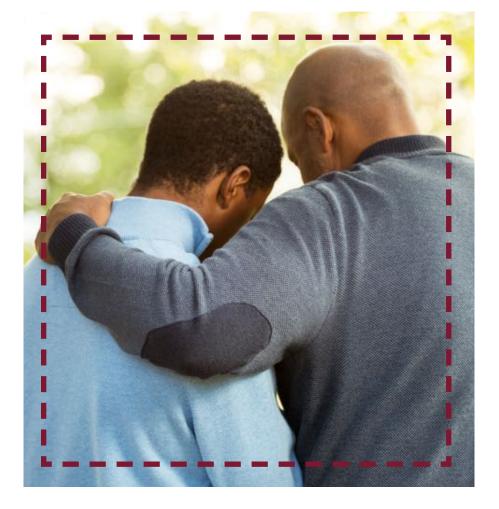


The benefits of Explore Thoughts can also be seen at the level of the brain. Brain-imaging studies show that when people change negative thinking patterns, they engage the prefrontal cortex, a part of the brain responsible for decision-making, planning, and problem-solving (Buhle et al. 2014). At the same time, the amygdala, a region of the brain responsible for processing threats, becomes less active (Buhle et al. 2014). These findings suggest that the act of rethinking negative thoughts helps the prefrontal cortex regulate activity in the amygdala. Over time, this ability may increase resilience, just like it did for the little engine in the story. Among youth who have been exposed to adversity, the ability to reduce amygdala activity by changing negative thoughts predicts reduced risk for anxiety and depression over time (Rodman et al. 2019).

The key to success in the Explore Thoughts skill is to practice, practice, practice until this new way of thinking becomes automatic. Aaron T. Beck, the developer of CBT, posited that negative early learning experiences lead people to interpret the world in a very rigid way that is overly negative (Beck 2011, 29-46). For example, as a child, Chloe was criticized often by her parents. Now, when she encounters challenges, she always has thoughts like "I can't do anything right" and "I'm stupid." Shiva, a teenage boy, was exposed to frequent neighborhood violence as a child. Now, when he leaves the house, he always has thoughts like "I'm going to be attacked" and "I can't protect myself." These kinds of thoughts lead Chloe and Shiva to feel frequent negative emotions that interfere with their ability to function. In other words, through their experiences, they have become accustomed to viewing the world through negative lenses.

Fortunately, the brain is *plastic*, which means that it has the ability to change over time in response to new experiences. Practice with Explore Thoughts can help these youth to develop something called *cognitive* flexibility. Instead of defaulting to the most negative interpretation in every situation, Chloe and Shiva can learn to generate more-helpful alternative thoughts. By practicing Explore Thoughts, Chloe learns to tell herself, "No one is perfect, but I'm trying my best." Shiva learns to say, "My neighborhood is dangerous, but I'm taking reasonable steps to protect myself, like only walking around in the daytime." In this way, practice with Explore Thoughts helps youth to overcome rigid thought patterns and learn to view the world through different lenses. Research suggests that this ability to think flexibly leads to increased resilience (Genet and Siemer 2011).

It takes a lot of work to slow down, notice negative automatic thoughts, and generate alternative thoughts. At first, the skill Explore Thoughts may be uncomfortable for youth. They have a lot of practice with negative automatic thoughts and very little practice with new ways of thinking. It takes repeated practice of Explore Thoughts to believe a new way of thinking. Imagine two trails through a forest. One is used all the time, is clear of trees, and has dirt that is easy to walk on. This is the path of negative automatic thoughts-it is well-worn and familiar. The other path is overgrown and rocky, and it takes a lot of effort to hike through. This is the path of alternative thoughts---it is very challenging at first. However, if a hiker travels down the overgrown path enough times, that path will eventually become as smooth and easy as the first path. This is the goal of Explore Thoughts. We want youth to practice this skill so much that they can eventually generate alternative thoughts quickly and easily in their day-to-day lives.





How to Explore Thoughts: A Three-Step Approach

You can use the Explore Thoughts worksheet in the appendix to walk through these steps with a youth or to practice them yourself.



Step 1: Identify the thought. Anchor on a situation that is causing the youth distress, and ask them to identify their thoughts. What is the youth telling themselves about this situation? For example, a youth who became upset when her friends started teasing her at lunch might identify the thought "No one likes me."

Rate the belief in the thought. Ask the youth to rate how much they believe the thought on a scale from zero to one hundred. The youth who had the thought "No one likes me" might say she believes this thought at a ninety.

Link to emotions. Ask the youth how the thought made them feel. The youth who had the thought "No one likes me" might observe that this thought made her feel sad.

Step 2: Explore the thought. Encourage the youth to use the following questions to explore whether their thought is accurate and/or helpful. Not all of these questions will apply to every negative automatic thought. Work through the list of questions with the youth to see which ones apply to their specific negative automatic thought.

What is the evidence for and against this thought?

Encourage the youth to consider the evidence for and against the thought. Help them stick to the facts. Facts are things that most people would agree are true. For example, 2 + 2 = 4 is a fact. Ask the youth, "What facts

tell you that this thought is true? Are there any facts that suggest this thought is not as true as it originally seemed?" For instance, the youth who had the thought "No one likes me" might recall that one friend often tries to exclude her at lunch. However, the majority of her friends include her in most activities.

Teaching Tip

When helping youth evaluate the evidence, make sure they don't confuse feelings (i.e., emotions) with facts. Remember, facts are things we perceive in the world around us, such as rain. We all know it is raining because we all see it. If youth identify feelings as evidence to support their thoughts, gently remind them that feelings aren't facts.



Are you expecting the worst? In most situations, there are many possible outcomes. However, the youth might be assuming that the worst-possible outcome is definitely going to happen. To help the youth consider other potential outcomes, ask, "What has happened in similar situations in the past? Is there another way the situation could turn out that is different from your prediction?" For example, the youth who had the thought "No one likes me" might recall that she has been teased before but has never been excluded from her friend group.

Does the thought contain extreme language (e.g., always, forever, never, must, should, etc.)? Extreme language indicates that the youth might be engaging in all-or-nothing thinking. If so, encourage the youth to consider a more balanced perspective. Ask, "Is there a middle ground?" For example, the youth with the thought "No one likes me" might observe that this thought is extreme and therefore very unlikely to be true. Perhaps one or two other students don't like her, but she is generally liked by her friends.

Is the thought helpful? Even if the youth carefully examines the evidence, they will never be able to predict the future or read minds. Because we can't always

know if a thought is true, we also want to consider if it's helpful. Ask the youth, "How does that thought make you feel? Is it bringing you down? Is it getting in the way of your goals? Could a different thought lead to a better outcome?" For example, the youth who had the thought "No one likes me" might realize that this assumption made her miserable for the entire lunch period; therefore, the thought is not helpful.

Step 3: Generate an alternative thought. Once the youth has explored the thought, ask them to generate an alternative thought that is more accurate and/or helpful. Youth may struggle to generate an alternative thought, so it may be easier if they consider the situation from another person's perspective instead of their own. To help the youth come up with an alternative thought, ask, "What would you say to a friend in this same situation? What is another way to look at this situation that is more accurate and helpful?" For instance, the youth who had the thought "No one likes me" might generate the alternative thought "My friends tease each other all the time; it's a sign that I am a part of the group." Finally, repeat the ratings from step 1 but this time with the alternative thought in mind.

Rate the new thought. Ask the youth to rate how much they believe the new thought on a scale from zero to one hundred. The goal is for the youth to believe the new thought at a fifty or higher. For example, the youth who had the original thought "No one likes me" might say that she believes her alternative thought "My friends tease each other all the time; it's a sign that I am a part of the group" at a ninety-five. If the youth rates the new thought at less than a fifty, you may need to review the questions in step 2.

Link to emotions. Ask the youth how the new thought makes them feel. The goal is to soften the original negative emotion. For example, the youth who had the original thought "No one likes me" and was feeling sad might say that her alternative thought makes her feel calm. If the youth is still feeling a strong negative emotion, you may need to review the questions in step 2.



TEB Skills in Action: KATE

Kate is a shy eleven-year-old who attends an after-school program at a local community center. She has participated in the program for the past two years and seems to enjoy the activities and gets along well with the other children. However, last month, Kate began having daily crying episodes. Now, each day she sobs and sobs and says that she needs to call her mother to come pick her up. The program staff try to console her, but Kate will not stop crying until her mother arrives at the end of the day. Kate's mother reports that Kate is having similar struggles at home. She hates being in a separate room from her parents and follows them around the house. Kate's mother and father are beginning to get frustrated because Kate's behavior is preventing them from getting anything done around the house. They are also worried that she will start refusing to go to school.

A youth development professional (YDP) at the community center helps Kate to use the TEB skills. The YDP isn't sure what is causing Kate's crying, so she begins with Observe the TEB Cycle and asks Kate about her thoughts, feelings, and behaviors.

Sample Dialogue:

A YDP Uses Observe the TEB Cycle and Explore Thoughts with Kate

- YDP: I'm sorry you're so upset today. Can you tell me what's going on?
- Kate: I want to go home.
- YDP: Your mom isn't here yet, and that's making you upset. Can you tell me a little more? What are you thinking about that's making you upset?
- Kate: I don't know.

