

How to deal with anxiety during the PhD and beyond



Dr Frane Vusio & Dr Ehsan Ghadim



Frane

Psychologist, Trainee Applied
Psychologist, Low-Intensity CBT
therapist, Researcher, and tutor for
Doctoral College at the University of
Warwick

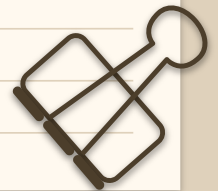
&



Ehsan

PhD in chemistry, Postdoctoral
researcher at the School of
Engineering.

Hello! We are...



Plan for today's workshop



01 | Define Anxiety

We will first try to understand what anxiety is.

02 | Prevalence rates

We will then talk about how anxiety is widespread both globally and nationally.

03 | Anxiety and PhD

Afterwards, we will be addressing the effects of anxiety during PhD, and its impacts on PGRs lives.

04 | Case Study

Ehsan will present his case study with his lived experience of anxiety during PhD.

05 | Toolbox

Strategies for managing your anxiety will then be introduced

06 | Seeking support

Finally, we will discuss help-seeking and support available to help you manage anxiety.



So what is Anxiety?

Let's dive in and get to know more information about what anxiety is!



Anxiety

- Anxiety is something **we all experience** from time to time.
- Anxiety is a **natural** and, at times, **useful** emotion to experience
- It is our mind's **warning signal** that something is dangerous, and we need to take action.
- However, **anxiety in itself is not dangerous**; although anxiety may feel horrible, **it is not harmful**.
- Anxiety does not last forever.

Other ways to describe anxiety:

- Feeling stressed out
- Feeling tense or nervous
- Unable to relax
- Feeling on-edge or irritable

Anxiety is what we feel when we are worried, tense or afraid.

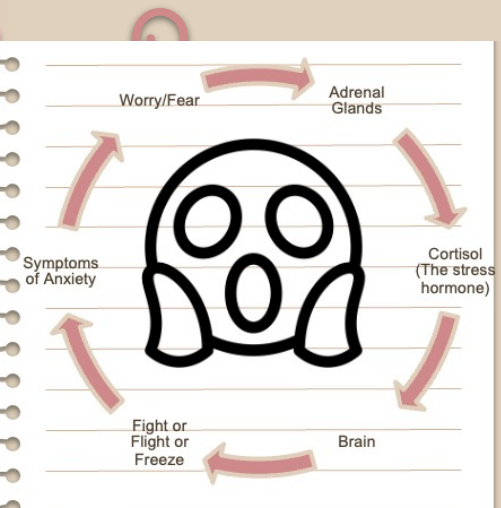
Fight, Flight or Freeze response

- When we experience **anxiety**, our body's "**fight-flight-freeze**" response is **triggered** to prepare our body to take action to survive; these are to either fight or run away.
- Understanding anxiety is like understanding a fire alarm: It's a necessary tool to protect us from real danger (like an actual fire), but sometimes it can be triggered when there is no fire (e.g. burning toast). This analogy can help us grasp the nature of anxiety and its role in our lives.
- We cannot eradicate anxiety, but we can learn how to **manage it better!**



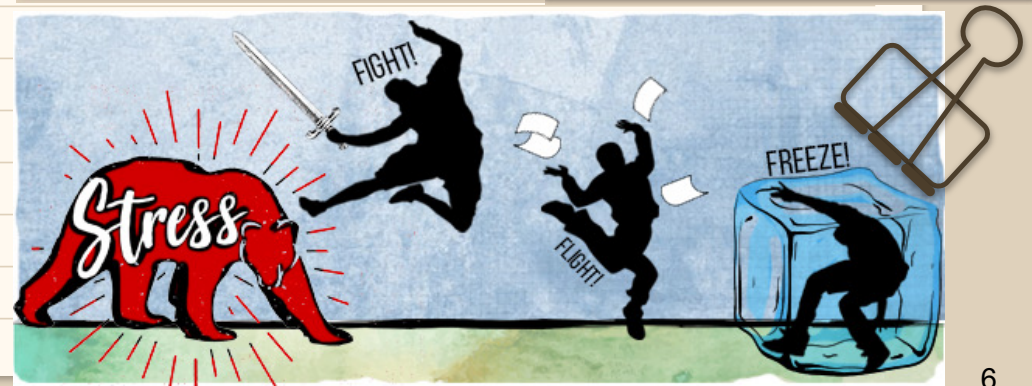
Dodo Bird

Meet the extinct bird without flight-fight-freeze response

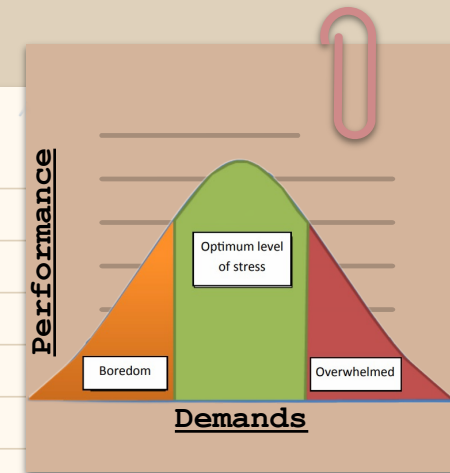


Fight-Flight-Freeze Response

The body releases cortisol during a stressful situation to help it handle an issue in the short term. Once the stressful situation is gone, the cortisol levels decrease, and you don't feel anxiety or fear anymore.



What is stress?



- Stress is **how we react** under pressure in situations we do not feel we can manage or control.
- Stress is a **normal response** that keeps us motivated to meet demands.
- Striking a **balance is key**. Too little stress can leave us feeling **unmotivated or bored**, while excessive stress can lead to **burnout and anxiety symptoms**.
- Stress becomes a **problem** when it is **prolonged** or is **very intense** in nature.
- You might use alcohol or drugs to counteract the impact of stress. However, this will further affect your mental health and cause further stress.

Stress can affect both physical and mental health

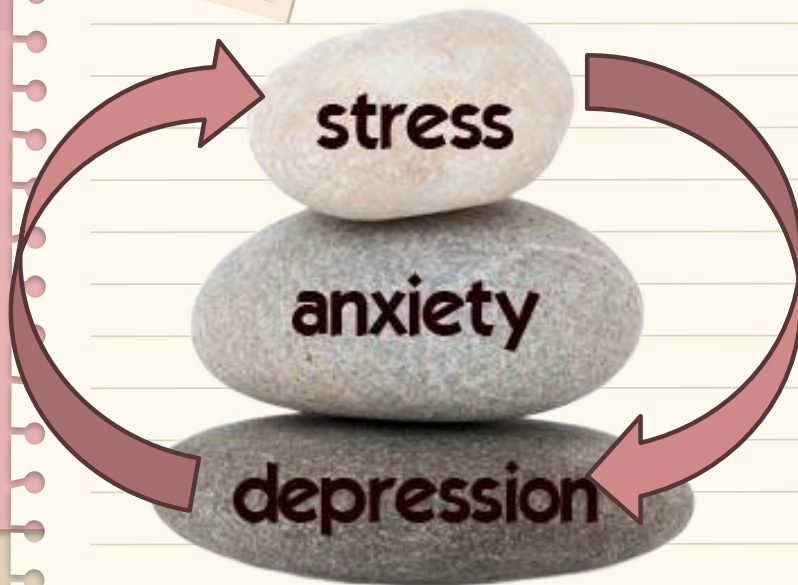
REMINDER

Stress is:

- Normal response
- Short Term
- Manageable

Did you know?

IS IT STRESS OR ANXIETY?



STRESS

- Generally is a response to an **external** cause, such as meeting a deadline or arguing with a friend.
- Goes away once the situation is resolved.
- Can be positive or negative. I.E. may inspire you to meet a deadline OR cause you to lose sleep.

BOTH

Both stress & anxiety can affect your mind & body.

You may experience symptoms such as:

- Excessive worry
- Uneasiness
- Tension
- Headaches
- Body pain
- High blood pressure
- Loss of sleep

ANXIETY

- Generally is **internal**, meaning it's your reaction to stress.
- Usually involves a persistent feeling of apprehension or dread that doesn't go away, and that interferes with how you live your life.
- Is constant, even if there is no immediate threat.

Anxiety Disorders

- **Generalised Anxiety disorder (GAD):** excessive worry about anything and everything. It arises even when there are no external triggers.
- **Phobias:** specific fear that triggers anxiety and results in avoidant behaviours. Agoraphobia, arachnophobia and claustrophobia are common types of phobias.
- **Social Anxiety:** anxiety in social situations, characterised by fear of being embarrassed, judged or rejected by others.
- **Panic disorder:** regular experiences of panic attacks (sudden and intense symptoms of anxiety), resulting in fear and worry of another panic attack and avoidance of situations and places where panic attack was experienced.
- **OCD:** recurrent thoughts that lead to repetitive behaviours. OCD is a mental health condition that involves persistent, unwanted thoughts (obsessions) and behaviours (compulsions) that the person can't control.

What are Anxiety related Disorders?

Anxiety disorders:

Anxiety disorders are psychological conditions characterised by excessive and frequent anxiety which interferes with your day-to-day functioning.



Overcoming Anxiety

- Prevention and early intervention
- Psychotherapy (CBT/ Exposure)
- Medications
- Healthy lifestyle

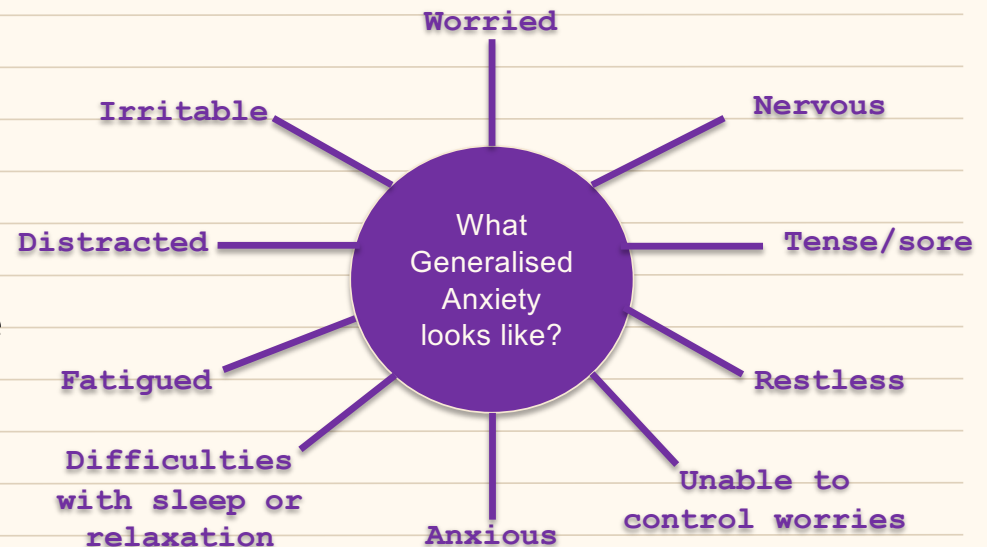
Causes of Anxiety related disorders

- Genetic predisposition
- Personality, psychological characteristics and cognitive function
- Lifestyle, stresses, trauma
- Chronic conditions

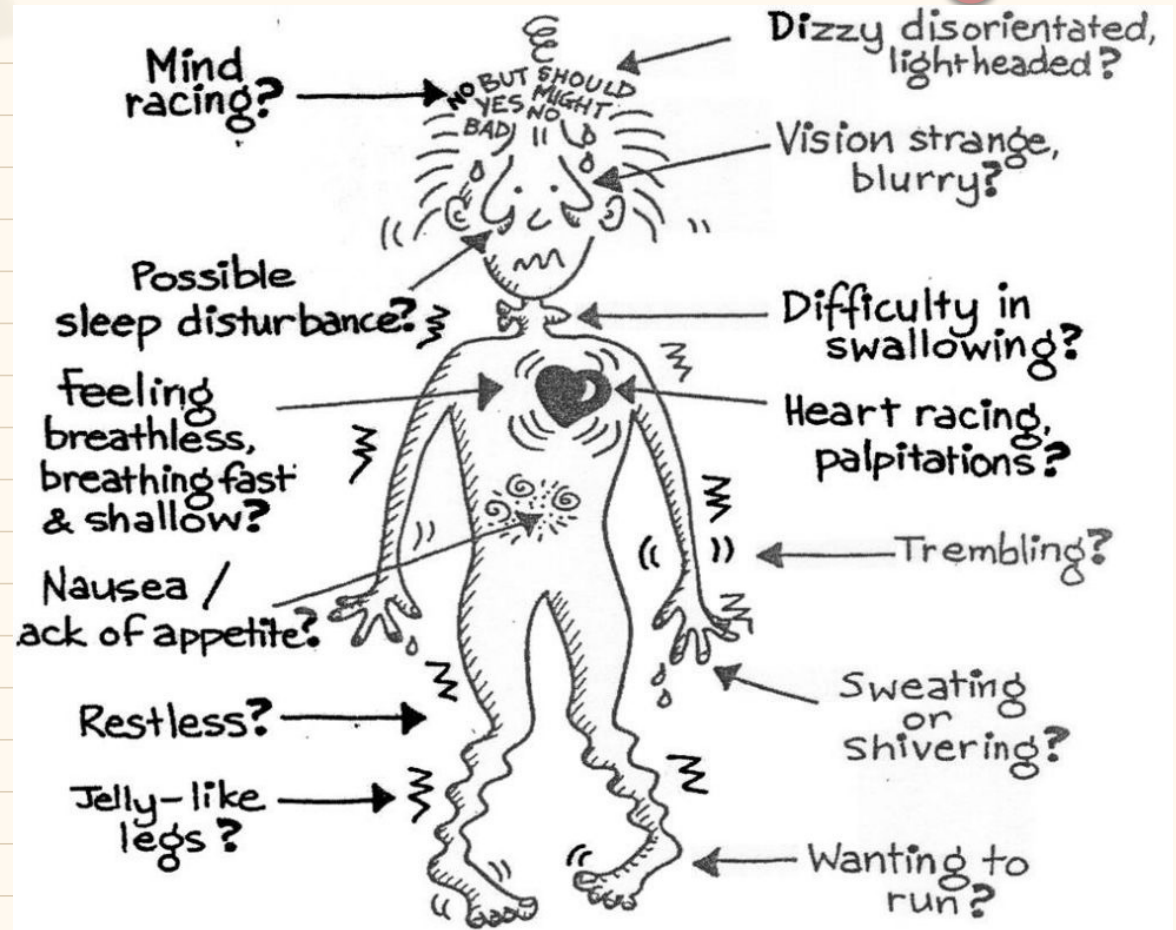
Generalised Anxiety Symptoms (GAD)

