Mahatma Gandhi, the famed leader of India's nonviolent independence movement, once described depression as a dryness of the heart that sometimes made him want to run away from the world. The Dalai Lama referred to it as the thoughts and emotions that undermine the experience of inner peace. Writer John Keats told of the hopelessness that depression created in his soul: "If I were under water, I would scarcely kick to come to the top."

Every part of the mind and body can feel the weight of depression. It hijacks thoughts and feelings, influences behavior and choices, eats away at physical and mental health. It can be a serious medical illness that steals happiness and overshadows sufferers with darkness. It touches all of us, either directly or indirectly. Each year, twenty-five million Americans have an episode of major depression; many have experienced it before and will again in the future.

Depression has many faces. Some depressed people function relatively normally throughout their lives despite ever-present, low-grade feelings of chronic unhappiness. Others become incapacitated with rolling bouts of self-loathing thoughts and murky mazes of negative feelings that clog the mind. Many discover that activities that once felt playful, pleasurable, or satisfying now bring no happiness and are difficult to do. The ability to control thoughts and actions seems lost.

You may have experienced depression in the past. Or you may be depressed right now. Perhaps you have felt its spirit-sapping symptoms—difficulty concentrating, lack of motivation, boredom, fatigue, anxiety, insomnia, irritability, guilt, feelings of worthlessness, emptiness, and sadness, and the incessant nagging of automatic negative thoughts—and have even considered suicide.

"What's the point of living?" you may ask. "No one can help me. Nothing's ever going to change." You may feel so full of
despair that, like Keats, you would scarcely kick to come up from under water.

Your feelings are very real. When you are depressed, you feel

But that doesn’t mean your situation is hopeless.

Here’s the thing about depression: It tells you lies. It makes you believe that thoughts are facts. It can even take away every last ounce of hope in your soul.

In the following pages, I’ll show you why there is so much reason to feel optimistic. I’ll explain how huge advances in mindfulness, neuroscience, and extensive studies of the depressed brain have brought about major breakthroughs in what we know about depression’s triggers and treatments. I’ll show you how you can use a variety of straightforward tools and techniques to break depression’s hold on you and begin to uncover the happiness that is the essential core of who you truly are.

There is hope. You can feel better. By following the steps in this book, you can take back control of your mind, your mood, and your life.

Your Brain’s Own Natural Antidepressant Power

When you hear the word antidepressant, you probably think of a pill: a medication used to treat your illness. Medications are one kind of antidepressant. But they’re not the only kind.

Science is now showing that we also have natural antidepressants within our brains. Natural antidepressants are mindful mindsets (thoughts and behaviors) that build us up instead of tear us down and allow us to help ourselves improve our own moods.

These natural antidepressants can be gathered into five main categories:
1. Mindfulness: a flexible and unbiased state of mind where you are open and curious about what is present, have perspective, and are aware of choices.

2. Self-compassion: a state of mind where you understand your own suffering and use mindfulness, kindness, and loving openness to hold it nonjudgmentally and consider it part of the human condition.

3. Purpose: a state of mind where you are actively engaged in living alongside your values, are inclined toward compassion for others, and possess an understanding of how your existence contributes value to the world.

4. Play: a flexible state of mind in which you are presently engaged in some freely chosen and potentially purposeless activity that you find interesting, enjoyable, and satisfying.

5. Mastery: a state of mind where you feel a sense of personal control and confidence and are engaged in learning to get better and better at something that matters.

By developing these five natural antidepressant fundamentals, which I will show you how to do step by step, you can strengthen your brain’s ability to act as its own antidepressant that can be as powerful as—or even more powerful than—the antidepressant medications.

Because you are alive, anything is possible.

—THICH NHAT HANH, VIETNAMESE ZEN BUDDHIST MONK AND TEACHER

A Note About Antidepressant Medications

I recognize the value of antidepressant medications, and I
believe they can play an important role in the treatment of clinical depression. I’ve seen pharmaceuticals be lifesavers for some depressed patients, giving them the help they need to engage in necessary psychological treatment.

However, I also believe these drugs are heavily overprescribed and overused. For many patients, antidepressants cause more harm than good. They can create a cascade of mental health problems that go far beyond the depression they were prescribed to treat. Too many people get caught in the trap of jumping from one drug to the next or taking multiple prescriptions in order to offset serious side effects caused by individual drugs.

As I see it, the problem with current pharmaceutical treatments is that they haven’t caught up with recent discoveries in neuroscience.

A growing number of health care professionals are starting to integrate current science in the decision-making process when treating depression. They are beginning to look at the illness in a science-based, whole-person approach. But still, too many patients, health care providers, researchers, medical organizations, and government-funded agencies rely on outdated information to make decisions and recommendations about the use of antidepressant medications. They operate from the decades-old assumption that mental health can be restored to people with depression only by using drugs to “balance” the chemicals in their brains. That assumption is no longer accurate.

In recent years, research that you’ll soon learn about has revealed so much about natural antidepressants, mindfulness, cognitive-behavioral therapy, and other nondrug approaches to treating depression and promoting long-term healing. Antidepressant medications are still a useful tool for treating depression, but they’re not the only tool, and in many cases,
they’re not the most effective tool. It’s important to be informed about medication and make the decision to integrate them or taper off of them as part of your treatment in conjunction with your doctor.

Whether you are on antidepressants and they’re working for you, you’re on them and want to get off of them, or you are not on antidepressants at all, the work that you do through this book is going to support your ability to get better at overcoming the depressive cycles.

THE STATS ON ANTIDEPRESSANT MEDICATIONS

- About 11 percent of Americans over the age of twelve take antidepressant medication.
- More than 60 percent of Americans taking antidepressant medication have taken it for two years or longer; 14 percent have taken it for ten years or more.
- Antidepressants are the third most common prescription drug used by Americans of all ages.
- In the past twenty-five years, the rate of antidepressant use in the United States has increased nearly 400 percent.

Source: US Centers for Disease Control and Prevention (CDC)

A Mindfulness Approach

Mindfulness is the foundation on which everything in Uncovering Happiness is built. Put quite simply, mindfulness is awareness. It is the action of intentionally using your five senses to bring complete attention to your experience of the present moment, while letting go of judgments and biases. Although it is rooted in Buddhism, the practice of mindfulness has undergone extensive scientific study in the West and has been shown to be a powerful, effective way of eliciting psychological wellness. It has been used with great
success to help people with depression, anxiety, stress-related disorders, chronic pain, addictive behavior, and even chronic stress. Mindfulness is one of the ways that we can take advantage of the brain’s plasticity (explained on the next page) in order to strengthen our emotional resilience.

In recent years, psychology researchers have found the practice of mindfulness to be particularly helpful in reducing the risk of relapse in people who have experienced depression. Many studies have found it to be a significant alternative to or support for medication.

Mindfulness works by interrupting the conditioned cycle of thoughts, emotions, sensations, and behavior that mire people in a downward spiral of depression. Using mindfulness allows us to transform our harsh inner critics to voices of support by increasing the capacity for self-compassion that nurtures self-worth and resiliency.