YDP:	Is it something to do with your mom?
Kate:	I'm scared that something happened to her.
YDP:	Like what?
Kate:	l don't know a heart attack my grandmother had a heart attack and died.
YDP:	l'm so sorry to hear about your grandmother. When did she die?
Kate:	Last month.
YDP:	Thanks for sharing that. So, it sounds like you keep thinking that your mom died, and it's making you feel really scared. Sometimes being scared causes feelings in our bodies like a stomachache or a headache. Do you have any of those?
Kate:	My stomach hurts.
YDP:	That's completely normal when we feel scared; it happens to me too. When you're scared and worried about your mom, what do you do?
Kate:	I try to find her.
YDP:	That makes sense—you try to find her to make sure she's alright. What happens if you can't find her right away, like when you're here at the program?
Kate:	I cry.
YDP:	Can I draw you a picture of what you just told me?
Kate:	Okay.
YDP:	It sounds like you're thinking about your mom dying and you feel scared, so you cry and ask for her until she arrives. The next day the same thing happens, and it's

making you really upset. I have some ideas of how to help. But first, could we show this picture to your mom when she arrives today?

Kate: Okay.

Teaching Tip

Youth find visuals helpful for learning. When discussing thoughts, emotions, and behaviors, use the Observe the TEB Cycle worksheet in the appendix. If not easily available, try diagramming the TEB cycle on a piece of paper, and draw arrows connecting the three parts of the cycle.



After discussing the situation with Kate and her mom, the YDP suggests using Explore Thoughts to help Kate with her worries.

YDP: You told me that you keep having the thought "My mom died," and it's making you feel really scared. On a scale of zero to one hundred, how much do you believe that thought?

Kate: One hundred.

- YDP: Wow, so it sounds like every day you're pretty sure that your mom died. But every day, we find out that she's okay when she arrives to pick you up. So, it's possible that when you have the thought "My mom died," it's just a worry and not actually something that has happened.
- Kate: I guess.
- YDP: When we talked with your mom yesterday, what did she tell you about her health?

Kate:	She said that she is young and healthy and that my grandmother was old and sick. She said that young and healthy people usually don't have heart attacks.
YDP:	That's right; young and healthy people don't usually have heart attacks. What else did she say?
Kate:	She said that if something ever happened to her, my dad and my aunt and uncle would take care of me.
YDP:	That's right; you have a lot of people in your family who love you and would take care of you. So, when you have the worry "My mom died," what can you say back to that worry?
Kate:	"My mom is healthy. She's probably okay."
YDP:	Good. How much do you believe that new thought on a scale of zero to one hundred?
Kate:	Ninety.
YDP:	And how does the new thought make you feel?
Kate:	l feel a little better.

The staff at the community center coach Kate to remind herself of her new thought whenever she is worried about her mom. Over time, she is able to use this strategy to calm herself down.

TEB Skills in Action: JIMMY

Fourteen-year-old Jimmy is attending a summer-school program for youth who have been involved in the juvenile justice system. Jimmy is excelling at several subjects in the program including English, history, and Spanish. However, he is having difficulty in science class. His science teacher reports that Jimmy has not turned in a completed assignment since the summer session started three weeks ago. She is concerned that he is falling farther and farther behind in class and asks one of the program tutors to help Jimmy with his assignment after school.

The youth development professional (YDP) wonders if negative automatic thoughts are preventing Jimmy from completing his assignment. Therefore, she decides to teach Jimmy Explore Thoughts before assisting him with his assignment.



Sample Dialogue: A YDP Teaches Explore Thoughts to Jimmy

YDP:	Are you having trouble with your homework?
Jimmy:	lt's too hard. I can't do it.
YDP:	Let's take a look at your TEB cycle. What's the situation?
Jimmy:	l'm working on my lab report.
YDP:	Okay, and what thoughts are you having while you're working? What are you saying to yourself?
Jimmy:	"I should be able to do this."
YDP:	How does that thought make you feel?
Jimmy:	l feel stupid.

Teaching Tip

Youth may struggle to identify their emotions and may instead identify additional thoughts. In this example, Jimmy says he *feels* stupid, but this is really a *thought* about being stupid. You can help youth clarify their emotional experiences by asking additional probing questions about how they are feeling in their bodies and hearts.



YDP:	You're thinking, "I should be able to do this." When you have that thought, what do you feel in your body?
Jimmy:	My head hurts my neck hurts.
YDP:	And what emotion do you feel in your heart?
Jimmy:	Mad.

YDP:	Who are you mad at?
Jimmy:	Myself for not being smarter.
YDP:	Okay, so you're thinking, "I should be able to do this," which makes you feel mad at yourself. But I wonder if that thought is really true or helpful. Can I show you a skill called Explore Thoughts to help us understand if this thought is true or helpful? [YDP takes out the Explore Thoughts worksheet.]
Jimmy:	[Shrugs]
YDP:	How strongly do you believe the thought "I should be able to do this report"?
Jimmy:	A lot.
YDP:	<i>If zero means you don't believe the thought at all and one hundred means you know for sure the thought is true, what number would you give this thought?</i>
Jimmy:	Ninety.
YDP:	Let's look at the evidence. Do you have any evidence to support this thought?
Jimmy:	Like what?
YDP:	Do you have any facts that say you should be able to do this report?
Jimmy:	Everyone else knows how to do it.
YDP:	<i>It seems like everyone else knows how to do this report. Is anyone else confused?</i>
Jimmy:	l don't know.
YDP:	Have you asked anyone else in your class?
Jimmy:	No. I heard one girl ask our teacher a question about it I don't know.
YDP:	It sounds like we don't have much evidence to go on. Maybe one other

person is confused about what to do, but we don't really know.

- Jimmy: True.
 - YDP: What about evidence against the thought? Do we have any evidence to say that it's okay to be confused when you're learning something new?

Jimmy: People always say that.

YDP: So most people would agree that it's okay and normal to be confused sometimes?

Jimmy: Yeah, I guess so.

YDP: What about extreme language like always, forever, never, must, should—do you see any?

Jimmy: The word "should."

YDP: Yes, the word "should" is an example of extreme language. Thoughts with extreme language are usually inaccurate because they aren't realistic. It might be more realistic to say that you wish you knew how to do this report, but the word "should" is too strong.



Jimmy:	Yeah, I wish I knew how to do it.
YDP:	Now, let's think about the worst-case scenario. Let's say you have no idea how to do this lab report. How could you deal with that?
Jimmy:	l could ask my teacher for help.
YDP:	Good idea! And last, let's think about whether this thought is helpful.
Jimmy:	What do you mean?
YDP:	When you have the thought "I should be able to do this," what does it do to your TEB cycle?
Jimmy:	I'm mad at myself, and I have a headache.
YDP:	And then what happens?
Jimmy:	l can't focus.
YDP:	It sounds like the thought is keeping you spinning.
Jimmy:	Yeah.
YDP:	Now that we've explored this thought, let's review your Explore Thoughts worksheet. What did you write down?
Jimmy:	lt's normal to be confused. I can always ask for help.
YDP:	So, when you have the thought "I should be able to do this," what could you say back to yourself? Is there another thought that would be more accurate and helpful?
Jimmy:	"I wish I could do it, but I'm confused. I can ask for help."
YDP:	l like that response. It would be easier if we always knew the answer, but not knowing and asking for help is a normal part of

life. How much do you believe this new thought on a scale of zero to one hundred?

Jimmy:	Ninety.
YDP:	Do you feel less mad?
Jimmy:	l feel okay. I feel a little better.
YDP:	Great! And you can keep this worksheet in case the old thought comes back. It might help to review what we talked about. This skill takes a lot of practice.
Jimmy:	Okay.

TEB Skills in Action: JAYDEN

Seventeen-year-old Jayden is enrolled in an alternativelearning program at the town high school for youth who have fallen behind in accumulating credits toward graduation. He joined the program this fall after transferring from another school district. His mother died of a drug overdose over the summer, and he now lives with his aunt and uncle in town.

After one month in the program, Jayden's teacher calls his aunt and uncle to report that he is failing math and to brainstorm ideas to support Jayden academically. However, the next day, Jayden arrives at school furious and begins swearing at his teacher. She decides to help him use Observe the TEB Cycle. Jayden acknowledges that he felt ashamed when his teacher called home because he is worried that his aunt and uncle wish they didn't have to be his guardians. The youth development professional (YDP) helps Jayden examine the evidence for this thought.

Sample Dialogue: A YDP Helps Jayden Evaluate the Evidence for a Thought

YDP: I called your home last night because you're failing math. It sounds like you felt ashamed and had the thought, "My aunt and uncle wish they didn't have to deal with me." Jayden: Yeah. YDP: That's a painful thought. But I wonder if it's based on feelings instead of facts? Do you have any evidence that they wish they didn't have to deal with you? Jayden: My aunt cut back on her hours at work to be home with me at night. But now they are having trouble paying all of their bills. YDP: Why did she want to be home with you at night? Javden: So that we could eat dinner as a family. YDP: So it sounds like your aunt and uncle have made sacrifices to spend more time with you. Is that really evidence that they wish they didn't have to deal with you? Jayden: No, I guess not . . . They just seem so stressed all the time. What are they stressed about? YDP: Jayden: They are always worrying about my schoolwork and whether I will graduate. YDP: Have you asked them why they're worried about your schoolwork? Jayden: Last week I told them to stop worrying and to leave me alone. My aunt said that they just want to help me succeed.