- **Generalised Anxiety Disorder (GAD)** is a prevalent condition among the population, particularly among students.
- **1 in 20 people** will experience severe GAD during their lifetime
- **Most PhD student** experience **anxiety** as a range of worries and "**what ifs**" during their PhD.

Excessive worry is the primary symptom of generalized anxiety disorder (GAD).



Physical symptoms of Anxiety



Common thoughts and worries in GAD

"Something bad will happen"

"What if I make a fool of myself"

"I am going to faint"

"I won't be able to cope"

"What if...that happens"

"I cannot breathe, I am suffocating"

"I've got to get out of here"

Anxiety impacts how we think:

- Worrying all the time about lots of different things.
- Worrying about worrying!
- Racing thoughts.
- Mind jumping from one thing to another without being able to concentrate on one thing.
- Imagining the worst case scenario
Dwelling on the worst case scenario.



Anxiety leads to avoidance
and avoidance leads to more
anxiety

Avoidance is a large part of
what **maintains** anxiety

Common behaviors in anxiety

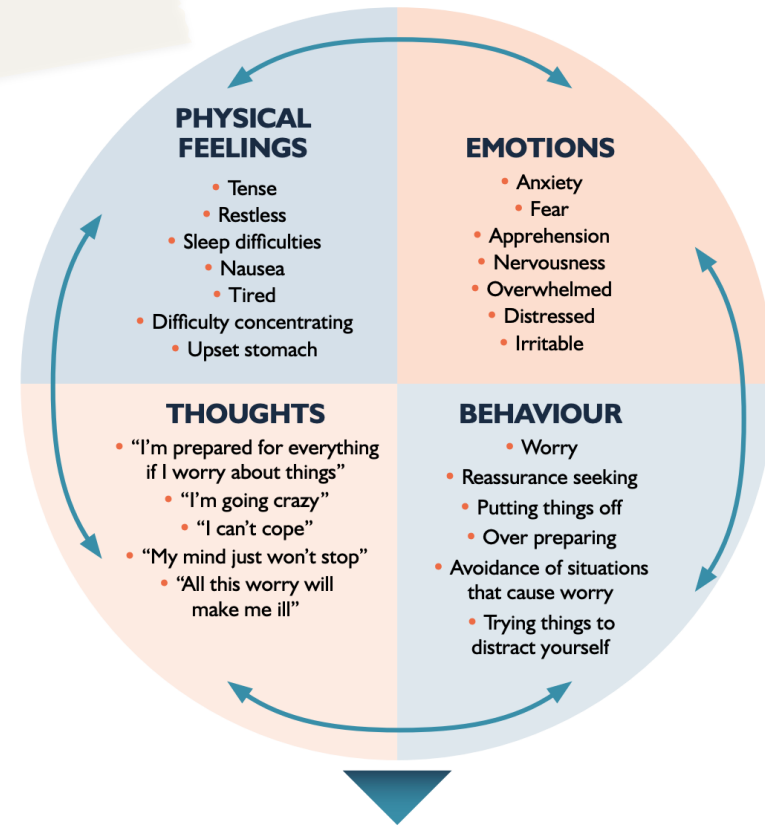
- Defensive attitude
- Restlessness
- Isolating ourselves
- Ticks or muscle twitches
- Difficulty concentrating
- Avoidance
- Reassurance seeking
- Safety behaviors
- Procrastination

What does generalised anxiety Disorder look like?

Anxiety can affect us in **four** different ways. It affects:

- How we **feel**
- How we **think**
- How we **behave**
- How our **body** works

The vicious cycle of anxiety is a self-perpetuating pattern in which anxiety symptoms reinforce and exacerbate each other, leading to a worsening of the overall anxiety experience.

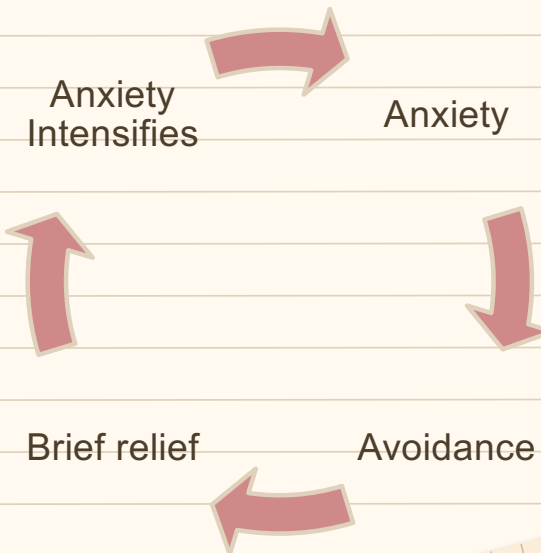


Like a vicious cycle, each of these areas has a knock-on effect on the others and can impact on significant areas of life such as work, relationships and hobbies.

Source: Managing your worries, University of Exeter [2019] (acting through CEDAR; Psychology Department).

What keeps anxiety going?

- **Avoidance** gives us short-term relief, but in the long term, it reinforces our sense of being unable to cope, as we do not learn that we would have been okay (safe) in the situation.
- **Misinterpretation**: Not understanding the physical symptoms can lead us to think something else is happening (e.g. heart attack, physical illness etc.)
- **Putting things off**: Worrying can take up a lot of our time and is very distressing, therefore we might not have enough time or energy to tackle everyday problems. If this happens our problems can pile up and cause us even more worry.



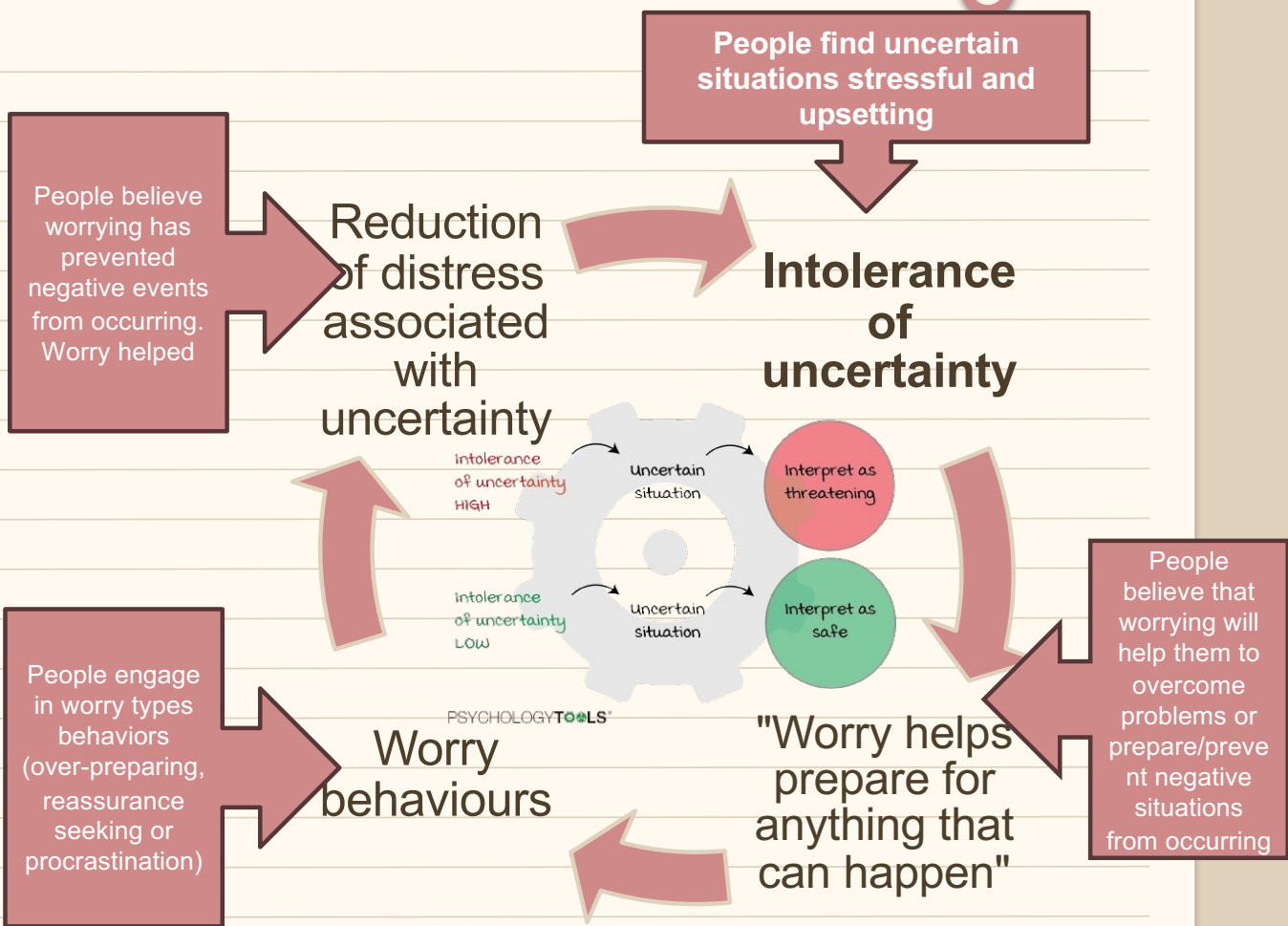
Our beliefs about worry play a significant role in perpetuating the cycle of worry. Whether we believe it is helpful or making us ill, these beliefs can make it challenging to stop worrying or even intensify the worry.