A Self-Compassion Approach

While mindfulness is the foundation for *Uncovering Happiness*, mindfulness on its own is often not enough. The other foundation on which this program rests is self-compassion: the recognition of our own suffering with an inclination to help ourselves. Once we become aware that we’re struggling, self-compassion allows us to activate the brain’s self-soothing system. This inspires a sense of safety and courage to engage in the behavioral changes necessary to move toward healing.

As humans, we're wired with an automatic negativity bias, paying more attention to what's negative than positive. This wiring is for survival: if danger is lurking, we want to have a quick-response system to keep us safe. The problem is that this same negativity bias turns inward, and we can be too hard on ourselves. With depression, these voices really dig in, striking where we’re most
vulnerable and evoking feelings of shame, inadequacy, and unworthiness. The cultural stigma of depression as a weakness only feeds these feelings. Part of self-compassion is to recognize that we're not alone with this, it's not something to be ashamed of, and that emotional struggles are a part of the human condition.

Science is now revealing that self-compassion is a key transformative and protective mindset for decreasing anxious and depressive symptoms. The alchemy of mindfulness and self-compassion transforms vulnerability so that instead of it being something we fear will spiral us down, it becomes an upward spiral of self-worth and resiliency.

It may seem difficult to do, but it's a skill that anyone can learn.
Think of this book as your compassionate guide. Even after you’ve read it from cover to cover, it will remain with you, ready to help guide you through the ups and downs that are part of this unfolding life.

Based in Science

The techniques, tools, and strategies in this book are grounded in a wealth of exciting new scientific knowledge. For decades, psychological treatment was based on observations about people’s behaviors, choices, thoughts, and explanations. But the development of technological resources such as functional magnetic resonance imaging (fMRI) has opened windows into the human mind, allowing neurological researchers to understand brain function in amazing new ways that have never been possible before.

Using advanced scientific technology, researchers have discovered, for example, that by using certain cognitive and mind-body techniques, we actually have the ability to change our brains. This is called neuroplasticity. Until about the 1970s, scientists believed that once the brain finished undergoing the growth and development of childhood, its structure, pathways, and connections were pretty much set in stone. But researchers began to challenge that assumption, and they designed studies to test it. (I’ll tell you about some of the fascinating ones later in the book.) Soon the idea of the “static brain” was replaced by the belief in the plasticity of the brain—science was showing that the brain can actually be rewired through the actions of neural processes, behaviors, and the environment. This was amazing news for people with depression, anxiety, and other emotional health problems, because it demonstrated the potential for the parts of the brain associated with emotions to be made more resilient. We now know, for example, that we can actually grow
new nerve connections and activate areas of the brain associated with awareness, learning, memory, and empathy. We can strengthen the parts of the brain associated with resiliency just as we can strengthen the muscles in our bodies. What's more, we can actually deactivate areas of the brain that rev up when we experience the automatic negative thoughts that fuel depression.

What it all comes down to is this: we can build up the sections of the brain that protect us from depression, and slow down the sections that foster depression. Doing this allows the brain's own natural antidepressants to emerge, grow stronger, and contributes powerfully to the resiliency that we need to enjoy good times, survive difficult times, and open us up to lives that truly feel worth living.

**Unlearning Helplessness**

This book also addresses another crucial area to overcoming depression: unlearning the *learned helplessness* that influences the behavior of so many people with depression.

Learned helplessness is a mental state in which we are unable or unwilling to solve a problem even when there is a viable solution within reach. It occurs when our brains come to the conclusion that we don't have control over problematic situations. Being depressed induces a sense of learned helplessness that can surface again in the future, when depression reoccurs. Learned helplessness teaches us to stop trying to help ourselves *even when we are actually capable of it*, and it prevents us from learning new strategies to prevent relapse *even when those strategies exist*. It is another lie that depression forces us to believe.

Yet just as helplessness can be learned, it can be unlearned. We can begin replacing learned *helplessness* with learned *helpfulness*. 
Science shows that we can actually grow new neural connections in areas of the brain that process emotional pain, empowering us to recognize our own helplessness and replace it with more constructive thinking and self-helpful behavior.

Once we identify and understand the helplessness habits we fall into during periods of depression, we can challenge and change them, replacing them with new behaviors of helpfulness that allow us to solve problems and pull ourselves away from depression. By unlearning learned helplessness, we can unearth the inner strength we need to make choices that lead us out of the self-perpetuating loop of helplessness and depression.

The Format of Uncovering Happiness

The following pages integrate the findings of hundreds of academic studies and dozens of interviews with mindfulness teachers, psychologists, neuroscientists, and researchers. (See the notes section of the book for citations.) It also includes stories from some of the people I’ve worked with who have suffered the burden of depression and who have used the techniques in this book to find their own personal pathways to healing. All of these stories are shared with permission, and pseudonyms have been used to protect each person’s privacy.

Uncovering Happiness has three parts.

In part 1, I’ll lay out the groundwork for cultivating what I call an antidepressant brain. We’ll cover the following topics and more:

- what depression is, and why it happens;
- what the depression loop is, how it works, and how we can interrupt it;
• why having depression once or twice or even repeatedly for years does not mean you are destined to face a future of chronic depression;
• how subconscious conditioning feeds depression;
• why depression is not your fault;
• how to break the habits that contribute to and sustain depression;
• how a transformative method is changing the way we think about human potential; and
• how to stop one very specific force from allowing us to fall into depression again and again.

In part 2, we’ll look at the five essential natural antidepressants: mindfulness, self-compassion, purpose, play, and mastery. I’ll explain what these are, how they can protect you from depression, how they inspire real happiness, and how to develop them in your life.

Part 3, “The Natural Antidepressant Tool Kit,” is a fantastic resource that will give you an array of tools, techniques, and practices to support you throughout your journey. Here you’ll find guidance on creating your own antidepressant “cheat sheets,” forming your own “get-well team,” building healthy habits that you can stick to for the rest of your life, and becoming part of a supportive mindfulness community.

Where I’m Coming From

Mindfulness changed my life; in fact, it may have even saved it. Looking back, I can trace my ups and downs with depression to as early as childhood. In youth, depression can often show up as anger, and my family would describe me during those years as defiant, willful, and angry. Imagine a chubby, freckle-faced
kid with a frown and his arms crossed over his chest—that was me. My parents divorced when I was six years old, and I grew up searching for ways to ease the feelings of loneliness and emotional pain. During high school, I started experimenting with alcohol and marijuana as an escape, and in college I discovered psychedelics and amphetamines. The drugs helped me get away from the internal experience of loneliness and grief that had resided within me since childhood.

While living in San Francisco during my twenties, I built a successful career in sales. Yet at night, I lived fast and partied recklessly, abusing drugs and alcohol with a like-minded group of drifting souls. Eventually my despair and shame grew so deep that I isolated myself from my family and friends and lost myself in my addictive behaviors.