YDP:	If your aunt and uncle didn't want to deal with you, couldn't they just ignore you?
Jayden:	Yeah that would be a lot easier.
YDP:	So perhaps the fact that they are worried is evidence that they care about you?
Jayden:	[Silent]
YDP:	<i>Do we have any more evidence that they care?</i>
Jayden:	They do a lot for me. They make sure I have everything I need for school. My uncle is teaching me to build computers.
YDP:	So, when you look at all the evidence, what do you think?
Jayden:	l guess that they care about me. And they're worried about how to help me.



Myra, a math teacher at a local high school, had a terrible day at work. She learned that one of her students was arrested. She feels guilty because she knew this student was struggling academically, but she was unable to help him because he was always upset in class. Last week, when she asked him a question in class, he yelled at her and stormed out of the room. Myra thinks that if she had supported this student more, he would not have been arrested. She gets home from work and feels very sad. She has the urge to just go to bed but decides to try Explore Thoughts first, using the Explore Thoughts worksheet (found in the appendix).

Myra first anchors on the situation at hand: *thinking about my student who was arrested.* She then identifies the thought that she is having in this context: *I'm a terrible teacher*

because I didn't help him. The emotions that relate to this thought are sadness and guilt, and Myra feels that her chest is heavy and that she wants to cry. She strongly believes this thought, rating it an *eighty*. She starts to think about the evidence to support the thought that she is a terrible teacher: My student was arrested. Nothing I tried helped this student. She then asks herself whether there is evidence against the thought that she is a terrible teacher: I've helped a lot of students. Most learn something in my class. I care about my students, and that makes me a good teacher. I don't have control over what students do once they leave my class. Myra continues to work through the skill by exploring whether her thought includes extreme language: Yes, "terrible" is an extreme word. She also understands that her thought is not helpful, it leads her to feel sad and guilty, and it does not help her students. After thinking about all the answers on her worksheet, Myra generates an alternative thought: I care about my students and am able to help most of them, but sometimes there will be situations that are out of my control. She notices that she still feels *sad* but that she also feels proud of herself and the work that she does, and she rates her belief of this new alternative thought as a *ninety*.

Face Fears



Face Fears

Former United States President Franklin D. Roosevelt famously said, "The only thing we have to fear is fear itself" (Roosevelt 1933). Why is this true? Because when we are afraid of something, we tend to keep away from it, to avoid it-even at the cost of doing things we love or moving forward with our goals. For youth, avoidance can look like many things. It can be faking an illness to escape a class presentation, skipping auditions for the school play, or procrastinating on college applications. For adults, avoidance might be making an excuse to leave a crowded social event, turning down an exciting but challenging promotion, or skipping the gym for fear of exercising in front of others. In all of these examples, avoidance is any behavior that reduces fear and anxiety in the short term but keeps us from our goals in the long term. So why do we avoid when we know that it's bad for us?

When faced with fear and anxiety, avoidance is a quick response that makes us feel better fast. It is driven by biology. When we perceive a threat in the environment, a brain region called the amygdala responds to the threat by activating the fight, flight, or freeze response. This response includes physical changes like rapid heartbeat, fast breathing, and muscle tension that prepare our



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body to fight or flee. This response also includes a very powerful urge to escape from the threat. We don't stop to think and consider the options. Instead, we follow our instincts and run away. This automatic response probably evolved to keep us safe from predators and other environmental hazards. And today, it still protects us from dangerous things like speeding cars, dark alleys, and unfriendly neighborhood dogs. However, in the modern era, the fight, flight, or freeze response can be activated in stressful but objectively safe situations like a big exam, a tense meeting, or an emotional conversation with a loved one. In these situations, if we follow the urge to avoid, we can actually make things worse in the long run because we miss out on the opportunity to see that we could have handled the challenge in front of us. Furthermore, the next time we face a similar situation, fear and anxiety return in full force.

For example, imagine that a youth is feeling anxious about an upcoming test. She thinks she is going to fail and feels more and more nervous. Her hands get sweaty, and her heart beats faster. Her anxiety temperature is going up. She feels increasingly uncomfortable and thinks she can't handle the stress. Therefore, she decides to skip class and feels instantly calmer. Skipping class is an avoidance behavior. It quickly brings her anxiety temperature down. However, there is a catch. That night her teacher emails her and asks her to make up the test the next day. Suddenly, the youth feels nervous again. She feels sweaty, hot, and nauseous, and she decides to call in sick. Calling in sick is another avoidance behavior because it quickly makes her feel less nervous. Eventually, the youth feels anxious every day before school and calls in sick all the time. She is stuck in a negative TEB cycle that is fueled by avoidance.

Face Fears is a skill that youth can use to break negative TEB cycles of fear and avoidance. It works by teaching them to replace *avoidance behavior* with something called *approach behavior*. Instead of escaping from situations that cause fear and anxiety, youth learn



to move toward these situations and embrace them. But the TEB skill Face Fears is more than telling youth to "just do it." Rather, it involves teaching them a precise process to approach their fears. Specifically, youth create something called an approach ladder. An *approach ladder* is a list of approach behaviors that will move the youth closer and closer to their feared situation. The youth will then rank these behaviors from least uncomfortable to most uncomfortable. For example, a youth who is afraid of speaking in class and thus avoids doing so might create the following approach ladder: "Say hello to another student, say hello to my teacher, answer a yes/ no question, answer an open-ended question, give a class presentation with a partner, and give a class presentation alone."

The next phase of Face Fears is for the youth to choose an approach behavior from their ladder and to then begin practicing it. The youth should start with an approach behavior that is challenging but doable. We don't ask youth to start with the easiest approach behavior because we want to give them practice experiencing and coping with a moderate level of fear. Likewise, we don't ask them to start at the top of the ladder either because, chances are, they probably won't do that activity. Rather, we want to help youth gain confidence by practicing moderately challenging approach behaviors before moving on to more-difficult approach behaviors. Youth will practice their chosen approach behavior repeatedly until their discomfort naturally decreases over time. In our example of the youth who was afraid to speak in class, he might practice answering yes/no questions every day for a week before he feels comfortable enough with this approach behavior to move on to the next rung on the ladder. The ultimate goal is for youth to work their way up to the top of their approach ladder, gaining confidence with every step of the way.



Face Fears is based on a skill from CBT called *exposure therapy*, which involves asking people to systematically approach the things that are making them anxious. Imagine a person has a fear of closed spaces that is so severe that it prevents them from being able to ride in a car. This person might be suffering from a mental disorder called claustrophobia. Exposure therapy for claustrophobia might involve helping this person practice spending time in smaller and smaller vehicles first a bus, then an SUV, and finally, a compact car. In another example, imagine a person has an intense fear of making mistakes at work and avoids submitting work assignments. This person might have a mental disorder called generalized anxiety disorder. Exposure therapy for this person might involve asking the individual to submit increasingly important assignments without checking them for mistakes—first an internal memo, then an internal report, and finally, a report to be posted on the company website. Studies show that this kind of exposure therapy is an effective treatment for youth and adults with anxiety and post-traumatic stress (Higa-McMillan et al. 2016; Aderka et al. 2011; Powers et al. 2010; Foa and McLean 2016; Kazantzis et al. 2018). In fact, exposure therapy is the most frequently used skill in effective treatments for youth anxiety disorders (Higa-McMillan et al. 2016). In addition, research shows that exposure therapy increases people's confidence in their ability to complete activities and meet challenges (Breuninger, Tuschen-Caffier, and Svaldi 2019).



"Exposure therapy is the most frequently used skill in effective treatments for youth anxiety disorders (Higa-McMillan et al. 2016)."

Exposure therapy can also change the way the brain responds to frightening situations. In one study, researchers used exposure therapy to treat individuals with spider phobia (Hauner et al. 2012). Before treatment, these individuals showed heightened activity in the amygdala (a brain region that processes threats) while viewing pictures of spiders. However, after receiving exposure therapy, the same individuals showed lower activity in the amygdala while viewing pictures of spiders. They also showed increased activity in the prefrontal cortex, the part of the brain where reasoning and decisionmaking happen. These findings suggest that exposure therapy works by training the prefrontal cortex to put the brakes on threat-related brain activity in the amygdala. In this way, repeated practice with this skill actually improves emotion regulation at the level of the brain.

Youth may have tried to confront their fears in the past with limited success. They may be reluctant to try the Face Fears process because they think it won't work or expect it to be too difficult. However, it is important to remember that this skill teaches youth a specific way to overcome their fears. They learn to approach fears systematically and gradually, in a way that is challenging but doable. Said another way, youth learn to get comfortably uncomfortable by pushing themselves just outside of their comfort zone. Over time and through repeated practice, youth learn that they can handle challenges and the associated fear and anxiety.



How to Face Fears: A Five-Step Approach

You can use the Face Fears worksheet in the appendix to walk through these steps with a youth or to practice them yourself.

Step 1: Identify the avoidance behavior. Anchor on a situation that is causing the youth fear or anxiety, and ask them to identify their avoidance behavior. What is the youth doing (or not doing) to decrease their discomfort in this situation?



Step 2: Build the approach ladder. An approach ladder is a list of behaviors that will bring the youth increasingly closer to their feared situation. Each rung on the ladder represents an increasingly challenging approach behavior. The top rung of the ladder is the most challenging approach behavior—the one the youth is working toward.