Intolerance of uncertainty

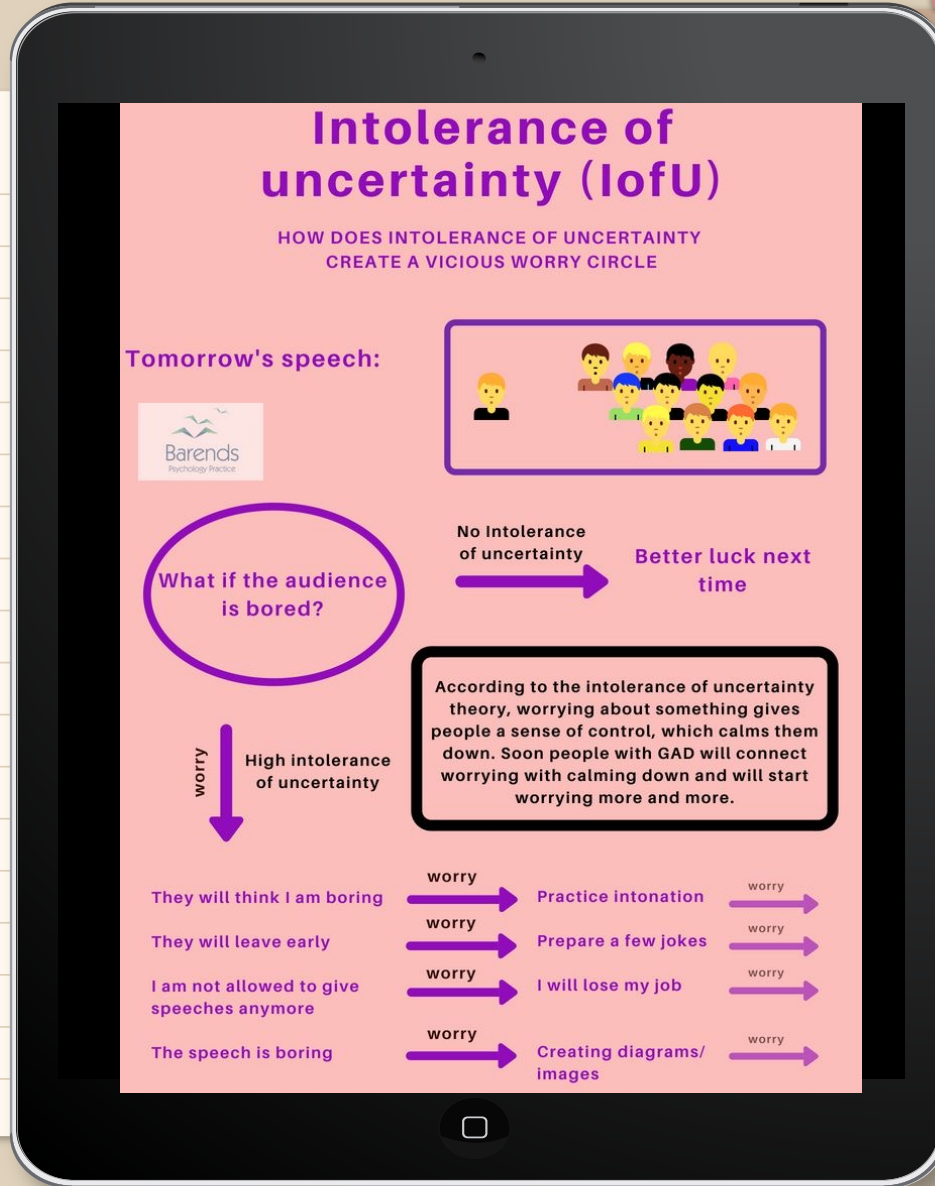
Intolerance of uncertainty, a psychological trait, is often linked to a tendency to overestimate that future events will be negative. This can lead to a sense of helplessness and an inability to cope if the worst-case scenario unfolds.

Being intolerant of uncertainty means that you interpret uncertain situations as threatening. Any ambiguous, novel or unpredictable situation may be experienced as particularly uncomfortable.

Breaking this cycle and learning to live with uncertainty is an important part of tackling worry



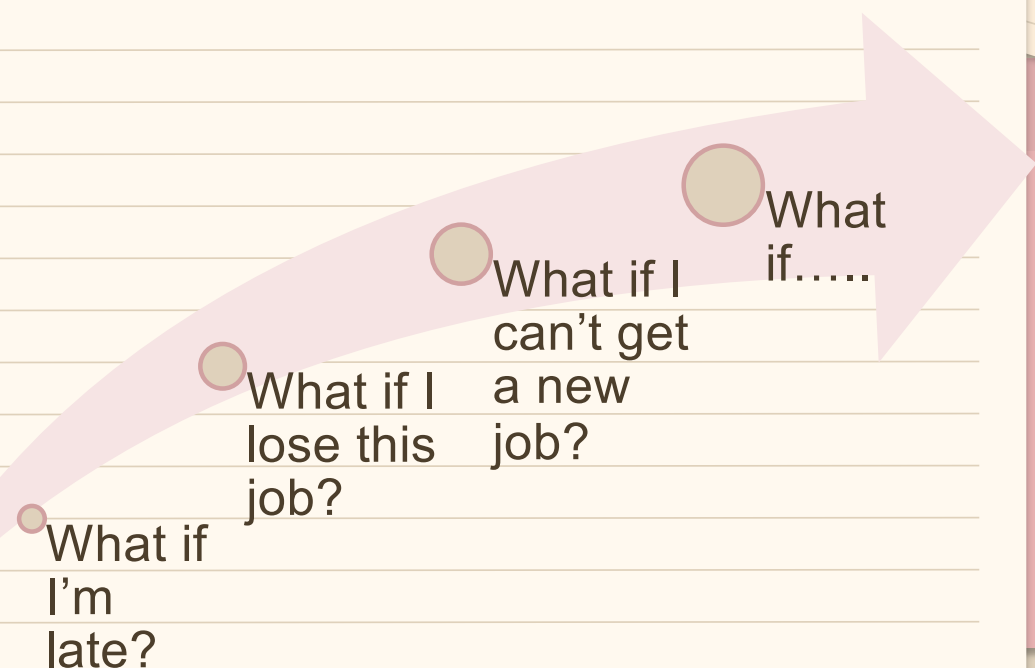
Example of Intolerance of uncertainty



Worry chain



- A worry chain, a relatable analogy, vividly illustrates how negative thoughts, images, and worries can **spiral out of control**
- Worrying about one worry leads quickly and easily to worrying about many other worries
- The **first step** to breaking the worry **chain** is to **understand** your worries and the **effect** that **worrying** has on you
- Learning to **break this** worry chain will be crucial to **manage** your worries and your anxiety



Let wrap this section

- Everyone can be affected by anxiety
- Anxiety is normal and important part of your life
- The goal is to reduce the symptoms and learn how to control worry and anxiety (which we will cover in section 5)
- By doing this, you will increase your confidence to cope in future when you do experience anxiety or worry

Crucial concepts to remember:

- Fight, Flight, Freeze Response
- Difference between stress and anxiety
- Symptoms of anxiety
- Vicious cycle
- Intolerance of uncertainty
- Worry chain

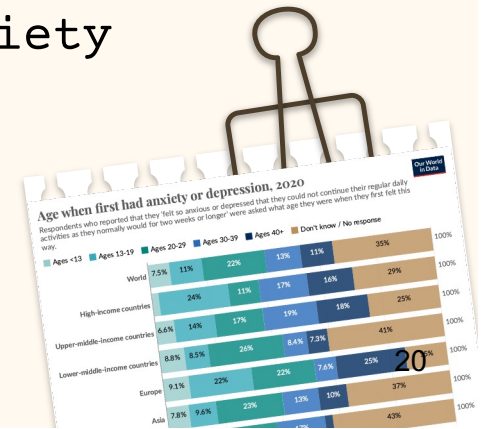
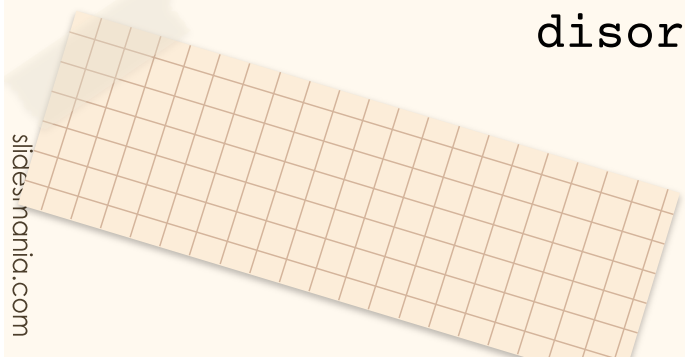
Anxiety can affect anyone!

Prevalence rates of Anxiety

So let's talk a bit about how widespread anxiety disorders are globally and nationally



02





Prevalence	Measures existing cases of disease and is expressed as a proportion
Incidence	Measures new cases of disease and is expressed in person-time units

Global prevalence of anxiety disorders

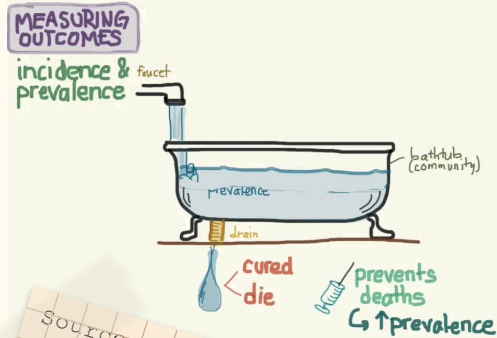
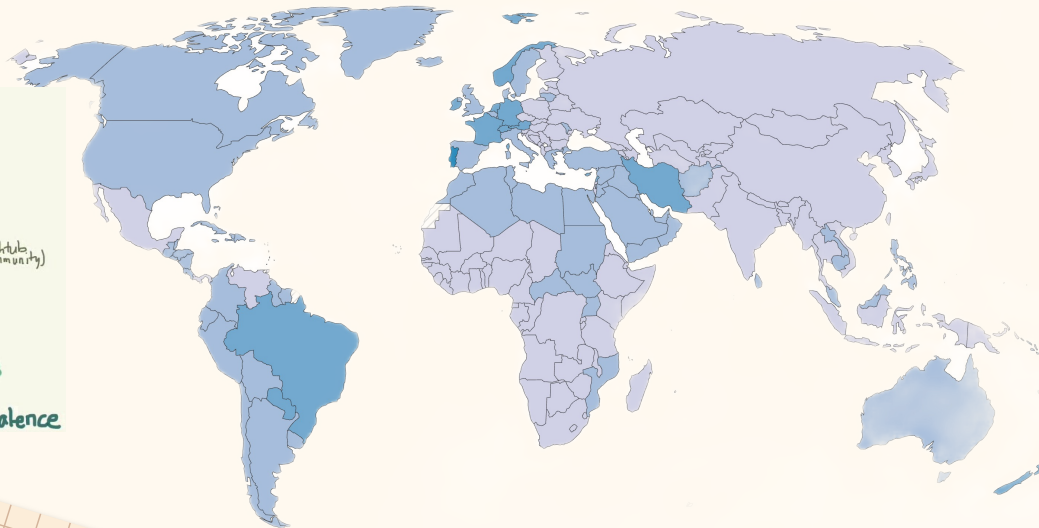
Key Takeaways:

- 4% of the global population currently experience an anxiety disorder
- In 2019, 301 million people worldwide had an anxiety disorder
- Anxiety disorders are the most common of all mental disorders

Our World in Data

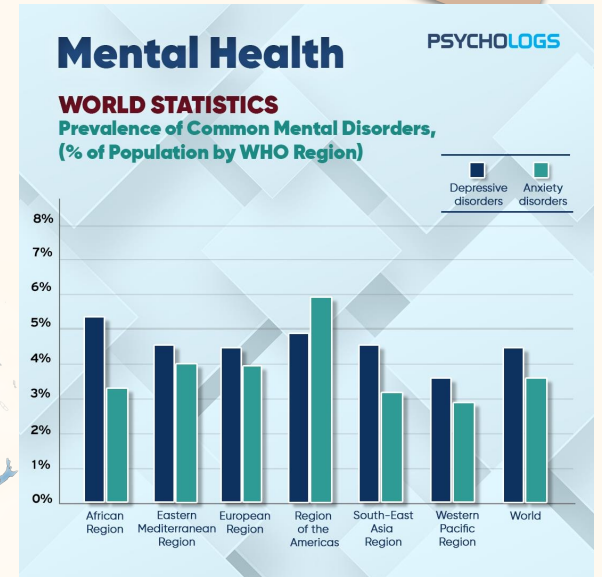
Anxiety disorders prevalence, 2019

Estimated share of people with anxiety disorders¹, whether or not they are diagnosed, based on representative surveys, medical data and statistical modelling.



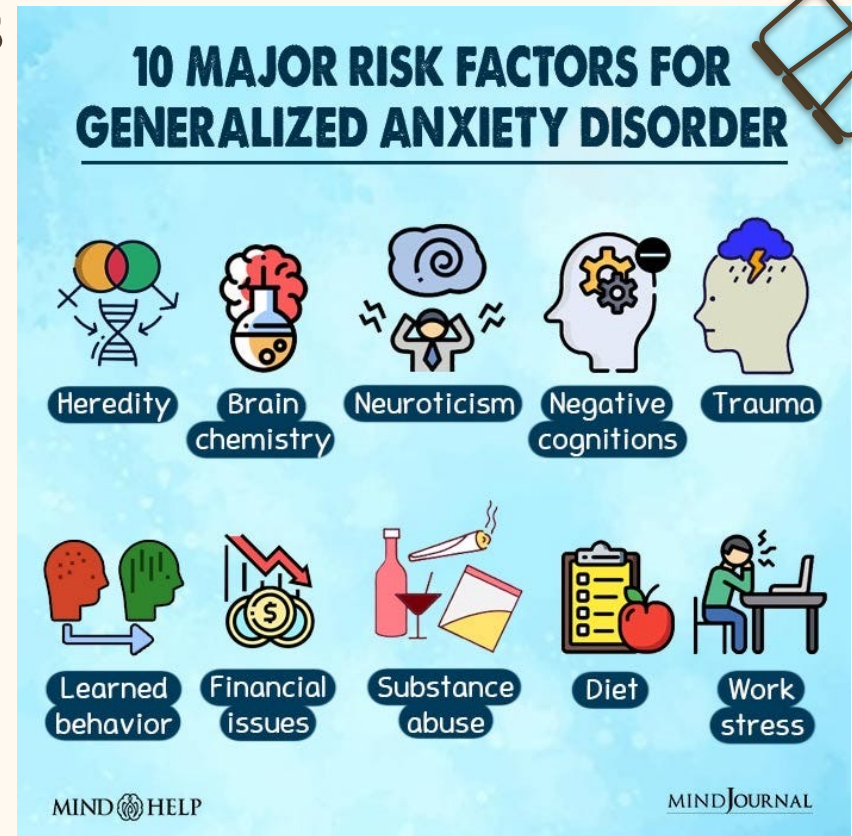
Sources:

- GBD Results Tool. In: Global Health Data Exchange [website]. Alonso et al (2018)
- <https://www.who.int/news-room/factsheets/detail/anxiety-disorders>



Contributing factors for anxiety disorders

1. Biological
2. Psychological
3. Environmental
4. Stress(s)
5. Technology and Social media
6. Climate change
7. Stigma and lack of awareness



Prevalence of Anxiety in the UK

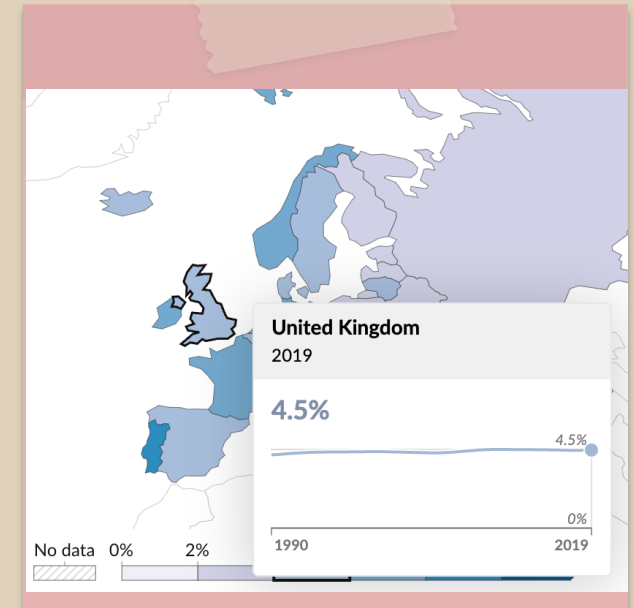
Anxiety Statistics (2024)

- **3.9** in 10 UK adults reported feeling anxious
- **45%** of UK adults (18-24) admitted to feeling ashamed to discuss their anxiety
- **16-29-year-olds** are more likely to feel anxious (by 28%)
- Anxiety affects **914,000** UK workers
- **BAME and LGBTQIA+** groups are more vulnerable
- **Women** are more likely to report anxiety (by 7.2%)
- **34%** of **18-24s** reported feeling anxious most of the time and did not think they were coping well with anxiety

Source: Kindmind 2024
Kessler et al., 2005

Kessler study

"Half of all lifetime cases of mental health difficulties start by age 14 years and three-fourths by age 24 years" (Kessler et al., 2005)



Key Takeaway

- It is normal to feel anxiety
- You are not alone

Let wrap this section

- Everyone can be affected by anxiety
- 301 million people in the world have an anxiety disorder
- Anxiety disorders as the most common of all mental disorders
- 3.9 in 10 UK adults reported feeling anxious
- There is a range of contributing factors for the development of anxiety-related disorders

Crucial information

Anxiety-related disorders are prevalent in the population both globally and nationally

4% of the global population experience anxiety disorders

Prevalence rate in the UK is 4.5%

Anxiety can affect anyone!



03

Effects of Anxiety among PhD students

We have learned so far what is anxiety, and how widespread anxiety is in the general population. In this section, we will talk more about the effects of anxiety on PhD students and how anxiety affects PGRs lives.

Anxiety as "the norm" for the UK PhD students

- PhD students in the UK are more likely than other educated members of the general public to report symptoms of anxiety
- PhD students were twice as likely as working professionals (18% to 9%) to show signs of severe anxiety, as measured by the seven-item screening test for GAD.
- 74% of PhD students and 62% of working professionals reported some level of anxiety.
- 2017 study found that PhD students are 2-3 times more likely to experience anxiety or some other mental health disorder.

Source: Depression and anxiety 'the norm' for UK PhD students Nature.com (2021)

17% of more than 15,600 PhD students across nine studies were estimated to have anxiety (Satinsky et al., 2021).

32% of all respondents reported having been formally diagnosed with a mental health problem at some point, suggesting that many PhD students who go through anxiety or depression aren't seeking help

"There's little doubt that life as a graduate student can be extremely stressful. Year by year, PhD students are expected to do more and more to get their degree". Clio Berry (2021)

Key takeaway

- Don't suffer in silence
- It is not easy for PGRs to openly talk about their mental health difficulties and seek help
- However, recognising the problem and reaching out is the first step towards help.

Anxiety in PGRS in the UK

- 40% of PhD students are considering taking a break from their PhD due to mental health difficulties
- 14% of PhD took a mental health-related break from their PhD
- 35% of PhD students considered to end their studies altogether due to pressures on their mental health

Source: Hazell et al., 2021

42% of PhD students in the UK reported that they believed having a mental health problem during your PhD is the "norm" (Hazell et al., 2021)

"There is a common belief ... you have to suffer for the sake of your PhD, if you aren't anxious or suffering from impostor syndrome, then you aren't doing it 'properly' " (Hazell et al., 2021)

Key takeaway

- Don't suffer in silence
- Anxiety can be beaten

Did you know?

- In a 2023 study, 30% of PGRs met the threshold for anxiety [1]
- 34.8% of graduate students suffered from the anxiety
- Master students suffered less than doctoral students (29.2% vs.34.4%)[2]
- International students may be more vulnerable to anxiety[2]

Source: [1] Carr et al (2022); [2] Chi et al., (2023)]



Predictors of PGRs poorer mental health and wellbeing

- PGRs are **particularly vulnerable** to mental health problems (Hazell et al., 2021)
- **Higher rates** of mental health problems than other students (Hazell et al., 2021; Levecque et al., 2017)

Key predictors of PGRs poorer mental health


Lack of interests and relationships outside of PhD studies

Students' perfectionism, Impostor syndrome, negative thoughts and low self-esteem

Their supervisory relationships

Social isolation, High stress, Financial difficulties, future uncertainty

Impact of stressors outside of the PhD



Contributing factors to postgraduate anxiety

1 Chronic stress

Chronic environmental stress is the main factor leading to anxiety, while stress among academics is alarmingly widespread, especially in PGRs.

2 Work-life imbalance

High levels of job insecurity and imbalance between life and work. A high-pressure environment contributes to the development of stress, anxiety and low mood

3 Long working hours

85% of PGRs reported working 41+ hours per week, while 71% of them reported inability to meet their deadlines

4 Gender and sexuality

Female, transgender, non-binary, homosexual, bisexual and queer PGRs tend to report poorer mental health than their male and/or heterosexual counterparts

Other factors associated with poor mental health

- Lack of resilience
- Perfectionism
- Workaholism
- Being ahead/behind schedule
- Field of study
- Financial security
- Social support

Let wrap this section

- Large prevalence of anxiety disorders amongst PGRS.
- PGRS tend to be affected by poor mental health more than other students or members of the general public.
- Multiple contributing factors associated with PGRS experiences of anxiety and poorer mental health and wellbeing.

Contributing factors to postgraduate anxiety

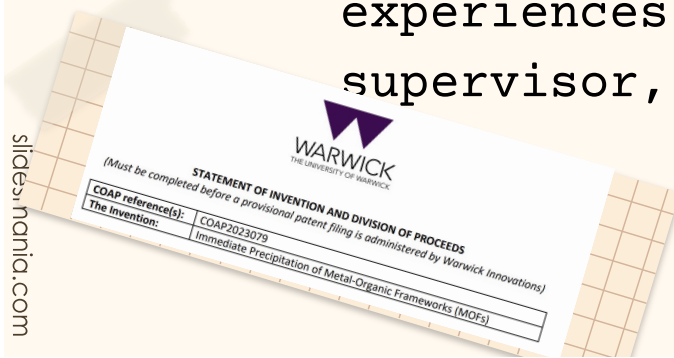
- Chronic stress
- Work-life imbalance
- Long working hours
- Gender and sexuality

**Early
intervention and
prevention are
key!**



Case study

In this section, Ehsan will provide more information about people with anxiety and explain his lived experiences of anxiety in the research area with my supervisor, other students, staff, and loneliness.



Ehsan's lived experience



WARWICK BIG IDEAS

Showcase Event



Ehsan Ghadim
School of Engineering

Our synthetic method revolutionises industrial-scale production with ultrafine nanoparticles to increase reactivity. This innovative green approach enables the creation of nanomaterials at room temperature with remarkable efficiency, dramatically reducing production costs. The fast synthesis method can achieve high purity space-time yields of up to 5000 tonnes per day, and significant advancement in material sciences with precise control over particle size.



STATEMENT OF INVENTION AND DIVISION OF PROCEEDS

(Must be completed before a provisional patent filing is administered by Warwick Innovations)

COAP reference(s):	COAP2023079
The Invention:	Immediate Precipitation of Metal-Organic Frameworks (MOFs)

Dalton
Transactions



PAPER

View Article Online
View Journal | View Issue



Cite this: *Dalton Trans.*, 2023, 52, 11143

Rapid synthesis of cerium-UiO-66 MOF nanoparticles for photocatalytic dye degradation†

Ehsan Ezzatpour Ghadim,^a Marc Walker^b and Richard I. Walton^{1,*}

An unprecedented synthesis method is used to form a series of Ce-UiO-66-X (X = NH₂, OH, H, NO₂, COOH) metal-organic frameworks by precipitation from mixed solvents, with instantaneous crystallisation on combining separate solutions of ligands and metal precursors. This allows the first direct synthesis of Ce-UiO-66-OH. Powder X-ray diffraction (PXRD) shows that all materials are pure phase with a broadened profile that indicates nano-scale crystallite domain size. The effect of different functional groups on

Open Access Article

The Use of Rapid Precipitation to Synthesise Multivariate UiO-66 Metal–Organic Frameworks for Photocatalysis

by Ehsan Ezzatpour Ghadim¹, Marc Walker² and Richard I. Walton^{1,*}

¹ Department of Chemistry, University of Warwick, Coventry CV4 7AL, UK

² Department of Physics, University of Warwick, Coventry CV4 7AL, UK

* Author to whom correspondence should be addressed.

Inorganics 2023, 11(12), 455; <https://doi.org/10.3390/inorganics11120455>

Submission received: 18 September 2023 / Revised: 1 November 2023 / Accepted: 15 November 2023 / Published: 24 November 2023

(This article belongs to the Special Issue 10th Anniversary of *Inorganics: Inorganic Solid State Chemistry*)

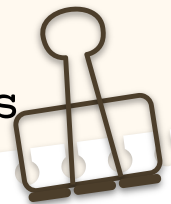
Ehsan's PhD versus MPhil

- What is a Master of Philosophy (MPhil)?
- Under certain circumstances, if a PhD is not completed to the required standard, the University may award an MPhil instead.
- Similarly, if the quality of the upgrade document is not satisfactory, the university reserves the right to downgrade PhD award to MPhil.
- Individual circumstances (disability, anxiety, physical health) can have a significant impact on these processes.



Toolbox for Anxiety

To manage anxiety, it is important to have a set of tools that you can use to keep your anxiety at bay. This section will provide you with a range of strategies to manage your day to day anxiety.



What is CBT?