Occasionally, in some of the seedier bars I frequented, I would come across a mess of a man who was so strung out that he repulsed me. I remember saying to my friends, “God help me if I ever turn out like him.” I thought, since I was managing to succeed at work, I was in control of my self-abusive behavior. But one night, after many hours of partying, I saw the truth of who I had become. When I found myself slumped beside that man and his equally dazed companion in the back of a broken-down limousine, I saw my own reflection in his wasted face and realized I was throwing away my life. I jumped out of the limousine, determined to transform myself.

It wasn’t easy, and I admit that I hit a few bumps as I set out to start my life over. My family urged me to spend a month away at a retreat center. During that time, I questioned everything I did and all that I believed. Answers began to come to me as I started to practice mindfulness: I wanted to stop abusing my body. I wanted to find the purpose and meaning of my life. I wanted to be happy.
I wanted to heal myself, and eventually, I realized, I wanted to help heal others who faced some of the same challenges that had nearly broken me.

I went back to school and entered into a playful adventure with mindfulness. I focused on living a more purposeful life, surrounding myself with supportive people and replacing destructive behaviors with healthy choices that fulfilled me. I started to create a life of meaning and purpose that allowed me to feel whole. I was starting to uncover happiness.

After finishing my training as a clinical psychologist, I began running mindfulness-based stress reduction (MBSR) and mindfulness-based cognitive therapy (MBCT) programs focusing on helping people relate to stress better and not relapse into depression. During the years that followed, I saw how effectively mindfulness-based therapies helped people reduce stress and heal emotionally. I began training therapists, physicians, educators, and business people in the combination of mindfulness and mental health. I went on to coauthor *A Mindfulness-Based Stress Reduction Workbook* and authored *The Now Effect* and *Mindfulness Meditations for the Anxious Traveler*. I designed programs to reach a variety of different people, including Mindfulness at Work® for corporations, Mindful Compassion Cognitive Therapy (MCCT) for depressive relapse, and co-designed the CALM (Connecting Adolescents to Learning Mindfulness) program with my wife, Dr. Stefanie Goldstein. As I continued with my own practice and learned from the practice of my clients and students, I discovered powerful essential antidepressant elements that had never before been explicitly integrated into the current mindfulness-based therapies for people with depression.

Throughout this journey, I’ve gone through profound shifts in how I relate to myself and the world. I’ve learned that I don’t have to be enslaved by the story of the past, and I certainly don’t need to believe everything I think. I have a deep sense that I am worthy of love, and that often comes through my own courage
in being vulnerable with myself and others. I don’t get caught as often in the trap of “What will people think?” but side more with the belief that “I am doing the best I can at the moment, and I am enough.” I have also noticed that life has its ups and downs, and I can’t control the conditions that happen to me in any given moment, but I can choose, with awareness, how to respond to them.

I now know that uncovering happiness is not about simply being drunk on life but is found in a profound and enduring experience of learning how to lean into loving ourselves and others in good times and in bad. It’s a happiness based on a sense of common humanity, connectedness, and purpose. I notice feeling more loving and peaceful with myself and others—not all the time, but much more than before. While I still get hooked at times by self-judgments and negative thoughts, I have learned to be grateful for the good moments and a bit more graceful during the difficult ones, knowing that all things in life come and go.

The guidance in this book is not a miraculous panacea—it can’t cure depression overnight, and each step does take effort to implement into your life. I can’t promise you that reading Uncovering Happiness will make all of your depressive symptoms disappear instantly. But I can promise that the guidelines within these pages will give you the tools you need to begin to break the cycle of depression and release yourself from its grip.

Whatever your experience with depression has been—whether you just have the blues, you have chronic low-grade unhappiness, or you’ve experienced one or more major depressive episodes—you have the power to change the way you feel. By understanding how depression works and making the choice to nurture your natural antidepressants, you can become stronger and more resilient.

Trust yourself; you can cultivate an antidepressant brain and uncover happiness.

If you’re not completely convinced that you can take steps to
help yourself feel better, try putting aside that judgment. That’s your depression talking. Try your best to ignore those doubts for now and take a leap of faith. Soon the experience of truth will begin to crowd out the lies of depression.

Ready? Let’s get started.

Understand the Depression Loop

Clint, a middle-aged executive, had experienced bouts of anxiety and depression off and on since childhood. Raised by an overly critical father, Clint grew up believing that having negative emotions was a sign of weakness, so he buried them deep inside. When Clint was a child, his father would call him a sissy and embarrass him in public when he cried. Later in life, when Clint felt sadness or other difficult emotions, he would close himself down and become numb, avoiding his partner, and burying himself in work to try to hide from his feelings. Clint didn’t realize it at the time, but he was caught in a depression loop: complicated feelings (such as sadness) would trigger reactionary thoughts (negative self-talk) and sensations (emotional numbness) that would in turn cue certain behaviors (withdrawal from loved ones and escape to his computer and his work). Anxiety and hopelessness left Clint feeling pessimistic that he’d ever emerge from his
depression, creating a negative feedback loop that made him feel trapped.
Working together, Clint and I focused on understanding the cyclical nature of his responses to his feelings. Clint began to see and recognize his own personal depression cues. He began to learn to step outside of his habitual mindsets when uncomfortable feelings emerged in order to take a closer look at those feelings and the reactions they elicited. He identified triggers, thought patterns, and behaviors that were associated with his depressive experiences.

Clint had a breakthrough experience one morning. After hearing some bad family news, he paid attention to his reactions and noticed himself becoming numb and withdrawn. He felt an urge to head to his computer to work, as he had so often before. He saw himself trying to flee from his sadness instead of allowing himself to feel it. This time, though, things were different. Because he had learned how to recognize the activation of his familiar depressive loop, he was more aware and able to interrupt it. He was able to make the choice to step out of the cycle and let himself feel sad rather than hiding from the feeling. As he gave himself permission to experience an uncomfortable emotion, the tension in his body dissipated, and within a half hour, the sadness passed. Clint felt elevated by a sense of freedom he hadn’t experienced in quite some time. By recognizing his own personal depressive stimulus, Clint was able to change his response and avoid a negative spiral that would lead him down the path of negative feelings, thoughts, sensations, and behaviors.

Learning to identify the cyclical nature of the depression loop and to recognize your own depression cues, as Clint did, is crucial for uncovering happiness. We’re going to focus on that in this chapter, because knowing what triggers your own depression loop is a powerful first step toward being able to overcome depression. Having awareness gives you space to make choices: instead of responding automatically and without
thought, you can make
kind, informed, mindful decisions that can protect you from depression and open you up to possibilities you didn’t see before.

The Truth About Depression

Having a clear understanding of depression, what depression is or isn’t, helps sharpen your ability to recognize it in your own life, acknowledge how it affects you, develop proactive responses to your own personal depressive cues, and lay the groundwork for cultivating a brain with natural antidepressants.

Let’s begin with what depression is.