Brainstorm approach behaviors. Approach behaviors are behaviors that bring the youth closer to their feared situation. Brainstorm ways the youth could approach instead of avoid this situation. Behaviors that bring the youth even a tiny step closer to the feared situation can be helpful. For example, a youth who is avoiding tests might approach this situation by watching videos of students taking tests. The youth could also talk about tests with his teacher, take practice tests at home, take quizzes, and even practice getting answers wrong on purpose. Just like activities used for Charge Up, approach behaviors should be doable, measurable, and repeatable.

- Doable. Doable means that the youth is confident they can complete the activity in the near future. For a youth who is afraid of crowds, "attend the Super Bowl" would not be a good approach behavior if this is beyond the youth's financial means. "Attend a high school basketball game" might be a better choice.
- Measurable. Measurable means that the youth can collect data to determine if they completed the behavior. For a youth who is afraid of crowds, "go to the store" would not be a good approach behavior because it is too vague. "Go to the local grocery store and walk around for fifteen minutes" is a better choice because it is specific. You should be able to visualize exactly what the youth will be doing.
- Repeatable. Repeatable means that the youth can repeat the behavior several times. For a youth who is afraid of crowds, "go to Times Square on New Year's Eve" is not the best choice because this event only happens once a year. "Take the subway at rush hour" might be a better choice because the youth could practice this behavior daily. Note that the final rung on the ladder does not need to be repeatable, as the youth may be working toward an event or situation that happens only once (e.g., taking the SATs, attending graduation, flying on an airplane).



Rate expected discomfort. After you have brainstormed a list of approach behaviors, ask the youth to rate their expected discomfort for each behavior. Using a scale from zero (no discomfort) to one hundred (the worst discomfort they've ever felt), ask the youth how uncomfortable they think they would feel while completing each behavior.

Create the approach ladder. Use the expected discomfort ratings to order the approach behaviors on the approach ladder from easiest to hardest. The behavior with the lowest expected discomfort will be at the bottom rung. The behavior with the highest expected discomfort (the feared situation) will be at the top rung. You will want to help the youth create an approach ladder with behaviors at varying levels of discomfort. If you have large gaps between discomfort ratings, try using small variations of an approach behavior to make it easier versus harder. For instance, for a youth who is afraid of crowds, approach behaviors might include standing by the door in a crowded theater, sitting in the first row of a crowded theater, sitting in the second row of a crowded theater, and sitting in the middle row of a crowded theater.



Step 3: Identify an opportunity to approach. Ask the youth to identify an approach behavior from their ladder to practice. The approach behavior should be challenging but doable, so start with something that has a discomfort rating around forty.

Step 4: Practice. Ask the youth to practice their chosen behavior multiple times. Remind the youth to stick with the behavior even if they are uncomfortable. After each practice, ask the youth to rate their peak discomfort from zero to one hundred using the discomfort thermometer.



Step 5: Keep going. Once the youth's peak discomfort for a behavior has decreased by half as rated on the discomfort thermometer, ask the youth to move to the next behavior on the ladder. Repeat steps 2, 3, and 4 as they work up the ladder. Remember to praise the youth along the way.

Teaching Tip

Because avoidance is an automatic response to fear, youth may not always be aware that they are engaging in avoidance behaviors. You can use the TEB cycle to help youth identify avoidance. First, anchor on a situation that brought on fear or anxiety. Then, help the youth explore whether they were doing anything to avoid experiencing fear in that situation. Sometimes, avoidance is obvious (e.g., refusing to give a presentation in class), but sometimes it is subtle (e.g., looking down at the floor for the entire presentation and asking another group member to do most of the speaking). The goal is for youth to use Face Fears to embrace a challenging situation and to eventually eliminate ALL avoidance behaviors in that situation. Youth will become more comfortable and confident as they learn to approach instead of avoid.



TEB Skills in Action: ETHAN

Nineteen-year-old Ethan is completing an enrichment program at a local community center that is focused on teaching business and finance skills to youth. Ethan's goal is to use the skills from the program to obtain a part-time job so that he can begin earning money to help support his family. He has had several part-time jobs in the past but quit each job after a week or two because he found them to be too stressful.

As the program comes to an end, one of the staff members checks in with Ethan about his progress toward his goal. Specifically, he asks if Ethan has had any success applying for jobs. As they discuss factors that have prevented Ethan from moving forward with this goal, the youth development professional (YDP) realizes that Ethan is stuck spinning in a negative TEB cycle fueled by fear and avoidance. Therefore, he introduces Ethan to the Face Fears skill.

Sample Dialogue: A YDP Introduces Face Fears to Ethan

Ethan:	l really want to apply for a job at this gym, but I'm worried it will be too stressful.	
YDP:	What worries you most about the job?	
Ethan:	l went in the other day to get an application, and it was really crowded and loud. I felt stressed and had to leave, just like my old job at the grocery store.	
YDP:	Let's take a look at your TEB cycle in this situation. What were you feeling in your body?	
Ethan:	l felt sweaty and shaky. My head hurt, and I felt sick to my stomach.	
YDP:	What emotion would you call it?	
Ethan:	Fear.	
YDP:	l agree. And what was going through your mind? What were you telling yourself?	
Ethan:	I need to get out of here.	
YDP:	Why?	
Ethan:	I'm going to pass out.	
YDP:	Okay, and what did you do?	



- *Ethan: I left without getting the application.*
- YDP: Is this the same thing that used to happen at the grocery store?
- Ethan: Yes, I'd feel like I was about to pass out, and then I'd leave.
 - YDP: It makes a lot of sense that you'd want to leave a place that made you feel so afraid and uncomfortable. But it sounds like you're stuck spinning here. Each time you go into a loud or crowded place, you feel fear and you leave, and it's making it hard for you to find a job.
- Ethan: Yeah.
 - YDP: I think the reason you're feeling so uncomfortable in these situations is because your body is in fight, flight, or freeze mode. Our bodies evolved to go into this mode when we face something dangerous, like a lion or a tiger. It causes our heart to beat fast and our muscles to tense up so that we can fight or run away. But sometimes our fight, flight, or freeze response goes off in situations that aren't dangerous. Could that be happening here?
- Ethan: I don't know.
 - YDP: Have you ever passed out before?
- Ethan: No.
 - YDP: So it sounds like it's very unlikely that you will pass out from stress in this situation. It sounds like your fight, flight, or freeze response could be a false alarm.
- Ethan: So how do we turn it off?
 - YDP: Good question. Let's look back at the TEB cycle. When you go into a loud and

crowded place, you feel fear and think you're going to pass out, so you leave. Does leaving help?

- Ethan: Yes, I feel better.
 - YDP: Okay, in the short run you feel better. But what happens in the long run? What happens the next time you go into a loud and crowded place?
- Ethan: I feel stressed again.
 - YDP: Yes, exactly. Each time you avoid a loud and crowded place, you're sending yourself the message that the situation was dangerous. Avoiding loud and crowded places is keeping the false alarm going. What could you do to send yourself a different message?
- *Ethan: I could go to the gym and not leave.*
 - YDP: Yes, you could approach the situation instead of avoiding it. We have a skill called Face Fears that can help you do that. Instead of starting by going to the gym, we can break it down into smaller steps that you can practice . . .

TEB Skills in Action: NISHKA

Twelve-year-old Nishka has been struggling with anxiety and depression symptoms ever since moving towns and starting at a new school. She has been working with a school guidance counselor to help her manage these symptoms. One of the biggest challenges for Nishka has been making new friends. She thinks that all of the other seventh graders have already formed friend groups and don't want additional friends in their circles. As a result, she has been avoiding interacting with the other students in her grade. Nishka's guidance counselor introduces her to Face Fears and suggests that she could use this skill to approach, rather than avoid, other students. During one of their sessions, they work on Nishka's approach ladder for talking with other students at lunch.

Sample Dialogue: A YDP Helps Nishka to Build an Approach Ladder

- YDP: I like the idea of using the Face Fears skill to talk with other students at lunch. Maybe today we can work on that together?
- Nishka: Okay.
 - YDP: Let's start by brainstorming some things you could do to approach this situation. I know you said you usually listen to music at lunch, but that probably makes it hard to talk to anyone. So one step could be to not listen to music.
- Nishka: Okay...
- YDP: How could we make that more specific?
- *Nishka:* Sit in the cafeteria for five minutes without listening to music?
 - YDP: Great! Can you think of any other steps?
- Nishka: Asking to sit with someone?
 - YDP: Great idea! Can you make it more specific?
- Nishka: Asking to sit at a table with a few other students.
 - YDP: And what could you do once you sat down?
- Nishka: Say hi and ask them how they're doing.
 - YDP: Great! Let's put those on the list as two separate steps. One step is asking to sit at

a table with a few other students. Another step is asking someone at the table how they're doing. Can you think of any other approach steps?

- Nishka: I could ask to sit at a more crowded table with my volleyball teammates. I could talk to them about the game next week.
 - YDP: Those could also be two separate steps. One step is asking to sit with your volleyball teammates. Another step is making conversation with someone at the table about the game next week.



Nishka: Okay.

- YDP: This is a good list. Now let's work on building your approach ladder. I want you to imagine yourself in each situation and rate how uncomfortable you expect you'd feel on a scale of zero to one hundred.
- Nishka: Okay [writes out discomfort ratings for each approach behavior].
 - YDP: Great! I see that you rated "ask to sit at a table with a few other students" as a forty. What do you think about starting with that step for practice? . . .