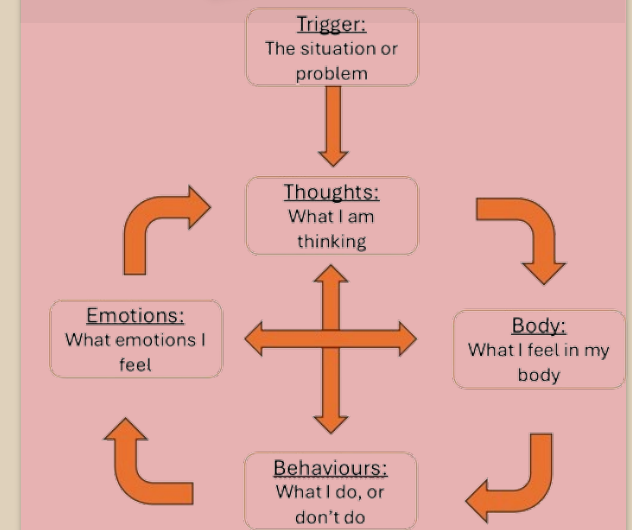
Cognitive-Behavioral Therapy (CBT)

- The key premise behind CBT is that what you think affects what you do and how you feel.
- Ultimately, this affects your body too
- CBT as therapy based on here and now (not the past)

CBT is used for:

- Low self-esteem
- depression
- anxiety problems
- obsessive-compulsive disorder (OCD)
- post-traumatic stress disorder (PTSD)

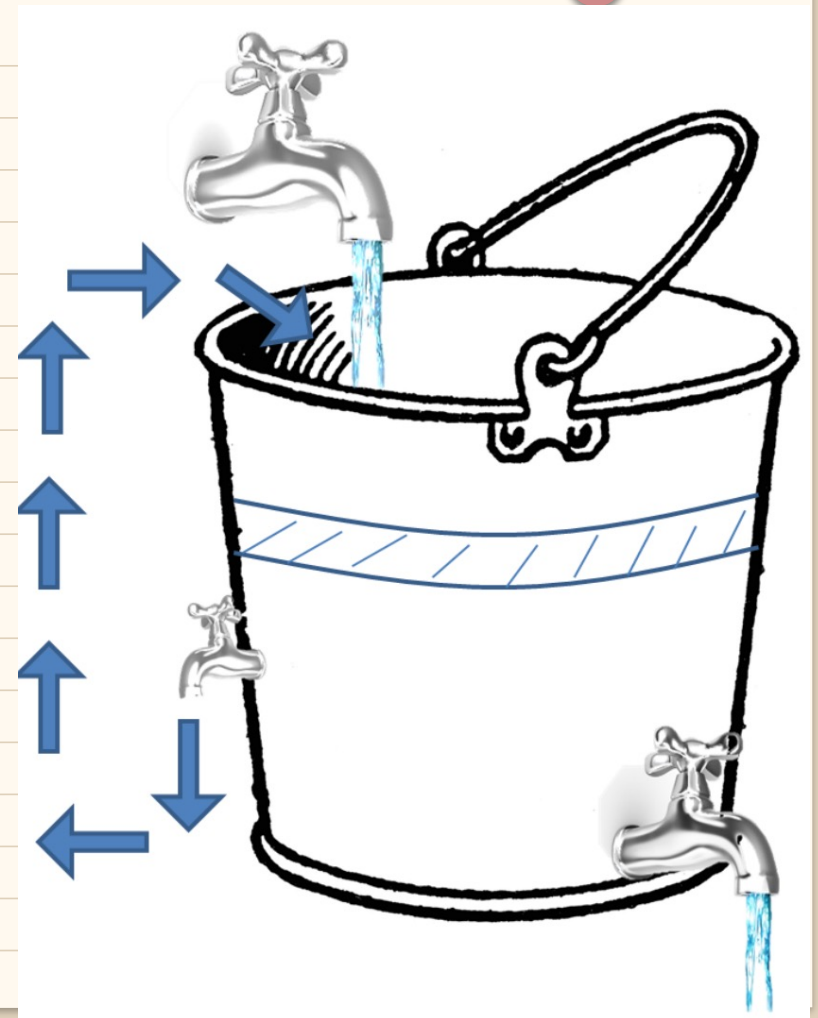
CBT Vicious Cycle




Situation → **Thought** → **Emotion** → **Behavior**
something happens the situation is interpreted a feeling occurs as a result of the thought an action in response to the emotion

Stress bucket

- Imagine your stress as a bucket placed under a relentless water tap. The water pouring in represents our stress levels, slowly filling the bucket.
- The water that is slowly filling the bucket is our stress levels.
- Your job is to prevent water from overflowing the bucket and to manage the flow of the water
- You can do this by adjusting the top tap to let less water in, identifying unhelpful worries, thoughts, and coping strategies that are recycling the stress back into the bucket
- Add more taps to relieve the water, by learning new ways of relaxing, managing anxiety and stress, and looking after yourself



How to tolerate uncertainty?

Tolerating Uncertainty  Hull University Teaching Hospitals NHS Trust

Acknowledge Notice and acknowledge the uncertainty as it comes to mind

Pause Don't react as you normally do. Don't react at all. Just pause, and breathe

Pull back Tell yourself this is just the worry talking, and this apparent need for certainty is not helpful and not necessary.

Let go Let go of the thought or feeling about needing certainty. Tell yourself it is only a thought or feeling. Don't believe everything you think! Thoughts are not statements of fact. They will pass. You don't have to respond to them. You might imagine them floating away in a bubble or cloud.

Explore You can explore the present moment, because right now, in this moment, we are okay. Notice your breathing, and the sensations of breathing. Notice the ground beneath you, look around you and notice what you see, what you hear, what you can touch, what you can smell. Right now. Then shift your focus of attention to something else – on what you need to do, on what you were doing before you noticed the worrying thought, or do something else – mindfully, with your full attention.

- Learn to tolerate uncertainty
- Try APPLE strategy
- APPLE:
 - Acknowledge,
 - Pause,
 - Pull Back,
 - Let go, and
 - Explore



Try APPLE

Not iPhone one please 😊

S.M.A.R.T

SET AN ACTION PLAN TO ACHIEVE YOUR GOALS

S **SPECIFIC:** What do you want to accomplish? Set specific goals instead of being vague in order to identify tangible results.

M **MEASURABLE:** How are you going to measure your progress and results and know you've accomplished the goal?

A **ACHIEVABLE:** What steps do you need to take in order to accomplish your goal? Your goals can be challenging, but still reasonable to attain.

R **RELEVANT:** Why do you want to achieve this goal? Determine if you have the resources to attain the goal and if it aligns with your values.

T **TIMELY:** How long will it take me to achieve this goal? What is my deadline? State a goal in order to hold yourself accountable.

*Don't
forget
your goals*

- Try not to set too many goals at once
- Start with three goals
- One short, one medium and one long-term
- Once you meet these, give yourself more goals to achieve

Look around you and name:



5 things you can SEE

4 things you can TOUCH



3 things you can HEAR

2 things you can SMELL



and BREATHE in and out slowly

WWW.THECALMWITHIN.CO.UK

EXPERT TIP

In a moment of high stress or anxiety, refocus your attention by trying rainbow grounding:

Identify objects around you in the order of each color of the rainbow and *consider other aspects of each object, like its shape, size, and texture.*

RACHEL M. DIAMOND, PH.D., L.M.F.T.

31 DAYS OF MENTAL HEALTH
Day 24

Try Grounding

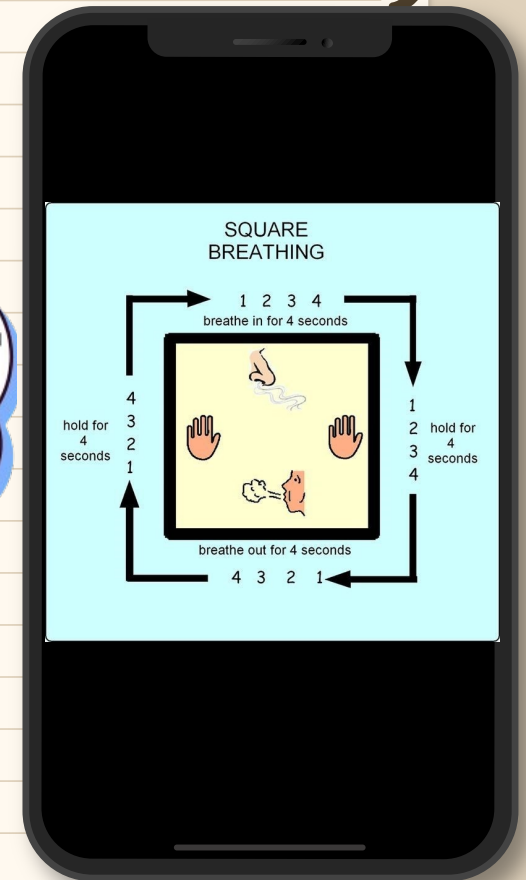
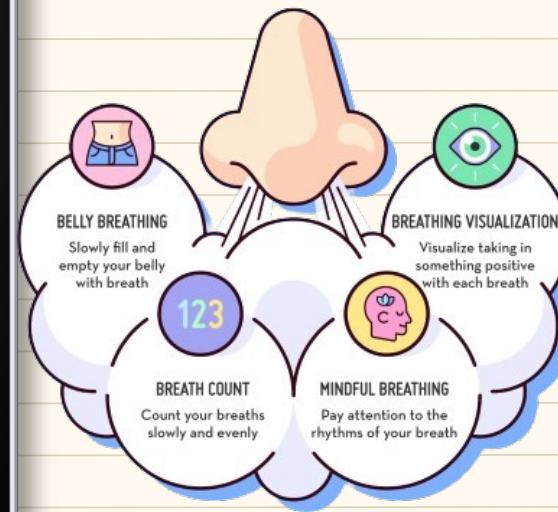
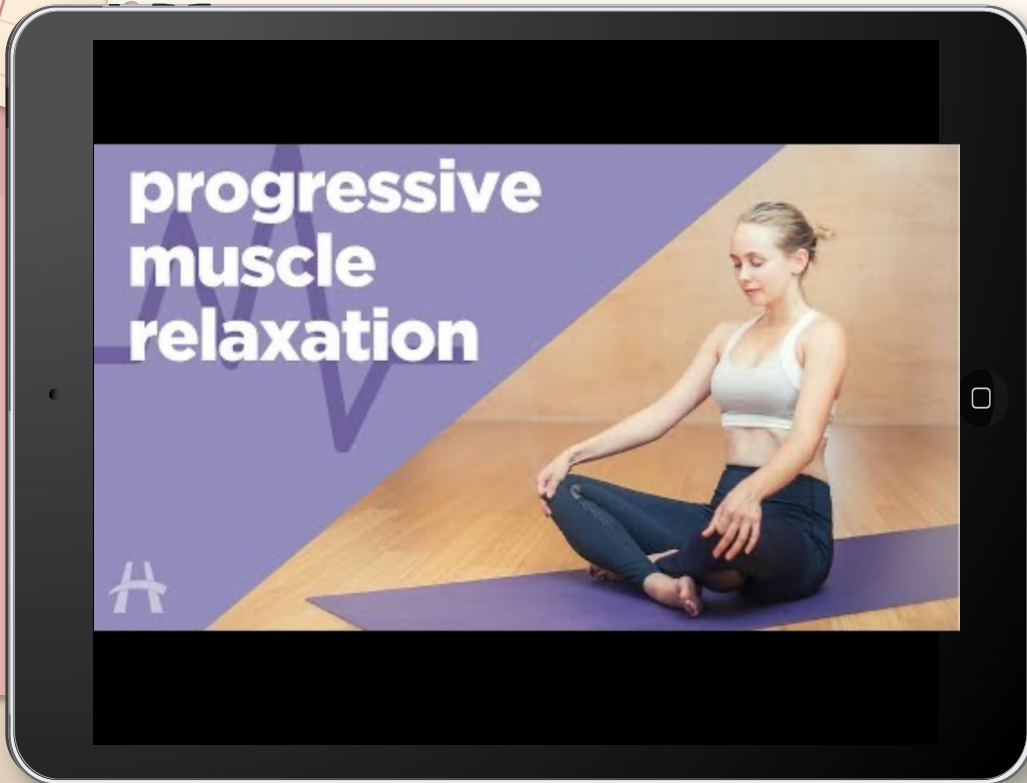
When you are stressed and anxious, grounding exercises can help you manage your anxiety, bring about a state of calm, and feel connected to your body and the world around you.

Yesterday was
history
Tomorrow is
mystery.
Today is a gift

That's why we call
it "the present"

Learn the difference between
mind full Vs. mindful.
Learn to be present and enjoy
the moment.

Don't forget about your breathing!



<https://www.youtube.com/watch?v=kdLTOurs2IA>

Manage your worries

Step 1

**Recognize
your
worries**

Are they hypothetical
or real?

Step 2

**Use Worry
tree and
diary**

Use worry tree for decision
making and diary to capture
your worries

Step 3

**Problem
solve real
worries**

Deal with your practical
worries ASAP or make a plan

Step 4

**Contain
hypothetical
worry**

Be like Frozen -
sing LET IT GO!!!!

Step 5

**Use worry
time**

Use worry time

Learn to classify your worries

- **Hypothetical worry:**

often about the future or what might happen. Worry about things that you do not have control over and cannot do anything about it.

- **Practical (real)**

worries are often about your current situation that you can do something about

TIP:

Hypothetical worry always comes with "**what ifs**"

Worry tree



If you struggle to recognize these

Use a worry tree for decision-making making whether something is hypothetical or practical (for bigger version see next slide)



Use **Grounding** to change the focus of your attention

Source:
<https://www.gmbneas.org.uk/the-worry-tree> 47



Don't forget
to be like
Frozen!

Sing "Let it
go" to your
hypothetical
worry

This is Elsa.
Elsa worries a lot about things that she
don't know whether will ever happen.
Elsa keeps a diary of her worries, and she
decided to let go of her hypothetical worries 48
Now, Elsa is worry-free. Be like Elsa.

Situation	Worry	Intensity of anxiety (0-100%)	Practical or hypothetical worry
Presentation	<u>What if</u> people don't like this presentation?	60%	Hypothetical
Need to book a holiday	Cannot be bothered booking it now	45%	Real (Practical)

Keep a worry diary

● **When you are noticing that you are anxious, ask yourself:**

- What do I think is going to happen?
- What is making me feel this way?
- What bad thing am I predicting?

Worry Time

@Psychological-Wellbeing

① Schedule Worry time

↳ 6pm - 8pm

↳ Max 20 mins

② Write your worries down

↳ Keep a list of your hypothetical worries throughout the day

③ Refocus on the present

↳ Bring yourself back to the here + now

④ Use your worry time

↳ 20 min period to worry/look through worry list.