First and foremost, it is an illness—and like many illnesses, the experience of depression can vary from person to person. Some people have major depression, striking the brain just as an acute case of pneumonia strikes the lungs. People with this
FINDING THE
FREEDOM IN THE
“SPACE”

As you work through the steps in this book, I hope you’ll keep in mind a wonderful quote from Viktor E. Frankl, an Austrian neurologist, psychotherapist, Holocaust survivor, and author of the book *Man’s Search for Meaning*: “Between stimulus and response there is a space, in that space lies our power to choose our response, in our response lies our growth and our freedom.”

The space between stimulus and response is the space in which automatic, unconscious thinking often takes over. When a stimulus appears, we may initially think we have no choice in how we respond to it. Someone cuts us off in traffic, and we respond with anger. A critical remark from an employer fills us with shame. But even though it may feel as if those responses are inevitable, they are not. There is a space between stimulus and response, and within that space we have the freedom to choose. That philosophy is at the very core of *Uncovering Happiness*. Start to recognize the space between stimulus and response in your everyday life. Once you become aware of that space, we can use it to make reasoned, conscious choices.
depression experience extreme symptoms that can severely curtail their normal everyday functioning for varying amounts of time. Others have less serious symptoms that are more akin to the allergies that may last for weeks, months, or years, interfering with their happiness but not necessarily preventing them from living a functional life.

Because depression is not talked about openly, many people are ignorant about it. People sometimes think that depression is made up, a kind of chosen laziness, lack of self-discipline, or character flaw. But they’re wrong. Thanks to advances in brain imaging, we know that the brains of people who have depression actually look different on scans than the brains of those who don’t, just as the lungs of people with pneumonia look different on scans than those of people with healthy lungs.

Depression causes a range of symptoms that interfere with daily life, happiness, and the ability to sleep, work, eat, make decisions, socialize, and enjoy pleasurable activities. It is so prevalent that nearly 7 percent of adults in the United States will face an episode of major depression this year. Millions more will experience a sense of chronic unhappiness.

There is no one cause for depression. It can be the result of someone’s genetics, difficult experiences early in life, or both. Episodes of depression can be triggered by outside events and situations such as a physical or emotional trauma, the loss of a loved one, an accident, a natural disaster, a change of seasons, hormonal changes, pregnancy or childbirth, stress, relationship problems, unemployment, and a host of other causes. Or they can have no visible trigger at all.

Like most other illnesses, depression can be treated successfully in a variety of ways, including medication and several kinds of therapy. Even the most severe cases of depression can improve with and at times be prevented by treatment.
Now let’s consider what depression is not.

The biggest, most important thing that depression is not is your fault. Depression occurs as a result of a combination of genetic, biological, environmental, and psychological factors. People don’t choose to have depression, and it’s not something they can just snap out of when someone tells them to cheer up.

Depression is not who you are—it involves a conditioned habit that your brain has learned, and that your brain can unlearn. A habit is a routine of some process that we learn and that after being repeated tends to occur subconsciously. Even in someone who is genetically predisposed to depression, the habit is how the brain reacts to the relapse signs when they arise that fuels the downward spiral. After even a single depressive event, all your brain needs is a cue and a conditioned combination of thoughts, emotions, and sensations arise and go to work beneath your conscious awareness. The brain perceives this as a threat and then begins to engage in common behaviors that can be used to avoid this discomfort. Maybe you tend to overeat, isolate from friends, become a couch potato, or procrastinate. Like any habit, the result of these behaviors is predictable, bringing up self-loathing, hopelessness, anger, or sadness, and keeps you stuck deeper in the conditioned reaction that I call the “depressive loop.” But one of the biggest errors we make is identifying with this depressive loop as if this is who we are.

You are not your depression.

As this depressive habit loop unfolds in your life, the brain eventually creates a story with you as the main character as a depressive person. If you’ve struggled with this throughout life, family and friends have likely reinforced this identity, calling you a “depressed person.” When something is part of who you are, it becomes fixed, unchanging, and a draw for feeling deficient or defective. But when we truly investigate depression, even chronic
unhappiness, it’s just a passing, fluctuating pattern of thoughts, emotions, and sensations that comes and goes like all other things. It’s not fixed at all, and clinging to this identity can be a source of deep shame and sorrow that repeatedly cues chronic unhappiness or more acute episodes. But it doesn’t have to stay this way. For the past fifteen years, scientists have discovered the dynamic nature of our brains and how we can create new neural connections throughout the life span.

At the moment it may be difficult, but for now, see if you can begin holding any story that “I am a depressed person” lightly. As you do, you may come to understand that the all-too-familiar feeling that “something is wrong with me” is not something to be ashamed of, any more than having pneumonia or allergies is something to be ashamed of. You don’t choose depression—it chooses you.

Depression occurs in all types of people. Although women are 70 percent more likely than men to become depressed at some point in their lives, millions of men develop it as well. But many try to keep it a secret because men are taught from a young age that you need to be “strong” and that depression is a source of shame, implying “weakness.” From an evolutionary perspective, if you’re weak, the clan doesn’t value you, you’re not a desirable mate, and you don’t belong. If you’re cast out of the clan, your life is at risk. The brain of the modern-day man doesn’t see it much differently. Hiding depression only keeps us identified with it and doesn’t let it do what it’s meant to do: come and go. An increasing number of men understand this better and are speaking up about it and seeking support. On the other hand, many kids can’t hide it, as depression comes out as anger, irritability, and willfulness.

Depression is not always obvious. The shame associated with depression leads people to often hide their illness from friends, family, and even their doctors. So if you’re walking around
thinking
that you're the only one you know who's struggling with this illness, chances are pretty good that you're wrong. You may very well have friends, neighbors, coworkers, and family members who are depressed. They hide it from you just as you may hide yours from them.

SIGNS AND SYMPTOMS OF DEPRESSION

• Persistent sad, anxious, or "empty" feelings
• Feelings of hopelessness or pessimism
• Feelings of guilt, worthlessness, or helplessness
• Irritability, restlessness
• Loss of interest in activities or hobbies once pleasurable, including sex
• Fatigue and decreased energy
• Difficulty concentrating, remembering details, and making decisions
• Insomnia, early-morning wakefulness, or excessive sleeping
• Overeating or appetite loss
• Thoughts of suicide, suicide attempts
• Aches or pains, headaches, cramps, or digestive problems that do not ease with treatment

Source: US National Institute of Mental Health

Depression as a Side Effect

Depression can sometimes be caused by medical conditions such as thyroid disease, cardiovascular disease, diabetes, and brain disorders. It can also be brought on by medications: dozens of drug classes list depression as a possible side effect, including (but not limited to) calcium channel blockers, beta-blockers, benzodiazepines, statins, painkillers, cancer treatments, therapeutic hormones, and birth control.

People don’t choose to have depression, and it’s not something they can just snap out of when someone tells them to cheer up.

The Depression Loop

I've found during my work with depression that it's helpful to envision it as a kind of circular process: an automatic loop rather than a linear set of events. Clients find it useful to think of it as a cycle, a spiral, or even a traffic circle. However you picture it, understanding the circular nature of events that lead to or keep
depression alive is an important step toward recognizing how it can pull you into its sphere of influence.