Sample Dialogue: The YDP Follows Up on Nishka's Experience with Face Fears

YDP:	Last week we talked about using Face Fears to work on approaching other students at lunch. You were planning to ask to sit at a table with a few other students. How did it go?	
Nishka:	It went well.	
YDP:	You expected to be at a forty on the discomfort thermometer; is that what happened?	
Nishka:	l was really nervous the first time; it was more like a fifty. But I decided to do it anyway.	
YDP:	Good for you! What happened when you asked to sit with the other students?	
Nishka:	They looked surprised, but then they made room for me to sit at the table.	
YDP:	And then what happened?	
Nishka:	I sat there for a few minutes and didn't say anything. It was awkward. But then another student sat down, and we started talking about our science class. The rest of the lunch period went by really quickly after that.	
YDP:	That's wonderful! Did you practice more than once last week?	
Nishka:	Yes, I sat at the same table for the rest of the week. It was easy after the first day because I knew the other students, and we had things to talk about. I had one day, though, when one of the other girls was kind of mean.	

YDP: You did a great job practicing this skill. You were nervous to ask to sit with the other students, but you challenged yourself to approach the situation instead of avoiding it. It was a little awkward at first, and you had one challenging situation. What did you learn from doing all of that?

Teaching Tip

Youth will certainly feel discomfort while practicing Face Fears, and sometimes they will encounter unexpected challenges. Help youth reflect on their ability to cope with these challenges as they arise. Youth are usually more resourceful than they think.



Nishka:	It was hard, but I learned that I could handle it. Even when someone was mean, it wasn't that terrible. And most of the days it was fine
YDP:	Are you ready to move to the next step on your approach ladder?

Nishka: Sure!



Myra notices that she has been avoiding talking about her teaching job with friends and family because it has become so stressful. She is afraid of getting upset and crying if she talks about work, and she doesn't want to make other people feel uncomfortable. If her friends or family ask her about work, she quickly changes the subject or makes an excuse to end the conversation, which in the moment brings her relief. However, she also knows that she needs social support to manage the stress of her job. She decides to use Face Fears and the Face Fears worksheet (found in the appendix) to approach talking about work with other people.

Myra first anchors on the situation that she is avoiding: talking about work with other people. To start building her approach ladder toward talking with her support system about her work, she brainstorms different behaviors she can actually do repeatedly and ways to track when she has completed them. She thinks she could *tell her mom about* something that went well at work today or about a problem at work today. She also thinks she could tell her friend Sadie about something that went well at work today or about a problem at work today. For each of these behaviors, Myra rates them based on how much discomfort she expects to feel if she were to do them: Tell mom about something that went well at work today—forty; tell mom about a problem l had at work today—eighty; tell Sadie about something that went well at work today—thirty; tell Sadie about a problem I had at work today—seventy. Using these ratings, Myra reorders the behaviors from easiest to hardest: Tell Sadie about something that went well at work today—thirty; tell mom about something that went well at work today—forty; tell Sadie about a problem I had at work today—seventy; tell mom about a problem I had at work today—eighty. Myra remembers that she should start by practicing a behavior that is challenging but doable, with a discomfort level of around forty. Given that she estimated to feel a discomfort level of forty if she were to tell her mom about something that went well at work today, Myra starts her Face Fears practice with this behavior. During their daily call in the evening, Myra tells her mom about a positive instance at work and then rates her level of discomfort using the thermometer. Myra does this every night for four consecutive nights until her discomfort level goes down by half to twenty by the fourth night. She then moves on to the next behavior on her approach ladder.

Solve Problems

THOUGHTS ENOTIONS BEHAVIORS



Solve Problems

We all experience negative emotions in response to problems. A youth might feel sad about losing a job or angry following an argument with a friend. An adult might feel hopeless about keeping up with household chores or anxious about paying the bills. Feeling upset in response to a problem is both normal and healthy. In fact, negative emotions help alert us to the presence of problems that need to be solved. However, some youth doubt their ability to cope with problems. Just like when their fear overwhelms them, when faced with seemingly tough challenges, youth might *think* they lack the skills or resources to solve problems, and so they avoid them. They might engage in behaviors like procrastination, isolation, or substance use to escape from problems and the associated negative emotions. However, these behaviors actually maintain or exacerbate problems (and sometimes create new ones!). They also reinforce the idea that the youth cannot cope with problems.

Solve Problems is a skill that teaches youth a series of steps to proactively cope with problems. It helps them to think creatively and flexibly about different ways to



address challenges in their lives. The steps of the Solve Problems skill are to identify the problem, generate solutions, evaluate the solutions, choose a solution, implement an action plan, and evaluate the outcome. This step-by-step approach helps to make problem-solving manageable so that youth are less likely to become overwhelmed by negative emotions and to engage in avoidance behaviors. Over time, success with Solve Problems can change a youth's TEB cycle in response to a challenge. Instead of thoughts like "I'm powerless; there's nothing I can do" and feelings of helplessness, youth learn (through experience) to instead think thoughts like "I've dealt with hard things before; I can do this" and to feel hopeful. A person's belief that they can cope with challenges is called *self-efficacy*. By practicing Solve Problems, youth develop self-efficacy and become empowered to make positive changes in their lives.



Problem-solving is a core skill in CBT (Beck 2011, 256-276), and studies show it is also effective as a stand-alone treatment for depression in youth and adults (Eskin, Ertekin, and Demir 2008; Cuijpers et al. 2018). To explain why problem-solving is so helpful for people with depression, we turn to a notable theory in clinical psychology called *learned helplessness theory* (Abramson, Seligman, and Teasdale 1978). This theory emerged from a series of experiments with animals that showed that when animals are exposed to unescapable stress (e.g., electric shocks), they eventually give up and stop trying to do anything to improve their situation (e.g., jumping away from the shocks). Psychologists believe that the same pattern can emerge for people who face uncontrollable stress like poverty, violence, and discrimination. People may give up and begin to feel hopeless if they believe there is nothing they can do to mitigate the stressor. The magic of the TEB skills is that they can help youth build resilience even while facing challenges (big or small). As we have discussed, the TEB skills impact the brain by strengthening the ability of the prefrontal cortex to regulate our emotions. Even if youth have experienced uncontrollable adversity, research shows that the ability to engage the prefrontal cortex to regulate negative emotions is related to resilience later in life (Moreno-López et al. 2020). Solve Problems helps youth (and adults) overcome feelings of hopelessness, frustration, and stress by teaching them to take control of their problems.

When teaching Solve Problems to youth, keep two things in mind. First, it is best to introduce the skill for a problem associated with mild-to-moderate discomfort. Severe distress associated with major life problems can interfere with a youth's ability to learn the skill. After the youth has gained some practice with Solve Problems, you can work on progressively more-challenging problems. Second, be aware that initial attempts at problemsolving may be unsuccessful at moving youth from their problems to their goals. Some youth may have difficulty using their action plans because the steps are too large. Other youth may overlook significant obstacles that interfere with progress. In response to these challenges, a youth may think they have failed at problem-solving and decide to give up.

In these cases, it can be helpful to use Explore Thoughts to help the youth reconsider the thought that they have failed at problem-solving. Discuss examples of people who have continued to pursue goals even when their first attempts were unsuccessful. For example, Steve Jobs, the cofounder of Apple Computers, was famous for modifying his inventions many times before arriving at a finished product (Isaacson 2012). Discuss how every attempt at Solve Problems is an opportunity for the youth to learn more about their problem and to test out a new solution. Explain to the youth that problem-solving is a process and that they are succeeding as long as they engage with the process.



How to Solve Problems: A Six-Step Approach

You can use the Solve Problems worksheet in the appendix to walk through these steps with a youth or to practice them yourself.



Step 1: Identify the problem. The first step to the TEB skill Solve Problems is to clearly pinpoint the problem. A problem exists when there is a difference between the current situation (e.g., not knowing how to play baseball)

Teaching Tip

Youth may struggle to stick to one problem at a time. They may jump from problem to problem without completing the steps of Solve Problems for any of their challenges. If youth are struggling to stay focused, it may be helpful to allow some time for brainstorming and discussion of the different problems in their lives. After discussing, help them choose one problem to focus on first. Ask, "If I could wave a magic wand and fix one of these problems, which one would you want to fix first?" This question can help you hone in on the problem that is causing the youth the most distress.



and the desired situation (e.g., playing on the town baseball team), and this causes an uncomfortable emotion (e.g., anxiety, sadness, anger).

State the problem. Ask the youth to state their problem using facts, not emotions, and to stick to one problem at a time—for example, "I want to join the town baseball team, but I don't know how to play baseball."

State the goal. Ask the youth to state their goal, which is essentially their desired outcome. Encourage the youth to be as specific as possible. You should be able to visualize exactly what the youth's goal would look like. Ensure that the stated goal is realistic—for instance, "My goal is to be able to throw and catch a baseball."

Teaching Tip

Youth may choose a goal that is unrealistic. For example, a youth who has a grandmother with cancer might state the goal "my grandmother will be cured." Often, when youth state an unrealistic goal, it is because the problem is beyond the youth's control. If so, encourage the youth to reframe the problem in line with something that they can control. A more realistic goal might be to "cheer up my grandmother while she is receiving cancer treatments."





Step 2: Brainstorm solutions. Help the youth to brainstorm possible ways to move from their problem to their goal. Ask the youth, "What are some things you could do to reach this goal?" Encourage the youth to brainstorm as many solutions as possible, even if some ideas seem strange or impossible. If the youth is stuck, use prompting questions, such as "Could you ask someone for help?" or "How have you dealt with a problem like this in the past?" You can also offer your own suggestions for solutions. Aim to brainstorm at least three to five possible solutions.