Worry time will be initially tricky, but practice will make it perfect!

TIP

Use Worry time only for **HYPOTHETICAL** worries, not practical (real)

Worry time

Process



Worry time

- Worry time is a set period each day allocated for worrying
- When we worry during the day, instead of focusing on these worries we postpone them for our allotted worry time

Alternatively



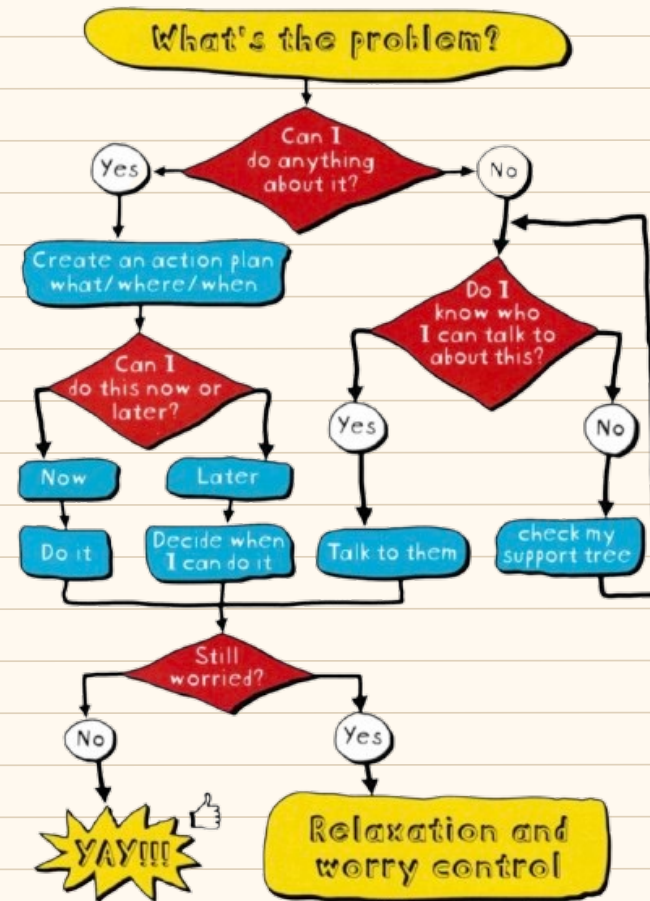
If you do not like paper, you can also use the Worry Time app!

<https://youtu.be/o4W8QqbfCuE>

What to do with practical worries?

Problem Solve it!

- | | |
|--------|----------------------------------|
| Step 1 | Identify the problem |
| Step 2 | Identify potential solutions |
| Step 3 | Analyse strengths and weaknesses |
| Step 4 | Selecting a solution |
| Step 5 | Planning the solution |
| Step 6 | Trying out the solution |
| Step 7 | Reviewing how it went |



Source: <https://www.hopeprojectschools.co.uk/resources/mh-assessment-tools/>

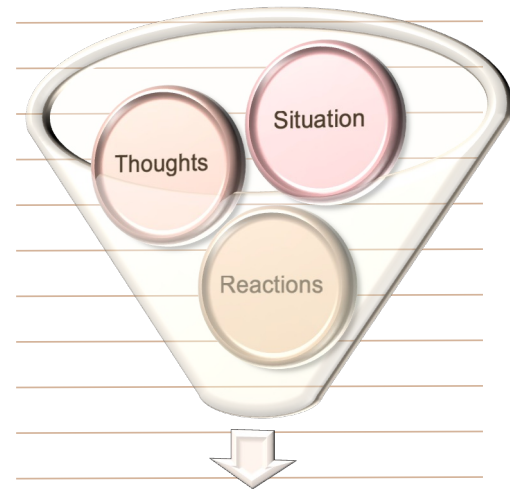
Negative Automatic Thoughts

What are Negative Automatic thoughts (NATs)

We all have thoughts that can have a massive impact on how we feel and behave without us even realising it. When we feel stressed and anxious, we tend to interpret things in an overly negative way while being self-critical and jumping to the worst-case scenarios. We call these thought negative automatic thoughts (NATs)

Main characteristics of NATS

- They are always negative
- They make you feel bad about yourself
- Automatic and uninvited
- Believable
- Biased
- Situation specific



Impact our emotions, body and behaviours

“Man is troubled not by events, but the meaning he gives to them”

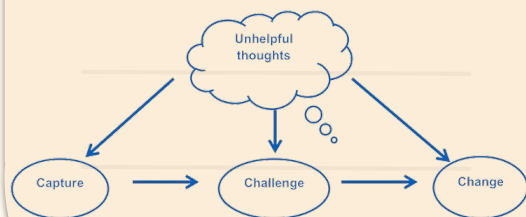


Epictetus

So, why do we have these thoughts?

- It is normal to experience both positive and negative thoughts daily
- Negative thoughts as an evolutionary trait to keep us safe, which help us to identify threats, learn from mistakes and problem-solve
- 90% of all thoughts are repetitive
- Repetitive behaviour leads to habit, and if negative thoughts are repeated frequently, they become habitual.
- **Remember:** It is ok to have negative thoughts

How do we overcome these NATs?



1 Catch them

Identify negative automatic thoughts

2 Challenge them

Challenge those thoughts - look at evidence for and against these

3 Change them

Based on the evidence correct the thoughts so that they no longer have a negative effect on your mood

4 Use RRR strategy

Record your thoughts

Rationalise them

Replace them



What is STOP Acronym?

S: Stop. Whatever you're doing, pause momentarily.

T: Take a breath. Re-connect with your breath. The breath is an anchor to the present moment.

O: Observe. Notice what is happening. What is happening inside you, and outside of you? Where has your mind gone? What do you feel? What are you doing? "What am I telling myself right now?" "What is making me feel this way?" "What bad thing am I predicting will happen?"


P: Perspective. Record the thought going through your mind to get a better perspective.

Stop Strategy can also help!



REMINDER

It is important to recognise your negative thoughts and thinking styles



For full list of NATs -visit

<https://sdlab.fas.harvard.edu/cognitive-reappraisal/identifying-negative-automatic-thought-patterns>



There are many Negative Automatic Thoughts (Notorious bunch)

ALL-OR-NOTHING THINKING: You see things in black-and-white categories. If your performance falls short of perfect, you see yourself as a total failure.

JUMPING TO CONCLUSIONS, another cognitive distortion, is when you make a negative interpretation even though no definite facts convincingly support your conclusion.

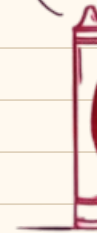
MIND READING, a similar distortion, is when you arbitrarily conclude that someone is reacting negatively to you, and you don't bother to check this out.

FORTUNE TELLING: You anticipate that things will turn out badly, and you feel convinced that your prediction is an already-established fact

The most notorious NAT during the PhD is.... Compare and despair

- It's important to realise that almost everyone compares themselves to others.
- Social comparison theory
- However, comparing yourself with other PhD students will not be helpful
- Every PhD project is unique, the same as every PhD student
- Challenge your thoughts!

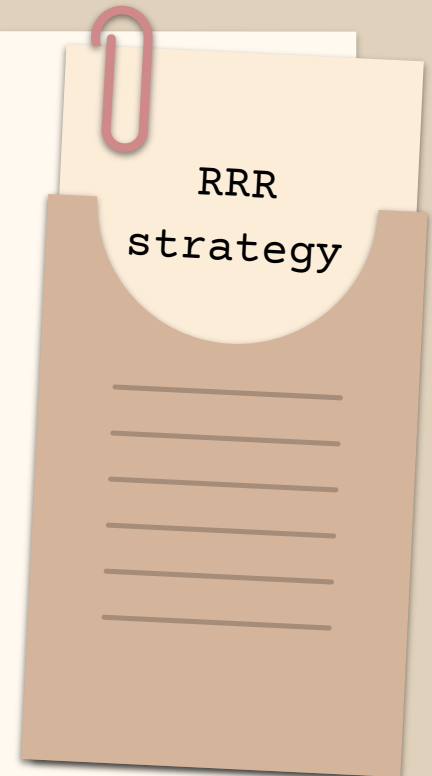
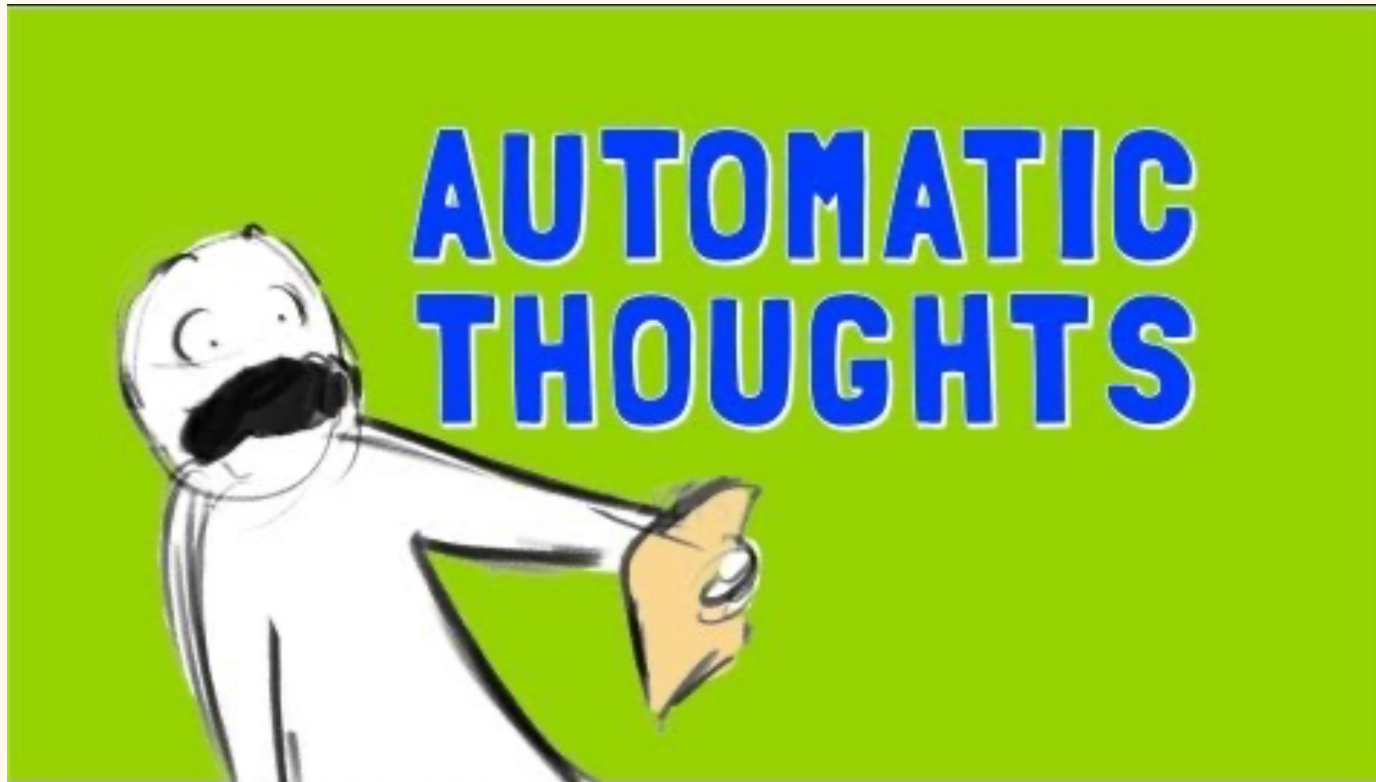
I'm not sharp enough



I'm not colourful enough.