For now, let's use the image of a traffic circle to explain how the depression loop works. If you live someplace where there are lots of traffic circles or if you have ever driven on one, you know how confusing and maddening they can be.

You're driving on a straight road, minding your own business, maybe humming along with a song on the radio, and suddenly a traffic circle looms ahead. It just kind of appears on the street ahead of you. Your mind instantly starts anticipating entering the circle, how the cars may stream in, and how you're going to exit. A feeling of fear or anxiety arises; your hands start to sweat and grip the steering wheel. As you enter, you search for a sign for a way out, and halfway through the circle you realize that you have to switch lanes to jockey for position so you're ready for your exit. Meanwhile, you drive by other entrance points that each admit streams of new cars into the circle. You see your exit, but you realize that you either have to speed up or slow down. If you miss your exit—which is so easy to do—you have no choice but to loop around again hoping that next time you'll make your way out.

Falling into the depression loop is a lot like entering a traffic circle. You're living your life, feeling fine, minding your own business, and all of a sudden you find depression looming. Maybe it's just a feeling you wake up with, a moment when you suddenly fall prey to a shaming inner critic that says something like “there's something wrong with me/you,” or a response to hearing some negative news. Once you're in it, you try valiantly to get out. But it's so easy to get stuck.

Just as various roads lead you into a traffic circle, the depression loop has four entrance points: thoughts, feelings, sensations, and behaviors. Any one of these can lead you into the depression loop. Once you're caught inside the loop, your mind goes around
and around struggling to get out. Streams of thoughts enter the loop as your brain struggles to figure out “What’s wrong with me?” As one of my students says, “The bloodhound is sniffing around for the villain (and much analysis is required).” The brain anxiously defaults to reaching back into the past, referencing and rehashing negative events to try to figure it out. Simultaneously, the brain jumps into the future, planning, rehearsing, and anticipating some upcoming hopeless catastrophe. As all this happens, the brain pours stress into an already stressful situation.

You may see an exit, but as you try to leave the loop, you find yourself blocked by more depressive thoughts, feelings, sensations, and behaviors. Before you know it, the traffic gets even heavier with the addition of streams of fear and anxiety when you begin to perceive that you’re becoming trapped in the self-perpetuating depression loop. You’re desperate for escape, but, sideswiped by fear and negativity, you become so overwhelmed that you just keep going around and around and around. Soon a sense of learned helplessness sets in: you can no longer even see the exit, so you stop trying to break free and begin to believe you may never escape.

This was a common occurrence for one of my patients, thirty-year-old Sandy, who had experienced bouts of depression her whole life. Typically she would feel fine for a while, but then at times, seemingly out of nowhere, she would become depressed. Sandy would lose interest in activities she usually enjoyed and have trouble finding the motivation she needed for everyday tasks. Feelings such as unworthiness and guilt would begin to flood her mind, and in response, she tended to isolate herself from her family and friends and make choices that fueled her depression rather than pull her out of it.

Sandy experienced depression as a persistently reinforcing loop that dragged her down. Negative thoughts would trigger
troubling feelings (or vice versa) that in short time would turn into an ever-present depressed mood state. This would make it tough for Sandy to get out of the bed in the morning. Doing the activities she usually enjoyed felt nearly impossible, and instead of partaking in life, Sandy would often end up sitting in her apartment feeling terrible about herself, eating too much, drinking too much, and sinking deeper and deeper into a morass of gloom.

Your Changing Brain

Sandy didn’t know this, but each time she experienced a bout of depression and got lost in the depression loop, her brain actually changed. When we practice anything in life over and over again, it starts to become automatic; in psychology, we call that a *conditioned habitual reaction*, and in neuroscience, it’s called *experience-dependent neuroplasticity*. Right now eighty billion to one hundred billion nerve cells, or *neurons*, are interacting with what some have said are one trillion connections, called *synapses*, in an unimaginably fast and dynamic network.
When we do something over and over—whether it’s something we’re trying to learn, such as improving our tennis swing; or something we’d rather not learn, like an anxiety response to dogs after being bitten by one—neurons in our brains fire together. As we repeat these actions, they eventually wire together, making the process an unconscious habit. This is called top-down processing. It is the brain’s process of drawing from our implicit memories to make sense of the present moment, and it’s how the neuroscience of decision making works.

Do you have to think about how to pick up the spoon to eat your morning breakfast cereal, or how to step on the accelerator or brake when driving your car? No, and you can thank top-down processing for that: your brain directs you to do these things automatically. Top-down processing comes in handy when the habit is something positive or neutral. But the brain also has the ability to make decisions beneath our conscious awareness that keep us stuck in the depression loop.

A good way to understand how top-down processing plays a part in depression is to think about its connection to trauma. A trauma reaction is so shocking to the nervous system that it instantly wires the brain to be highly sensitive to any signs of it coming again. The trauma of being bitten by a dog, for example, is enough to create a neural bridge between all of the thoughts, emotions, sensations, and behavior associated with the dog bite. After experiencing the trauma of being attacked by a loose German shepherd, simply walking by a leashed Chihuahua can cue the snap judgment of insecurity and the emotion of fear even though the Chihuahua presents no actual danger. This causes the stress hormone cortisol to flood the brain, cutting off access to the part of the brain that recognizes the context of the situation: that the Chihuahua is harmless and really not a threat. Instead, the cortisol launches you into a fight, flee, or freeze response governed
by fear and irrationality rather than by reason and judgment. You fear the Chihuahua because of your own automatic emotional and physical responses, not because any real danger exists.

This played out in a less dramatic but equally troublesome way for my client Sandy. One day when she came in to see me looking particularly distressed, she told me that she received an email that a client of hers was angry with her work. In exploring it together, we realized that this kind of cue triggered worries about losing that client, increasing her anxiety, and making her heart race and her breathing to become shallow. Her mind spiraled with negative hopeless thoughts about the future of her business, and she began to avoid doing her work. Sandy knew she was getting depressed, and this spiraled more fear. Her response prevented her from dealing with the client’s email in a logical, objective way.

Sandy was ready to start breaking this cycle when she finally recognized her depressive loop for what it really was: a deeply conditioned habit (or trauma reaction). In fact, just understanding the concept of the depression loop was enough for Sandy to start effecting a change in her relationship to depression. She was able to see it in action in her daily life and name it. The moment she saw it occurring, she was able to stand apart from it in a *space of awareness* that was separate from the loop itself and to gain perspective—as did Clint, the client I described in the beginning of this chapter. She no longer felt that she *was* the loop—rather, she was the aware person *viewing* the loop. In this space, she found a sense of freedom and a “choice point,” a moment in time when she was aware enough to choose a healthier response.

The first step in uncovering happiness and experiencing freedom from the depression loop is learning how to objectively see this loop in action instead of getting lost in it. The moment we notice the depression loop in action is a moment we've
stepped outside of it, into a space of perspective and choice. The
beauty is
that science is now showing us that through intentional repetition and action, we can change our brains for the better. This is what psychiatrist and researcher Jeffrey Schwartz, of the University of California, Los Angeles, School of Medicine, has coined *self-directed* neuroplasticity. It may seem impossible, but it’s not. You’ll soon see that you can turn the volume down on the fear that keeps it going and catch the signs that cue the habit in the first place.