Step 3: Evaluate the solutions. Ask the youth to list the pros and cons of each solution. Consider the possible barriers and likely consequences of each solution.

Pros. To help the youth identify the pros of a solution, ask, "What makes this solution better than the others?"

Cons. To help the youth consider the cons of a solution, ask, "What would prevent you from trying this solution?"



Step 4: Choose a solution. Once the youth has their pros and cons for each solution, help the youth to weigh them. Start by eliminating any solutions with cons that could cause more problems for the youth (e.g., illegal or risky behaviors). Then, consider which of the remaining solutions has more pros than cons. This solution is a good one to try first.



Step 5: Create an action plan. Once the youth has chosen a solution, help them to create an action plan. An *action plan* is a step-by-step plan that the youth will use to carry out their chosen solution. Just like the action plans for Charge Up and Face Fears, the steps in the Solve Problems action plan should be doable and measurable. Once the youth has the steps of their plan, ask them to schedule a day and time when they will complete each step.

Doable. Doable means that the youth is confident they can complete the activity in the near future. For example, for a youth who wants to learn to throw and catch a baseball, "hire a private coach" might not be doable in the near future. Instead, "ask a neighbor to help me practice" might be a better choice. Each step of the action plan should be small enough that it is not too overwhelming for the youth. Ensure that the youth has the skills and the resources to execute each step of the plan.

Measurable. Measurable means that the youth can collect data to determine if they completed the behavior. For the youth who

wants to learn to play baseball, "practice throwing and catching" is not a good action step because it is too vague. "Practice throwing and catching for five minutes a day with my neighbor" is a better action step. You should be able to visualize exactly what the youth will be doing.



Step 6: Evaluate the outcome. When the youth has reached the last step of their action plan, help them consider if they solved the problem.

If yes, great!

If not, that's okay! Return to step 4, and try a different solution.



TEB Skills in Action: AVA

Sixteen-year-old Ava is an energetic and motivated high school junior. Her parents each work two jobs to make ends meet and are rarely home in the evenings to see Ava. However, despite these challenges, Ava always completes her homework assignments on time and is doing well in her classes. She is also a dedicated member of the school dance team.

One day, Ava arrives to her English class looking tearful. Her teacher is concerned, especially because Ava is usually happy and full of energy. After class, this youth development professional (YDP) pulls Ava aside to ask if she can help.

Sample Dialogue: A YDP Introduces Problem-Solving to Ava

YDP:	You seem upset. What's going on?
Ava:	l'm so mad. I was late for school today,

and so I wasn't allowed to perform in my dance competition.

- YDP: I can understand why you would be upset. You've been working so hard to get ready for your competition.
- Ava: Yeah . . . and it wasn't my fault I was late. The subway was late again.
- YDP: That does sound frustrating. Would you like to work on this problem together using problem-solving?
- Ava: No! It wasn't my fault. I can't do anything about the subway being late.
- YDP: You're absolutely right; it wasn't your fault. You can't make the subway run on time. And it can be so frustrating when problems feel like they're out of your control. Perhaps we can find a way for you to overcome this problem, even though it isn't your fault.
- Ava: Okay...
- YDP: The first step is to state the problem. How would you describe it?
- Ava: I am late for school all the time.
- YDP: Why are you late for school?
- Ava: Because the subway is delayed.
- YDP: How late are you? How often are you late?
- Ava: I miss first period once a week because the subway is delayed.
- YDP: Good, that's the problem. What is your goal? How would the situation look different if you solved this problem?
- Ava: I would never miss first period.

YDP: IS that goal realistic.	YDP:	Is that goal realistic?
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- Ava: Maybe not . . . My goal is to be on time for first period every day this month so that I can compete in the statewide dance competition.
- YDP: I think that is a good place to start. Now, let's brainstorm some possible solutions to move you closer to this goal. Don't worry if some of the solutions seem farfetched; just come up with as many ideas as you can.
- Ava: I could walk to school.
- YDP: Great! What else?
- Ava: I could take an earlier subway train, or I could ask a friend for a ride.
- YDP: Great ideas! Let's look at the pros and cons of these ideas. What are the pros and cons of walking to school?
- Ava: The pros are that it's free, and I wouldn't have to rely on anyone else. The cons are that walking to school would take two hours, and I would get wet if it's raining.
- YDP: What are the pros and cons of taking an earlier train?
- Ava: The pro is that I might get to school early enough to get breakfast. The con is that I would need to wake up thirty minutes earlier.
- YDP: And what are the pros and cons of asking for a ride?
- Ava: The pro is that it would be the fastest way to get to school. The cons are that I would have to rely on someone else, and I don't know anyone who lives in my neighborhood who has a car.

YDP:	Now, think about these pros and cons, and pick one solution to try first.	
Ava:	I think taking the earlier train might work.	
YDP:	Great! Now let's make a step-by-step plan to move toward this solution. What will you need to do to take the early train?	
Ava:	l should set my alarm for 6:30 a.m.	
YDP:	Okay, anything else?	
Ava:	I need to leave my apartment by 7:00 a.m.	

Teaching Tip

Help youth consider barriers to implementing their action plans and how they will cope with those barriers.



YDP:	Great! Anything that might get in the way?	
Ava:	l might oversleep.	
YDP:	How could you prevent oversleeping?	
Ava:	l could set a second alarm.	
YDP:	Good idea! Let's schedule these steps so that you'll remember to do each one.	
Ava:	Okay. Before bed tonight I will set my alarm for 6:30 a.m. I'll set a second alarm for 6:35 so that I don't oversleep. Tomorrow morning, I will leave the house by 6:55 a.m. to have plenty of time to get to the early train.	
YDP:	Great! Do you want to set the alarms now? How do you feel about trying this plan for a few days and seeing how it goes? If	

it doesn't work out, we can always talk it over and find another solution.

Ava: I feel good about it.

TEB Skills in Action: NOAH

Twelve-year-old Noah is attending an after-school sports program at the town recreation center. He is very energetic and competitive and loves the program. However, over the past several weeks, he has gotten into several fights with other youth in the program. The program director asks one of the counselors to meet with Noah to talk about the fights. This youth development professional (YDP) first uses Observe the TEB Cycle to identify the cause of Noah's fights.

Sample Dialogue: A YDP Uses Observe the TEB Cycle to Help Noah Identify a Problem

YDP:	Let's talk about the fight yesterday. What happened?	
Noah:	lt wasn't my fault.	
YDP:	l'm guessing you were feeling angry. What made you so angry?	
Noah:	They wouldn't let me play on their team.	
YDP:	Who wouldn't let you play on their team?	
Noah:	Mike and Alex. It's not fair. They can't tell me what to do.	
YDP:	I understand why you were angry. Let me draw a picture to show you. [YDP draws the TEB cycle on a piece of paper.] Mike and Alex said that you couldn't play on their team, and you thought, "That's not fair; I want to play." You got angry, and you shoved Mike. Then what happened?	

Noah:	l got in trouble.
YDP:	That's right. You had to sit out the rest of the soccer game. So, shoving Mike didn't solve the problem because you didn't get to play in the game. And you could have hurt him.
Noah:	l didn't mean to.

YDP: That's good, and he's okay. But we need to figure out a different plan for next time.

Noah: Like what?

The youth development professional then guides Noah through Solve Problems.



Sample Dialogue: The YDP Guides Noah Through the Steps of Solve Problems

YDP: We need a plan so that you'll be able to play, and no one gets hurt. The next time someone tries to tell you that you can't play soccer, what could you do?

Noah: I don't know.

YDP: Well, it sounds like your goal is to play soccer. Any other way you could reach that goal? Noah: I could play with someone else. YDP: Great idea! What else? Noah: I could tell a teacher. That's another good idea. What else? YDP: Noah: I could play by myself. YDP: Great! Let's think about these options and choose one for you to try next time. To choose a solution, we need to think about the pros and cons of these options. The first solution was playing with other kids. What are the pros of that solution? What makes it a good choice? Noah: I would get to play. It would be fun. YDP: Yes, I agree. Are there any cons? What would get in the way of trying this solution? Noah: There might not be other kids to play with. YDP: That's true. The second solution was to tell a teacher. What makes that a good choice? Noah: Mike and Alex would have to let me play. YDP: Yes, that's true. Could anything get in the way of trying that solution? Noah: They might not listen to the teacher. They might get mad. YDP: Okay. The last solution is to play by yourself. What makes that a good choice? Noah: I can't really play soccer by myself. YDP: So it sounds like that is not the best solution.

Noah:	l guess not.	
YDP:	If we take the two other choices, playing with other kids or telling an adult, which one do you think will work best? You said that playing with other kids would be fun, but there might not be anyone to play with. On the other hand, telling a teacher will ensure that Mike and Alex let you play, but they might be mad. What do you want to do?	
Noah:	Tell a teacher.	
YDP:	Okay, that sounds like a good plan. Which teacher will you tell?	
Noah:	<i>Mr. Jennings he's in charge of all the sports.</i>	
YDP:	Okay, do you think you can remember to do that the next time other kids tell you that you can't play soccer? We could	

- to do that the next time other kids tell you that you can't play soccer? We could tell Mr. Jennings the plan so that he can remind you.
- Noah: Okay.
- YDP: Let's see how this works. I'll check in with you on Friday to ask how it's going.