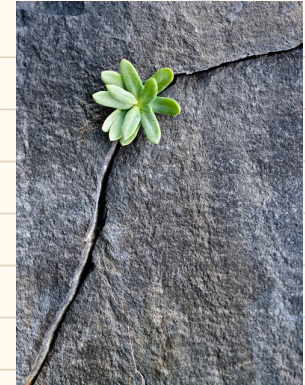
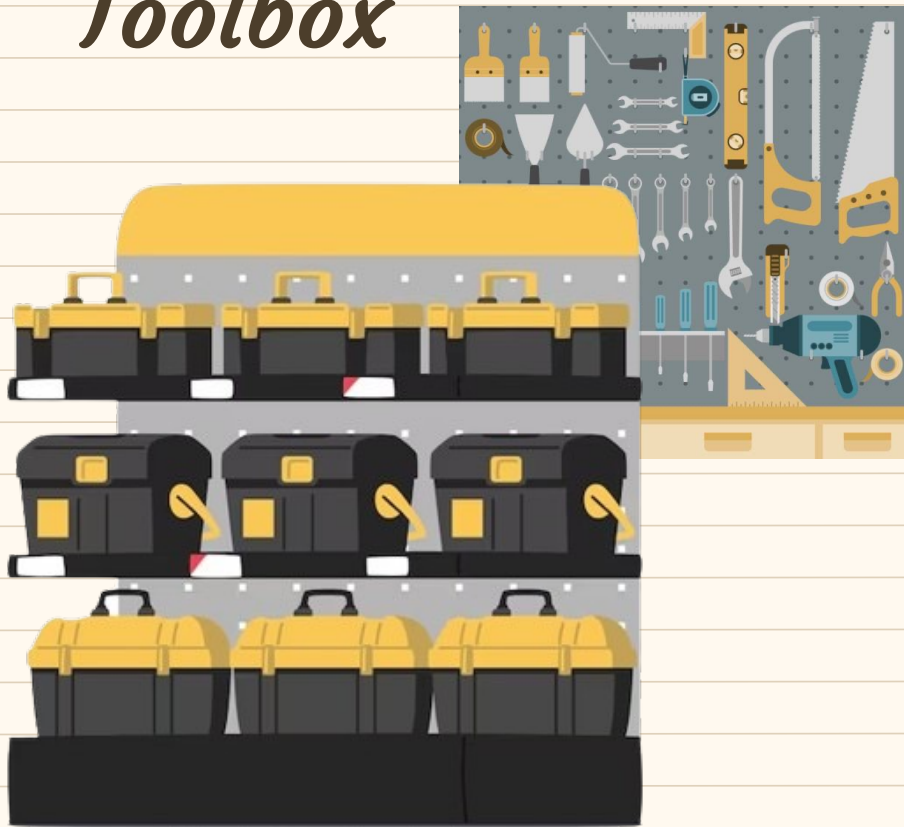


Comparison destroys personality.



<https://youtu.be/m2zRA5zCA6M>

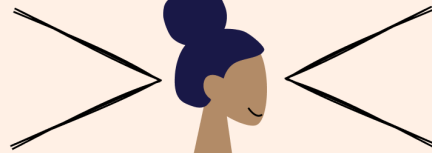
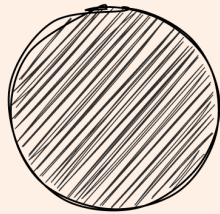
Toolbox



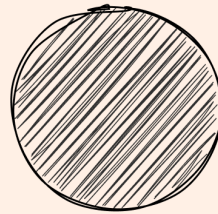
- All these strategies will help you, but it is up to you how much you use them and whether you will use them.
- Remember: Crack-in-the-wall analogy

You Are What You Think

your thoughts



your reality

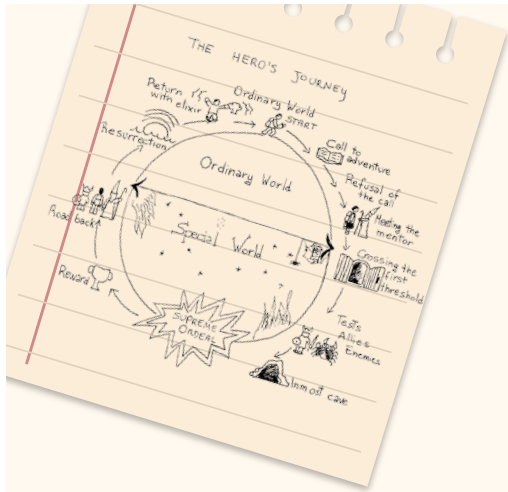


you

- omar itani -

What are
your
thoughts?

Could these
tools be
helpful to
you?

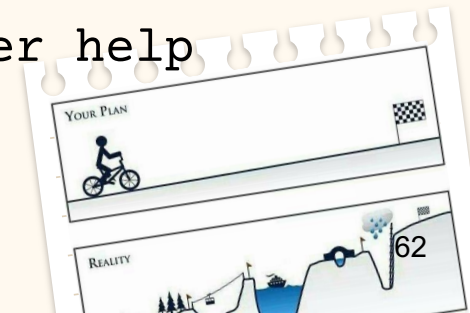


06



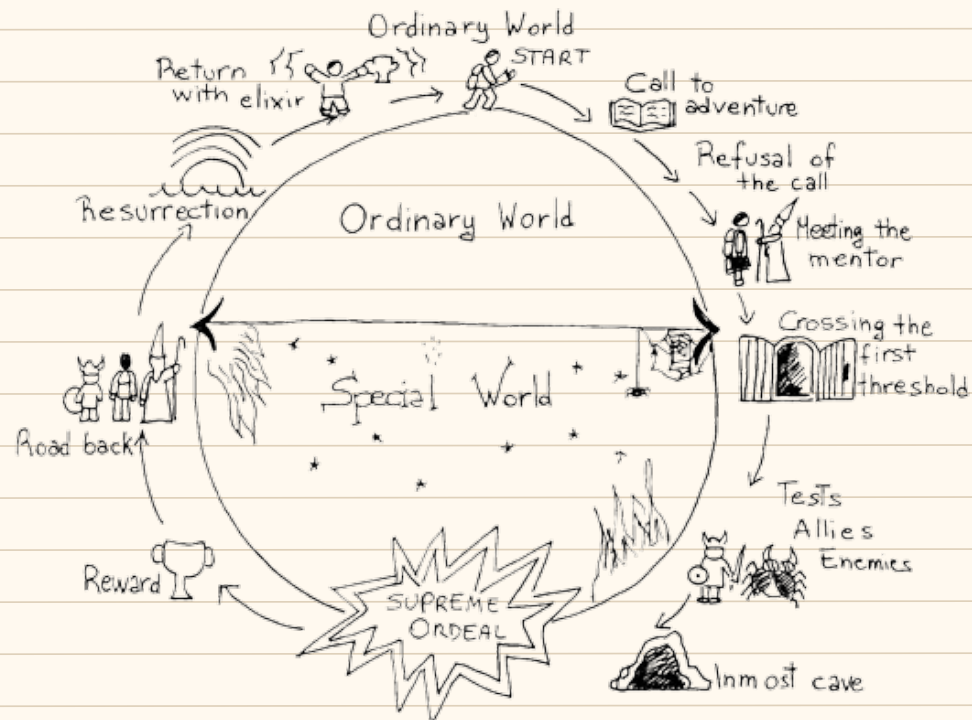
So what now? The last nuggets of wisdom

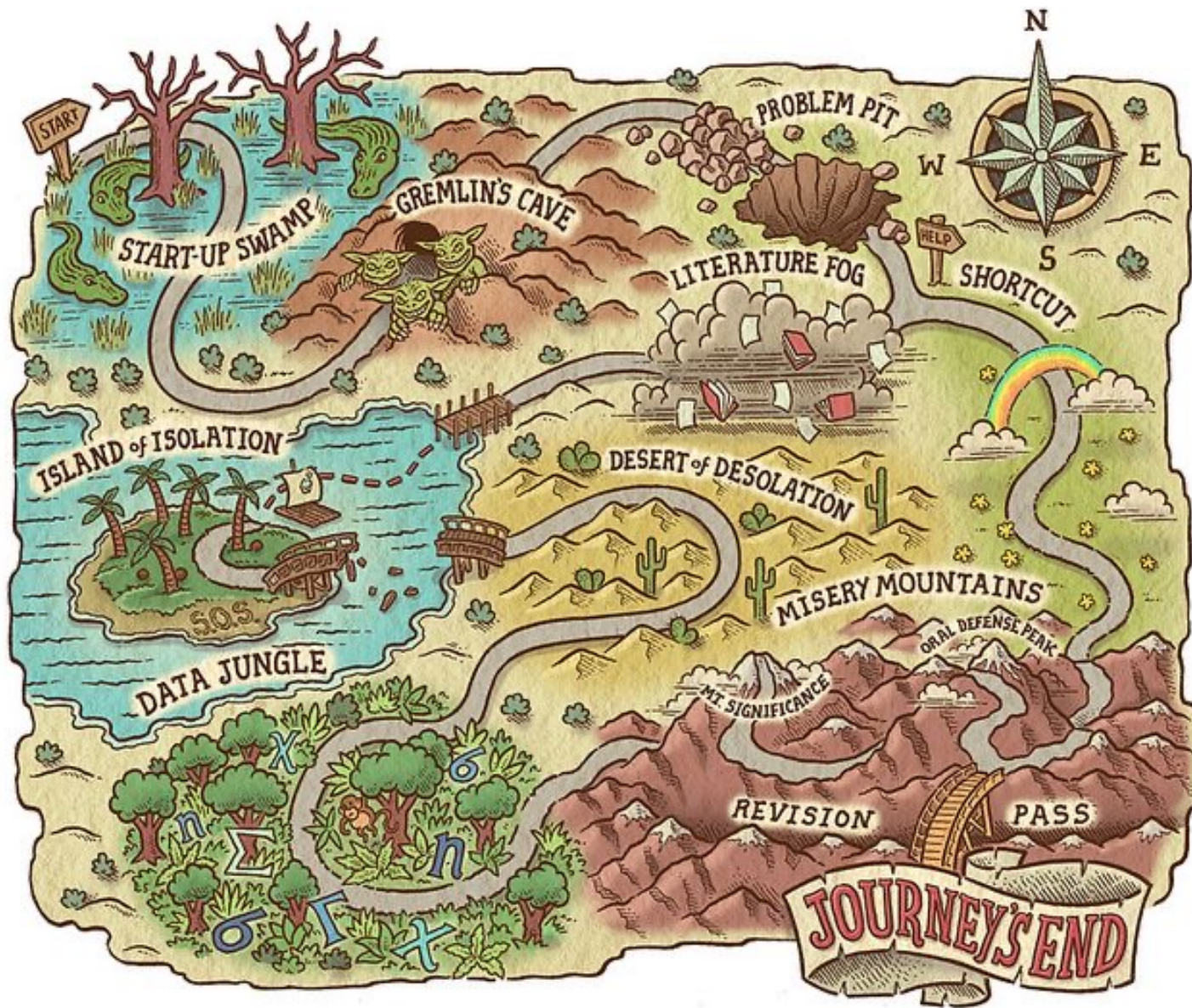
In our final section, we will discuss the importance of help-seeking and introduce a range of community-based support systems you can turn to if you need further help with anxiety.



Every PhD is a hero's journey

THE HERO'S JOURNEY





Resilience

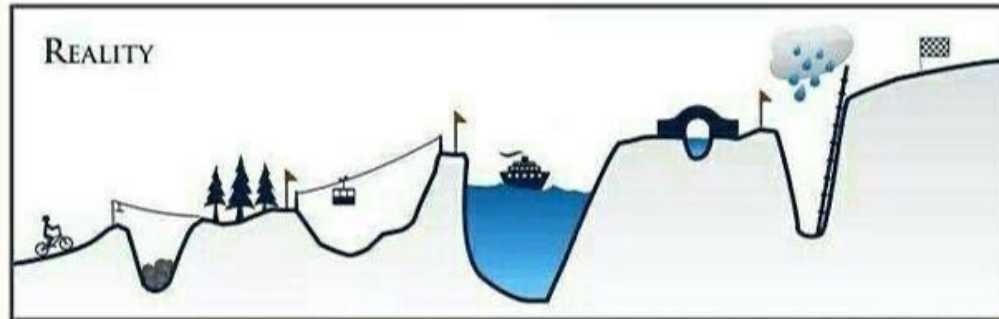
[ri-zil-ee-uhns] *noun*.

the capacity of a person to maintain their core purpose and integrity in the face of dramatically changed circumstances. the ability to not only overcome setbacks but to also move forward.

The world breaks everyone, and afterward, some are strong at the broken places.