The moment you notice the depression loop in action is the moment you’re able to step outside of it, into a space of perspective and choice.

**Learning to Be Helpless**

As I mentioned in the introduction, something called learned helplessness plays a significant role in the depression loop. Before we go any further, I want to tell you more about what learned helplessness is and the hold it very likely has on you.

Once again, learned helplessness is a mental state when our minds decide that we don’t have control over problematic situations—even if we actually do have some control. Being depressed induces a sense of learned helplessness that blinds us to our choices and discourages us from trying to help ourselves even when we have the capacity to make things better.

We first became aware of learned helplessness in the late 1960s, when University of Pennsylvania psychologist Martin Seligman and his colleague Steve Maier designed a study to determine what would happen when someone experienced pain repeatedly without any way out. Would he learn to feel helpless and hopeless?
Seligman used thirty dogs in his now-famous study. He randomly divided them into three groups: The dogs in group one were put into harnesses for a short period of time and then released. The dogs in group two were put into harnesses and then received mild electrical shocks that they could stop by pressing on a panel with their snouts. The dogs in group three were put in harnesses and shocked, but they had no control over the shocks and could not stop them. (This kind of research sounds cruel to us today, but fifty years ago, there were different opinions about the treatment of laboratory animals.)

The dogs in group three learned that no matter what actions they took, there was nothing they could do to stop from being shocked.

Seligman wondered what effect a traumatic experience like this would have on the dogs’ ability to learn to avoid future suffering. To figure this out, he placed the dogs inside a kind of “shuttle box” like the one you see on the next page, with electrical grids for a floor and a short partition separating it into two spaces. A light would come on shortly before the shock to alert the dogs of the impending electrical current. After a little while, the group two dogs learned that they could escape the shock by jumping over the partition when the light came on. But the group three dogs, who had learned to be helpless, just laid there stoic, immobilized, not expending any energy to leave. Their past experience of not being able to relieve their suffering interfered with their ability to learn to relieve future suffering. This was the first time researchers had shown that having experienced helplessness in the past can interfere with the ability to learn to escape future relapses.

Years later, researchers conducted similar studies with people in which they used brain imaging technology to show what happens in the brain in situations like this. They found that the areas
of the brain involved in helping a person make clear decisions and feel motivated to follow through are distressed. Even though people who are depressed would love nothing more than to help themselves feel better, their brains become habituated to thinking there is no way out.

When people see someone who is depressed, they don’t think of learned helplessness; they often think it’s just an issue of laziness, or a lack of motivation or willpower. Unenlightened people believe that if someone with depression simply exerted more effort, he or she would get better. But that’s not how it is. This depression myth couldn’t be more wrong.

Like the dogs in the shuttle box, how can we learn to see “the light,” or signs of relapse that come in order to learn to escape the shock of depression? How can we resolve the longstanding insecurities, unresolved traumas, or limiting core beliefs that continue to keep us stuck?

Another interesting example of this is a study performed in 2011 by researchers at a small lab at the University of Colorado Boulder. They split rats into three groups; mild shocks were administered to the tails of the rats in group two and group three, while group one received no shocks. Group two had control over escaping the shocks, whereas group three did not. When the researchers studied the rats’ brains, they discovered that the rats in
group two showed neuron growth in a part of the brain known as the prefrontal cortex. (See next page.) Not only did those rats escape the shocks, but their brains actually changed in reaction to the experience.

This research contributed to a growing awareness of the fact that the brain has the ability to break out of the trap of learned helplessness. Like the animals in these studies, we can discover how to escape the “shocks” of depression. As we do so, we cultivate an antidepressant brain by bolstering activity in the prefrontal cortex and slowing down the action in the amygdala.

Thanks to research on learned helplessness, we have better insights and tools for breaking free from depression.

Brain Names

The brain is an amazingly complicated organ. You don’t have to know all its ins and outs in order to uncover happiness, but it helps to know the names of a few of the most important brain structures related to depression:

- The amygdala (a-mig-da-la) is an almond-shaped structure in the center of the brain that regulates memory and emotional reactions. The amygdala processes and interprets information gathered by the five senses and then tells the body how to react. It has been coined the “fear circuit” for its pivotal role in our fear reactions. It is often enlarged in a depressed brain, suggesting that we may be more sensitive to fearful cues.

- The prefrontal cortex (PFC) is located in the front of the brain, just behind the forehead. It’s the executive function center of the brain, which is responsible for complex cognitive behavior such as abstract thinking, analyzing thoughts, decision making, rational perspective, and predicting outcomes of choices. It’s the most evolved area of the brain. Your PFC lights up when
you're engaging in rational and deliberate decision making. It manages your goals and the appropriate responses to achieve them. A depressed brain will often show a general reduction in PFC activity, but with heightened activity in the right prefrontal cortex (known for more negative emotions) and less activity in the left prefrontal cortex, which lights up with positive emotions.

- The hippocampus, located right next to the amygdala, is involved in learning, memory, and context. It draws on memories to help us gain perspective and make conscious choices. When the amygdala perceives danger, it cuts off access to the hippocampus. After all, there is no need to learn in that moment, because it's time to fight, flee, or freeze, not to stand still and draw inferences. This is what makes it difficult to learn new ways of coping in the midst of depression. The hippocampus is also negatively impacted by repeated surges of cortisol, flooding the brain in response to states of fear, which ambush us often during the depression loop. This may be why in a depressed brain, the hippocampus is often smaller in size.

Escaping the Loop
Thoughts, emotions, sensations, and behavior. When it comes to depression, these four elements feed off one another to create a depressive feedback loop. While nobody knows what causes depression, we do know that as this feedback loop repeats over time, it becomes a conditioned habit, so that a single stimulus—perhaps a negative thought, or feeling sad or physically tired—can trigger the looping.

But here's the upside to all this: just as the brain can be conditioned into making the depression loop an ingrained habit, it can also be conditioned away from it. You truly can rewire your brain so that you don't automatically fall into depression whenever certain thoughts, emotions, sensations, or behaviors occur. Having had depression in the past doesn't mean that it's your fate to be in its grip the rest of your life. Understanding how the depressive loop works is the first step to stepping outside of it, gaining perspective, and dropping into a space of choice, possibility, and freedom. When you're driving down a road and see a traffic circle looming, you don't have to enter it. You can veer onto a different road.

This isn't easy, but it's possible—and the more you practice it, the better you'll get at not only pulling yourself out of the loop but also preventing yourself from entering it in the first place.