Myra is launching a mentoring program for new teachers at the school where she works. She is excited about the program but also frustrated because few existing staff have signed up to be mentors. She decides to use Solve Problems to address this problem, using theSolve Problems worksheet (found in the appendix).

Myra's problem is that not enough staff have signed up to be mentors, and her goal is to enroll ten mentors in the new program. To tackle this problem, she starts by brainstorming some potential solutions, such as 1) ask my boss to force staff to join the mentoring program; 2) ask my boss to offer staff a bonus to join the mentoring program; and 3) compile requests for mentorship from new staff, and email these to existing staff.

For each of these potential solutions, Myra lists the pros and cons:

Potential Solution	Pros	Cons
Ask my boss to force staff to join the mentoring program.	It would be an effective way to get mentors.	Staff would be mad at me; the mentors might not do a good job if they are forced to join the program.
Ask my boss to offer staff a bonus to join the mentoring program.	It would be an effective way to get mentors; staff would be excited to receive a bonus.	a sustainable
Compile requests for mentorship from new staff, and email these to existing staff.	Staff who respond to the email are likely to be good mentors.	It would take time; staff might not read the email.

Based on the pros and cons listed, Myra weighs each of the solutions and then decides to start with solution 2 since it has the best balance of pros and cons. To put the solution into action, Myra creates a step-bystep plan that includes a deadline to complete each step:

- Write a proposed budget for the mentoring program (Tuesday after work).
- 2. Email the idea and the proposed budget to my boss (Wednesday morning).
- 3. Discuss the idea and proposed budget with my boss during our weekly meeting (Wednesday afternoon).

During their weekly discussion, Myra's boss tells her that a bonus is not possible but that staff who sign up as mentors would be able to get an extra vacation day. Myra considers this a good outcome of her plan.

Continuing Your TEB Skills Journey

Continuing Your TEB Skills Journey

Our thoughts, emotions, and behaviors have a direct impact on every facet of our lives, from our health and mood to our interactions with ourselves and others. Some days we feel like we can handle whatever is put in front of us, and other days we need to rely on step-by-step skills or the helping hand of another. The same is true for our youth, and they are lucky to have someone like you to teach them how to use the TEB skills at this critical stage in their social and emotional development.

The TEB skills were designed to be delivered by individuals, like you, who may not be mental health providers. However, there are times when it is essential to involve a mental health professional, such as a medical doctor, psychologist, social worker, or guidance counselor. Mental health professionals have specialized training to conduct mental health assessments and to determine if additional treatment strategies are needed beyond the TEB skills.



When to Call a Professional

Some signs that you need to involve a mental health professional include:

- The youth is at risk for harming themselves or someone else. For example, the youth is intentionally harming themselves, having thoughts of suicide, or threatening another person. In these cases, don't wait, call 911 to access emergency care.
- The youth is exhibiting a sudden change in a mood, a behavior, or thinking. This could include extreme mood swings, social withdrawal, or unusual ideas. These symptoms should be evaluated as soon as possible by a mental health professional.

The youth is not able to use the TEB skills to regulate negative emotions or to resist unhealthy coping behaviors. In these cases, the youth might benefit from individual evaluation by and treatment from a mental health professional.

When in doubt, involve a mental health professional. If your gut is telling you to seek extra help, listen to your instincts.

Mental Health Resources

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- In an emergency, call 911, or go to the nearest emergency room.
- Youth can access mental health providers at school including school psychologists, social workers, and guidance counselors.
- Youth can speak about mental health treatment with medical doctors including pediatricians, family medicine doctors, and psychiatrists.
- Youth can seek out a provider who is trained in evidence-based mental health treatment. The following websites provide information and resources for individuals seeking evidence-based mental health treatment:
 - Society of Clinical Child & Adolescent Psychology: https://effectivechildtherapy.org
 - Anxiety and Depression Association of America (ADAA): https://adaa.org
 - Association for Behavioral and Cognitive Therapies (ABCT): http://www.abct.org
 - Youth can also utilize the National Suicide Prevention Lifeline: **1-800-273-8255.**

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We hope you feel excited and equipped to serve the youth of your communities as well as yourself. Now what? The next step is to put these skills to work in your life through regular practice yourself and with youth. As you move forward using and sharing the TEB skills, we encourage you to refer back to this curriculum for support. Use the step-by-step instructions as a guide when you practice and teach the skills. Fill out one of the TEB skills worksheets (found in the appendix) when you are faced with an uncomfortable emotion or when coaching a youth in a challenging situation. We created these tools to facilitate regular practice of the TEB skills so that they will eventually become automatic. In addition, you may find it helpful to reread parts of this curriculum after gaining some realworld experience with the skills. The teaching tips and sample dialogues may come to life in a new way once you have had a chance to begin learning and teaching the skills. And don't forget that you can access additional support through our training and coaching program. To learn more, visit our website: https://www.massgeneral.org/ psychiatry/education-and-training/pride-training-institute. page.

Appendix

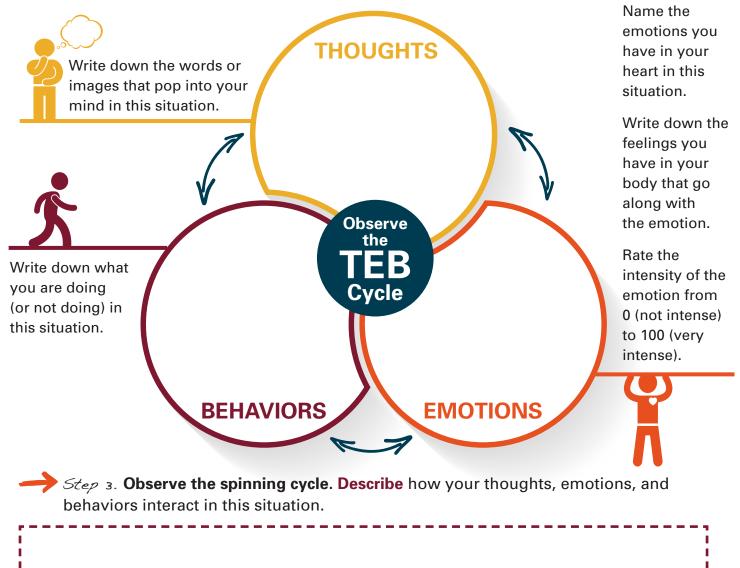


Observe the TEB Cycle



Step 1. Anchor on a situation. Describe one specific situation that is causing you to experience a strong emotion.



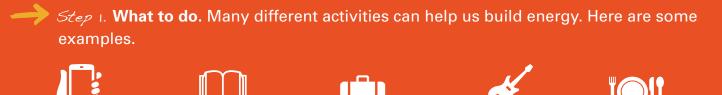


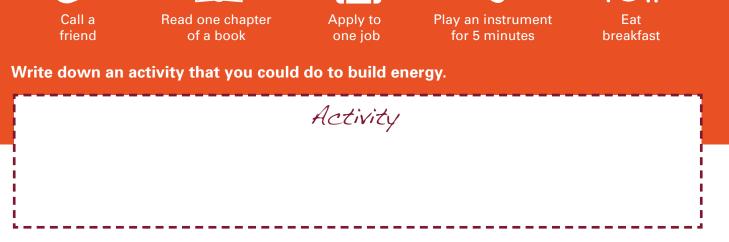






Charge Up





Make sure the activity is:

Doable. You can complete the activity this week.

Measurable. You will know the moment the activity is completed.

Repeatable. You can repeat the activity several times this week.

Step 2. How to do it. Schedule when you will do the activity this week using the calendar on this worksheet. Track your progress by checking off each activity you complete on the schedule.

		Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
a.m.	_	, Run i mile 8:00 am	□	□	□	□	□	□
р.м.				□	□			□
Evening			□	□	□	□		□







Charge Up

Step 3. Why to do it. After practicing your activity for a few weeks, choose a new activity related to one of your goals.

Goal. A goal is something you care about or want to have happen. Write down a goal.





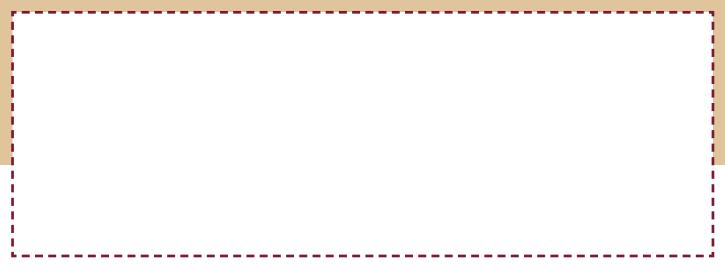




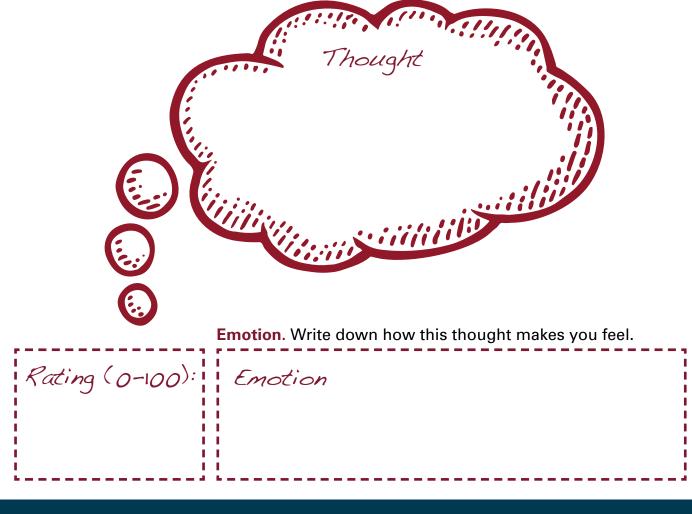
Explore Thoughts

 \rightarrow Step 1. Identify the thought.