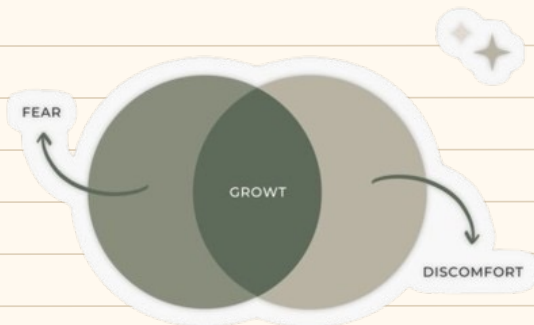
— Ernest Hemingway

Remember

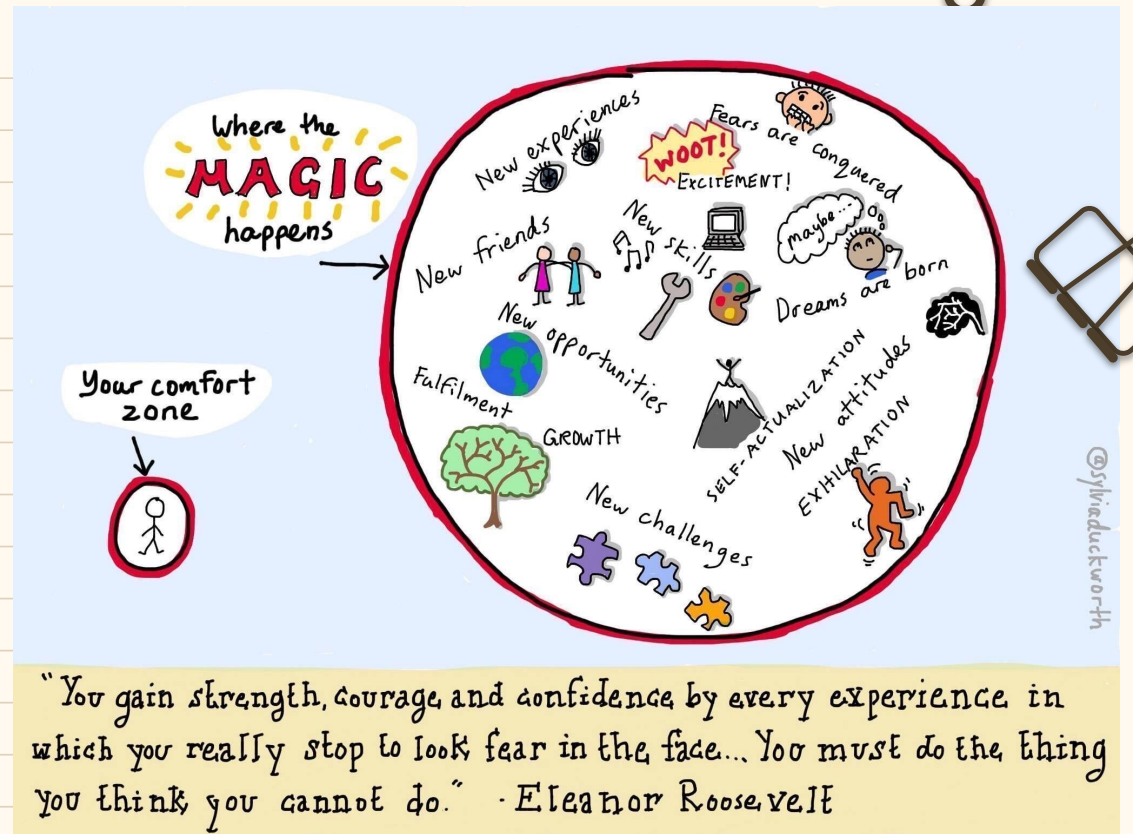


- **Life is not linear; it has ups and downs**
- **Observe your PhD more like a journey or a rollercoaster ride**

Keep realistic expectations



ALL THE MAGIC
HAPPENS OUTSIDE YOUR
COMFORT ZONE



"You gain strength, courage and confidence by every experience in which you really stop to look fear in the face... You must do the thing you think you cannot do." - Eleanor Roosevelt

- There is no magic!
- There is no magic wand to fix mental health quickly
- Looking after your mental health is a **skill**

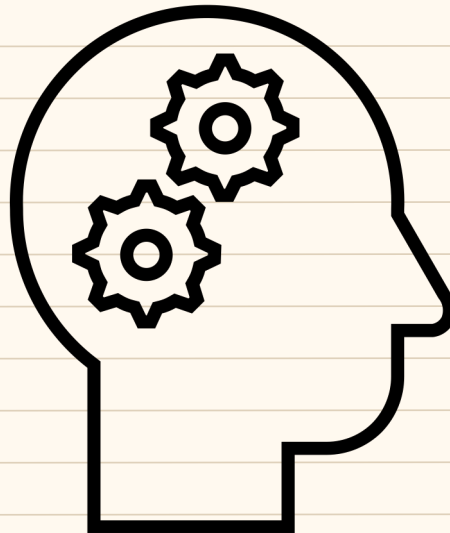
Lifehacks for looking after your mental health

Do activities you really enjoy

Ask for HELP!

Follow your routine

Look at the bigger picture



Learn more about stress, anxiety, mental health and wellbeing

Talk to someone or spend time with your friends

Do E.A.S.Y things to make yourself feel good and keep a sense of achievement

Keep a journal

Be kind to yourself

Help and support are available



01 | Peers and older PhD students

Peers and older PhD students are very good sources of help and support; ultimately, you are in the same boat with them.

02 | Mentors not dementors

Mentors are there to help you brush out those skills that you still need to improve.

03 | Supervisors

Supervisors can be helpful sources of help. But they cannot help you unless you ask them for help. Supervisors are humans too.

04 | Personal Tutor

A personal tutor is also a great source of help. They can advise, provide support and signpost to other sources of help. Do you know your personal tutor?

05 | Doctoral College

Doctoral College offers a broader range of mental health and well-being workshops. The researcher development programme offers a plethora of support

06 | Student Office

The student office is a great source of help and support if you struggle with your supervisory relationship, upgrade, or Viva.

Wellbeing services

Check the Wellbeing services

- Brief 15" Consultation
- Individual support (1:1)
- Group support
- Brief therapy
- Self-help resources
- Email therapy
- Specialist support
- Disability Team

Warwick Wellbeing services offer:

- Practical support
- Emotional support
- Counselling
- Psychological services
- Signposting to other sources of help

Get in touch

📧 Students, please contact us via the [Wellbeing Portal](#)

📞 024 7657 5570

📍 We are at Senate House, ground floor

Opening hours

🕒 Monday to Friday 8.30am-5pm (Friday until 4pm)

🕒 Brief consultations - Monday to Friday 10am - 3pm

Emergency

If you are on campus and require out of hours emergency help please contact [Community Safety](#) on 024 7652 2222 or read our [emergency contact information](#)



Accessible silent study rooms

Accessible study rooms

- Accessible study rooms may be booked by students registered with the University Disability Services
- You can book a maximum of 3 hours in one day
- To book the maximum of 3 hours so that the hours immediately follow each other, for example from 10:00 - 13:00, you will need to book a 1 hour slot and a 2 hour slot

- Example of booking a room for 3 hours from 10:00 - 13:00

Book a 2 hour slot from 10:00 - 12:00

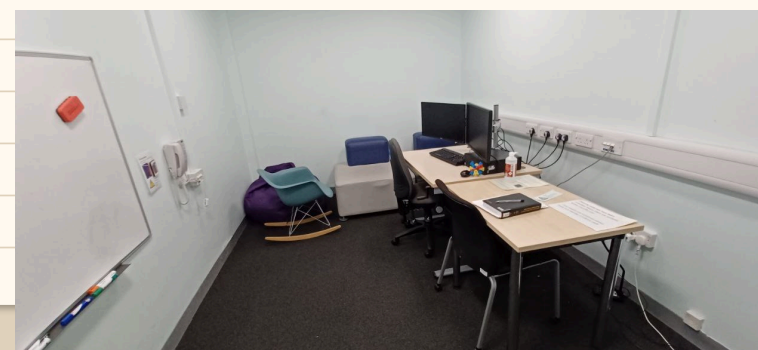
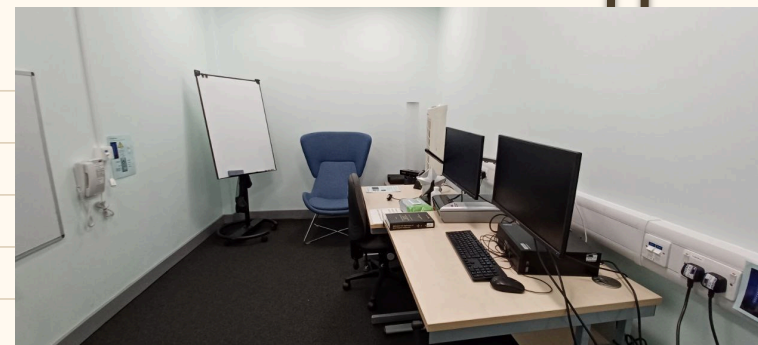
Book a 1 hour slot from 12:00 - 13:00

At the end of each booked slot in your 3 hours, you will have to come out of the room and present your card to the door control outside the room. Failure to present your card to the door control outside the room may mean that your booking is then cancelled as you will appear as a no show and someone else can then book the room during the time that you had booked it for.

- Eligible users can book up to four weeks in advance
- All rooms have as standard a computer with two monitors, a height adjustable desk and an adjustable chair, a lamp, whiteboards and automatic doors
- Please feel free to use dictation software in all rooms across all floors. Study rooms (main Library) 309, 405 and 505 are situated on quiet floors so you may prefer to use 114 or Floor 2, if available

Please contact library@warwick.ac.uk if you require any further support

<https://warwick.ac.uk/services/library/using/accessibility/accessible-study-rooms/>



Help and support is available outside of Warwick

NHS
Coventry, Warwickshire and Solihull
Talking Therapies

Self Referral Urgent Help Professional Referral Search

Home About Us Groups Resources Success Stories FAQ's Contact Us Urgent Help

What is NHS Talking Therapies?

NHS Talking Therapies is for people with mild, moderate and moderate to severe symptoms of anxiety and low mood in Coventry, Warwickshire and Solihull.

<https://www.talkingtherapies.covwarkpt.nhs.uk/>

The University of Warwick Health Centre

- GP as an additional source of support
- Book an appointment with a GP regarding your mental health.
- GP can signpost you to a range of different support organisations.

<https://www.uwhc.org.uk/>



Opening Hours

Term Time

Monday to Friday
9:00 am - 6:30 pm

Vacation

Monday to Friday
9:00 am - 5:15 pm
(5:15 pm to 6:30 pm Main site [Pink / Blue])

Help and support are available outside of Warwick

- **Samaritans: 116 123** - We're here for you 24/7, ready to listen and provide confidential support for any problem you're facing
- **Safe Haven Coventry and Warwickshire: 024 7601 7200**;
Text 07790 777039 (Coventry) or 07852 010146 (Warwickshire).
From 6 pm-11 pm. Web available
- **Mental Health Matters - 0800 616 171** (24 hrs), 0300 330 5487 (from mobile), 0778 620 2242 (SMS)
- **NHS Mental Health Crisis Service 08081 966 798** (24 hrs, 7 days a week).
- **NHS** list of available help and support:
<https://www.covwarkpt.nhs.uk/urgent-advice/>
- **GP**: they have access to all kinds of support Services, which you might find helpful.
- **NHS 111**

Help and support are available outside of Warwick

Relate Counselling

(Students get 40% discount)

<https://relatecoventry.org/>



<https://www.silvercloudhealth.com/>


Sleep station

Support for students affected by sleep difficulties and insomnia.


<https://www.sleepstation.org.uk/>

Your GP needs to make a referral. Otherwise, you will have to pay for the support.


Step-by-step (self-directed) self-help guides and workbooks



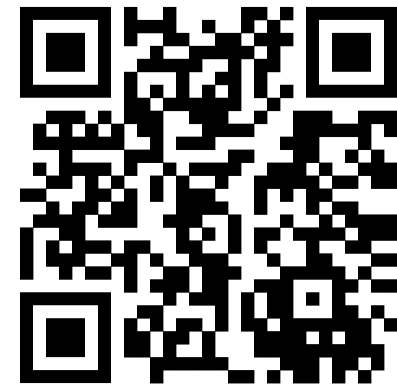
**NHS Coventry and
Warwickshire Talking
Therapies:**



**The University of
Exeter - Student
Wellbeing:**



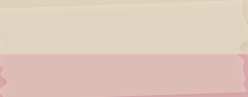
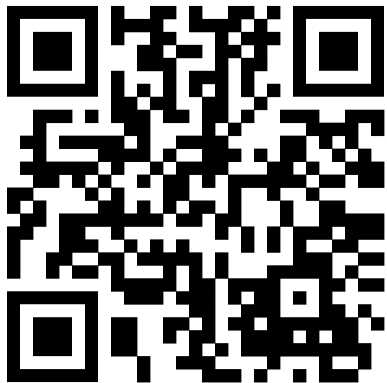
**The University of
Exeter - Low-
Intensity CBT
Workbooks**



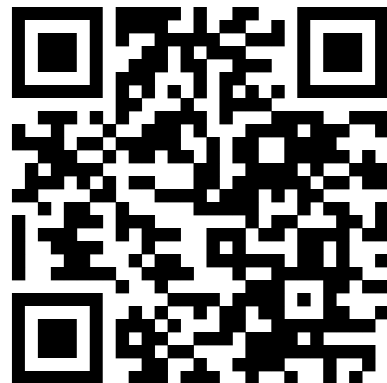
Step-by-step (self-directed) self-help guides and workbooks



Talking Space Plus



Cumbria and
Northumberland NHS



Center For Clinical
Interventions (CCI)



A wee task for you now 😊

Tell us briefly in the chat:

- What is **the key takeaway**(s) you will take from this session?
- What **tools from the toolbox** will you implement in your life?

P.S. —
I hope the key
takeaway is not
going to be Thai,
Domínos, Italian
Indian, or Chinese

In summary



HOW TO LOOK AFTER YOUR Mental Health
#WorldMentalHealthDay
MENTAL HEALTH FOUNDATION

- 1** Talk about your Feelings
- 2** Keep Active
- 3** Eat well
- 4** DRINK SENSIBLY
- 5** Keep in touch
- 6** ASK for HELP
- 7** Take a break
- 8** Do something you're good at
- 9** Accept who you are
- 10** Care for others

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@eleanorbeer



Thank you!

Do you have any questions?