**DEPRESSION CUES**

Depression often starts with a cue, or trigger: an initial sense of unease that can be brought on by a subconscious thought, memory, physical feeling, emotion, or some external life event. It can be something as mild as a friend's disapproving expression or as severe as the loss of a job or loved one. The cue is usually followed by:

- **Thoughts:** After the cue, the mind starts to think, and the stories begin. The brain anxiously defaults to reaching back into the past, referencing and rehashing negative events to try to give the cue meaning and context. Simultaneously, the brain jumps into future planning, rehearsing and anticipating all kinds of possible catastrophes that could result from the cue. As it does this, more stress pours into an already stressful situation.
- **Emotions:** The blues or anxiety sets in (or sets in deeper). As they
do, new thoughts continue to flow as you say to yourself, “Why am I getting depressed?” or “What did I do wrong?” or “This always happens to me,” or “I’m hopeless.” This habitual looping can happen instantaneously and last for days. The more you identify with the narrative, the deeper the spiral of anxiety and depression goes.

• **Sensations:** As thoughts and emotions darken, physical sensations and symptoms such as heaviness, fatigue, insomnia, and appetite change set in.

• **Behavior:** Negative thoughts, difficult emotions, and uncomfortable sensations skew your perception and influence your ability to make healthy choices about behavior. This in turn can lead to even more negative thoughts, difficult emotions, and uncomfortable sensations.

The death of a loved one, health problems, caring for an aging parent, losing a job, the end of a relationship, or financial difficulties. Some are more subtle, such as rejection by a friend, a missed career opportunity, or discovering a family member’s disloyalty. Depression cues can be linked to the calendar, and can be set off by changes of season, birthdays, holidays, and anniversaries of losses or traumatic events. Paradoxically, even seemingly positive, happy events—buying a new house, landing a new job, getting married, celebrating a wedding anniversary, going on vacation, becoming a parent, or achieving a long-anticipated dream—can trigger depression cues. Our own individual personalities, histories, life events, and brain chemistry influence what our depression cues are and how they are activated.

**What Are Your Depression Cues?**

The first step to stopping the cycle of depression is recognizing your own depression cues and triggers. It’s good to think about this when you’re feeling better—when you’re not trapped in the depression loop—because it’s easier to be objective and have perspective. If you keep a journal, you may be able to discern your depression cues by rereading sections you wrote before or during periods of depression.
When you identify your depression cues, put them down on paper and reflect on them. By doing so, you stamp them into your short-term memory and increase your chances of recognizing them in action when you’re at the cusp of becoming depressed. Being aware of your own cues and triggers makes it more likely that you’ll notice when you’re about to be pulled into a depression loop.

When you have a better idea of what your personal cues are, you can become aware of them while they’re happening and use them as a depression barometer.

Look back into your past and ask yourself what some of the stimulus points for depression may be for you. Was there a certain event that set it off? If not, can you think of specific thoughts, thoughts, feelings, sensations, and behaviors that have led you into a depression loop?

When I work with groups of clients or students, we do a brainstorming exercise that helps everyone identify his or her depression cues. Standing in front of a group of people who experience all levels of depression—from chronic low levels of unhappiness to occasional bouts of moodiness to repeated episodes of major depression—I ask, “What are your depression cues? How do you know that depression is coming on?” For a moment, it’s quiet, and then some murmurs begin as one person says something like, “I sleep too much.” Another says, “I notice my thoughts become a lot more negative.” Another says, “I start isolating from friends and family.” As they continue speaking, I write everything down on the whiteboard. This brings an awareness of the many kinds of cues that might ignite depression. Equally importantly, it calls attention to the fact that no one is alone in this, and that although our cues may be very different, we all share this deeply human experience.

At first it may feel uncomfortable for you to identify and write down your depression cues, because it forces you to confront them face-to-face. But try to think of it this way: knowing them will help you protect yourself from being sucked into the depression loop in the future.
Here is a list of common depression cues. Use it to help you identify what can trigger your depression.

<table>
<thead>
<tr>
<th>THOUGHTS</th>
<th>EMOTIONS</th>
<th>SENSATIONS</th>
<th>BEHAVIORS</th>
</tr>
</thead>
<tbody>
<tr>
<td>“I am fat.”</td>
<td>Anxiety</td>
<td>Fatigue</td>
<td>Overeating</td>
</tr>
<tr>
<td>“I am stupid.”</td>
<td>Sadness</td>
<td>Loss of energy</td>
<td>Eating a certain food, such as ice cream</td>
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<tr>
<td>“I’ve messed up again.”</td>
<td>Irritability</td>
<td>Feeling heavy</td>
<td>Talking too much</td>
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<tr>
<td>“Nobody likes me.”</td>
<td>Impatience</td>
<td>Clenching</td>
<td>Sleeping</td>
</tr>
<tr>
<td>THOUGHTS</td>
<td>EMOTIONS</td>
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<tr>
<td>• “I am unlovable.”</td>
<td>• Moodiness</td>
<td>• Feeling wound up or wired</td>
<td>• Drinking too much</td>
</tr>
<tr>
<td>• “People are avoiding me.”</td>
<td>• Fear</td>
<td>• Restlessness</td>
<td>• Going on shopping sprees</td>
</tr>
<tr>
<td>• “I am a fraud.”</td>
<td>• Emptiness</td>
<td>• Blurry thinking</td>
<td>• Overspending</td>
</tr>
<tr>
<td>• “I am never going to feel better again.”</td>
<td>• Hopelessness</td>
<td>• Appetite changes</td>
<td>• Risky sexual behavior</td>
</tr>
<tr>
<td>• “I am worthless.”</td>
<td>• Pessimism</td>
<td>• Loss of memory</td>
<td>• Avoiding friends and family</td>
</tr>
<tr>
<td>• “I make so many mistakes.”</td>
<td>• Guilt</td>
<td>• Body aches</td>
<td>• Not-bothering with activities you usually enjoy</td>
</tr>
<tr>
<td>• “I am a bad spouse, parent, child, friend, sibling, student, employee,” and so on.</td>
<td>• Shame</td>
<td>• Headache</td>
<td>• Not exercising</td>
</tr>
<tr>
<td>• “Things are never going to get better.”</td>
<td>• Grief</td>
<td>• Gastro-intestinal symptoms such as nausea or diarrhea</td>
<td>• Watching too much television</td>
</tr>
<tr>
<td>• “I don’t deserve to live.”</td>
<td>• Anger</td>
<td>• Dry mouth</td>
<td>• Spending too much time at the computer or playing video games</td>
</tr>
<tr>
<td>• “Everything is hopeless.”</td>
<td>• Despair</td>
<td>• Shakiness</td>
<td>• Nail biting</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Increased or decreased interest in sex</td>
<td>• Hair pulling</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Trouble seeing or hearing</td>
<td>• Obsessive-compulsive behavior</td>
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<td></td>
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<td>• Excessive crying</td>
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</tbody>
</table>
Worksheet: My Personal Depression Cues

Using the chart below, write down the thoughts, emotions, sensations, and behavior cues that sometimes act as depression triggers for you.