Situation. Write down a situation that is causing you distress.



Thought. Write down what you were telling yourself in this situation. Rate how much you believe this thought on a scale of 0-100.









Explore Thoughts

Step 2. Explore the thought. Explore whether the thought is accurate and/or helpful by answering the following questions.

What is the evidence for this	thought?
What is the evidence against	this thought?
Are you expecting the worst? from your prediction.	Write down one other way the situation could turn out that is different
	reme language—for example, the words always, forever, never, must, or thought using more-balanced language.
ls the thought helpful?	

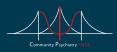
Step 3. Generate an alternative thought.

Review everything you wrote down for step 2. Then, write a new thought about the situation that is more accurate and helpful. Rate how much you believe this new thought on a scale of 0-100.



Emotion. Write down how this thought makes you feel.











Face Fears



Step 1. Identify the avoidance behavior.

Situation. Describe the situation that is causing you fear or anxiety.



Avoidance behavior. Write down what you are doing (or not doing) to reduce your discomfort in this situation.

Avoidance Behavior	
1	
1	

Step 2. Build the approach ladder.

Brainstorm approach behaviors. In the box below, write down different ways you could approach this situation instead of avoiding it.

Make sure the approach behaviors are:



Doable. You can complete the activity this week.

Measurable. You will know the moment the activity is completed.

Repeatable. You can repeat the activity several times this week.

Rate expected discomfort. Rate how uncomfortable you think you would feel while doing each approach behavior on a scale from 0 (no discomfort) to 100 (the worst discomfort you've ever felt).

Approach Behavior	Discomfort Rating (0-100)







Face Fears

Create the approach ladder. Use your expected discomfort ratings to order the approach behaviors on your ladder from easiest (lowest discomfort) to hardest (highest discomfort).

Aardest	Approach Behaviors	Expected Discomfort (0-100)
Easiest		

Step 3. **Identify an opportunity to practice.** Circle an approach behavior to practice. Start with a behavior with a discomfort rating around 40.

Step 4. **Practice.** Practice the approach behavior several times this week. Remember to stick with it even if you are uncomfortable. After each practice, rate how high your discomfort got while practicing from 0 to 100.

	Practice 1	Practice 2	Practice 3	Practice 4	Practice 5	Practice 6
Date_						
Time_						
Discomfort.						

Step 5. Keep going. Once your discomfort has decreased by half when you're doing the behavior, move to the next approach behavior on the ladder and practice the new activity. Keep going until you reach the top of the ladder.

	Practice 1	Practice 2	Practice 3	Practice 4	Practice 5	Practice 6
Date						
Time						
Discomfort _						







Solve Problems
Step 1. Identify the problem.
Problem. Write down a single problem.
Problem
Goal .Write down your desired outcome, or what you would like to happen, if you solved this problem.
Goal
ii

Step 2. Brainstorm solutions. In the chart below, write down 3-5 possible solutions to get from the problem to the goal.

Step 3. Evaluate the solutions. List the pros and cons of each solution.

		Solution #2	Solution #3	Solution #4	Solution #5
Describe the solution					
	1.	1.	1.	1.	Ι.
Pros	2.	2.	2.	2.	2.
	3.	3.	3.	3.	3.
	l.	1.	1.	L	1.
Cons	2.	2.	2.	2.	2.
	3.	3.	3.	3.	3.

Step 4. **Choose a solution**. Cross out any solutions with major cons. Then, consider which of the remaining solutions has more pros than cons. This solution is a good one to try first.







Solve Problems

Step 5. Create an action plan. Create a step-by-step plan to carry out your chosen solution.

	Action Plan
Step 1:	
Step 1: Step 2: Step 3: Step 4: Step 5:	
Step 3:	
Step 4:	
Step 5:	
	۱ 4

Make sure the steps of your plan are:

Doable. You are confident you can complete each step in the near future.

Measurable. You will know the moment each step is completed.

Schedule the day and the time you will complete each step.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Step							
Date							
Time							

Step 6. Evaluate the outcome. Write down what happened after you completed your final step.

	Outco		 	 1
1	Ouce	me		į.
1				ł
				ł
i			 	 ł,
Did you solve the problem (circle one)?	YES	NO		

If yes, great! If not, that's okay! Return to step 4 and try a different solution.







Luana Marques, PhD



Dr. Luana Marques is the director of Community Psychiatry PRIDE (Community Psychiatry Program for Research in Implementation and Dissemination of Evidence-Based Treatments) and associate director of the Center for Anxiety and Traumatic Stress Disorders

at Massachusetts General Hospital (MGH) as well as an associate professor of psychiatry at Harvard Medical School. She completed her PhD in clinical psychology at The State University of New York (SUNY) at Buffalo and her clinical internship in the cognitive behavioral track at Massachusetts General Hospital/Harvard Medical School in 2007.

Recognized as a national and international expert in cognitive behavioral therapy (CBT) with over ten years of experience conducting clinical research in health disparities and trauma-related disorders, Dr. Marques's major clinical and research interests include the implementation of evidence-based practices for individuals suffering from a variety of behavioral health disorders in diverse communities. Through her research, she aims to decrease disparities in care for individuals experiencing behavioral health difficulties, especially among low-income and ethnic minorities.

Dr. Marques is the president of the Anxiety and Depression Association of America (ADAA), a scientific reviewer for the Patient-Centered Outcomes Research Institute (PCORI), and a member of the Association for Behavioral and Cognitive Therapies (ABCT). She is also the author of *Almost Anxious: Is My (or My Loved One's) Worry or Distress a Problem?*, published by Harvard Health Press/Hazelden Publishing.



Nicole J. LeBlanc, PhD

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Dr. Nicole J. LeBlanc is a clinical and research fellow at the Center for Anxiety and Traumatic Stress Disorders and Complicated Grief Program at Massachusetts General Hospital (MGH). She completed her PhD in clinical psychology at Harvard University and

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Anna D. Bartuska, BS/BA

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Anna D. Bartuska is the program coordinator of Community Psychiatry PRIDE (Community Psychiatry Program for Research in Implementation and Dissemination of Evidence-Based Treatments) at Massachusetts General Hospital. Ms. Bartuska's primary clinical

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Debra Kaysen, PhD

Dr. Debra Kaysen is a professor of psychiatry at Stanford University. She completed her PhD in clinical psychology at the University of Missouri and her clinical internship at the University of Washington in 2003 and an NIAAA (National Institute on Alcohol Abuse and

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Soo Jeong Youn, PhD

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Dr. Soo Jeong Youn is a licensed clinical psychologist at Massachusetts General Hospital and an instructor in psychiatry at Harvard Medical School. She received her PhD in clinical psychology at The Pennsylvania State University in 2017. Dr. Youn completed her clinical internship

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Dr. Youn's research and clinical experiences focus on bridging the gap between research and practice by engaging in psychotherapy process and outcome research, community-based participatory research, and the implementation and dissemination of evidence-based treatments (EBTs). Through her research program, she is interested in understanding and evaluating processes of integrating EBTs in underresourced settings to enhance adoption, sustainability, and scalability to better serve underserved populations.



We have been fortunate to receive expert input, feedback, and support from many different people as we developed the TEB skills and wrote this curriculum. We would like to first acknowledge members of our team at Community Psychiatry PRIDE (Program for Research in Implementation and Dissemination of Evidence-Based Treatments) at Massachusetts General Hospital for their contributions to this project. Specifically, we thank Kimberlye Dean, PhD, who is a Clinical Research Fellow at Community Psychiatry PRIDE, for providing feedback and suggestions as we developed the TEB skills in order to optimize their delivery to disengaged and disconnected youth. We also thank Orin Gutlerner, Director of Education at Community Psychiatry PRIDE, for helping us to enhance the delivery of the TEB skills using principles of pedagogy. In addition, we thank Joshua Bogus, MPH, Project Director at Community Psychiatry PRIDE, for coordinating the many individual workstreams and steps that needed to come together in order for us to write and publish this curriculum. Finally, we thank Lillian Blanchard, Clinical Research Coordinator at Community Psychiatry PRIDE, for contributing to the design and production of this curriculum, including the development of the TEB skills worksheets.

We were also fortunate to receive assistance from several clinical psychologists with expertise in Cognitive Behavioral Therapy as we developed the TEB skills and wrote this curriculum. Specifically, we are indebted to Torrey A. Creed, PhD, Assistant Professor of Psychiatry at the Hospital of the University of Pennsylvania, for contributing her knowledge of Transdiagnostic Cognitive Behavioral Therapy to the development of the TEB skills. In addition, we thank Jamie Micco, PhD, Lecturer in Psychology at Harvard Medical School, for her feedback on the TEB skills based on her expertise in Cognitive Behavioral Therapy for children and teenagers.

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We also want to express our gratitude to the Charlestown High School students who served as our Youth Advisory Board members during the Summer 2019 internship and who gave inception to the acronym TEB (thoughts, emotions, and behaviors). We are grateful for your openness, knowledge, and experiences and for helping us to co-create the TEB skills.

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