<table>
<thead>
<tr>
<th>THOUGHTS</th>
<th>EMOTIONS</th>
<th>SENSATIONS</th>
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Once you’ve drawn up your list of depression cues, make sure you keep a copy where you can refer to it often: in your wallet, on your refrigerator, in your online scheduler, and so on. Start paying attention to yourself and your moods. You may want to check in with yourself a few times a day—stop everything you’re doing, be quiet for a moment, close your eyes, and ask yourself, “Where am I starting this moment from?” Be mindful of what you’re feeling, thinking, sensing, and doing. Go over your list of depression cues. Do you notice any of them occurring now? (As you do this, you may think of other potential depression cues. Keep writing them down; the more you add to your list, the more likely you are to start recognizing them.) If this seems like too much work, then you are welcome to just do a check-in at the end of the day or even the end of the week and see if you noticed any cues. See what feels right for you.

When you give yourself a moment to pause and be aware, you are training your brain to be present and opening up the opportunity to see if any depression cues have been activated. If everything is fine, it can turn into a moment of gratitude, and you can go back to what you were doing. But if you recognize that one of your depression cues has been triggered, you can take action. You can start by acknowledging it and labeling it, and this in and of itself can take the wind out of its sails.

For example, perhaps one of your depression cues is that you start to engage in more frequent and intense thoughtless overeating. Or it may even be more specific: thoughtless overeating of chocolate-chip ice cream. When you take a mindful pause and check in with yourself, you may identify the fact that there has been an increased craving lately for chocolate-chip ice cream. When you recognize this increase, you can acknowledge that a potential depression cue has been activated. When this happens, I want you to label it: tell yourself, “My chocolate-chip-ice-cream
depression cue has been triggered. I could be on the verge of enter-
ing a depression loop.”

Now, the fact that you recognize an increased craving for chocolate-chip ice cream may not mean that you’re about to experience a major bout of depression. The cue could, in fact, be completely benign and mean nothing more than that you just feel like having your favorite ice cream. But if you decide to indulge in a scoop or two, it becomes a mindful choice instead of a mindless habit.

You’ll learn over time that sometimes your cue is a false alarm—as the joke about Sigmund Freud goes, sometimes a cigar is just a cigar. But sometimes your chocolate-chip-ice-cream cue really will be the sign that you’re starting to enter a depressive loop. And if it is, you can take action to protect yourself.

In the next chapter, I’ll describe some of the specific actions you can take in response to the triggering of a depression cue. For now, let’s focus a little more on why understanding the depression
loop and recognizing and labeling your depression cues is such an important first step.

Once you’re aware that one of your depression cues has been signaled, you can learn to objectively see this loop in action instead of getting lost in it. It may seem impossible, but it’s not. You’ll soon see that you can turn down the volume on the fear that keeps the loop going and catch the signs that cue the habit in the first place.

Name Them to Tame Them

Labeling a depression cue—literally saying its name out loud or writing it down in a journal—is incredibly valuable. Giving it a name can actually take away some of its power and can reduce your chances of falling into a depression loop.

We know this because of some fascinating research by psychologist Matthew Lieberman and his colleagues at the UCLA Social Cognitive Neuroscience Laboratory. They found that the simple process of putting feelings into words—referred to by psychologists as affect labeling—can help people do a better job of managing those feelings.

Lieberman and his collaborators showed this in a kind of creepy study—creepy if you don’t like spiders, that is. They found that spiderphobic people who label and express their fears about a nearby spider actually reduce their fears and are able to get closer to a spider than are spiderphobes who see a spider but don’t label and express their fears. Simply by acknowledging and labeling their fear and putting them into words reduced the distress felt by the spiderphobic volunteers.

Why does acknowledging and labeling feelings help diffuse their power? Lieberman and his colleagues answered this question by conducting studies on subjects while their brains
were being scanned by functional magnetic resonance imaging (fMRI). The fMRI machine shows us where the blood is flowing in the brain, which is a direct connection to the brain's activity. They found that labeling feelings actually activates a specific region in the prefrontal cortex, which is less active in depressed people, and reduces the activity in the amygdala, which is more active in depressed people. “If the amygdala is like an alarm clock alerting us to potential threats, putting feelings into words is like hitting the snooze button,” Lieberman wrote in an article about his work in the New York Times. “The end result is being less distressed in the face of something we fear . . . and less stressed over the long term, which can contribute to better physical health.” When a depression cue is triggered, we begin to feel fear and anxiety as the amygdala heats up. But we want to cool it down by releasing our fear. Recognizing, acknowledging, and labeling a depression cue—and actively understanding that a depression cue can push us into a depression loop—can interrupt fear, cool down the amygdala, and bring the brain back in balance.

As you practice and repeat this, you literally begin to change your neurological wiring and cultivate an antidepressant brain by creating more activity in the prefrontal cortex and less activity in the amygdala.

Here’s an interesting psychological fact: when people see a picture of an angry face, their amygdala becomes more active. That’s because the amygdala’s job is to interpret the data we gather through our senses. Seeing an angry face sets off an alarm of sorts in the amygdala, which activates a series of physiological responses in the body (known as the fight, flight, or freeze response) that is designed to help us protect ourselves from danger. However, Lieberman and his colleagues discovered that when subjects see a picture of an angry face and give it a name—anger—brain activity shifts from the amygdala to the prefrontal cortex, which is responsible for analyzing data and making decisions based on that analysis. This is a very simple explanation of Lieberman’s work, but it helps explain why it is
so useful for people who are prone to depression to use words to label their feelings. Doing so shifts the brain’s focus from an emotional reaction driven by fear to a balanced reaction with greater perspective.

As my good friend Dr. Dan Siegel, a psychiatrist at the UCLA School of Medicine says, when it comes to feelings, if you can name them, you can tame them.

We’ll talk more about this later. For now, the most important takeaway is that you can begin to make real progress in breaking the depression loop by taking the following steps:

- make a list of your common depression cues;
- take breaks to pause throughout the day, or at the end of the day, to check in with your thoughts, feelings, sensations, and behaviors;
- recognize and acknowledge whether any of your depression cues have been triggered;
- label the cue and put into words the possibility that you may be entering a depression loop; and
- recognize that as soon as you notice the loop occurring, you are in a space of awareness—a choice point—where you can begin to take action.

You can’t prevent yourself from ever falling into a depression loop, especially if you’ve experienced depression in the past. But you can devise a custom-tailored plan and get better and better at putting it into action as soon as you notice your depression cues.
Step 2: Reverse Bad Habits

Here's a little secret that I've never told anyone: when I was in the corporate world, managing sales teams in San Francisco, I would sometimes play hooky, leaving the office and walking out to the waterfront area known as the Embarcadero, that overlooked the bay. Often it was clouded in a mist of fog. My eyes would drift off in a vacant, empty stare as I wondered what I was doing with my life and why I couldn't seem to get it together. I felt so confused and stuck, continuing to play out my bad habits that left me feeling awful physically and mentally. The more I'd analyze it and try to figure it out, the worse I felt. It wasn't until much later on that I realized a big reason why I kept repeating the bad habits: I was looking in the wrong direction. The real bad habit that was fueling this depressive loop was not something I normally associated with habits. But it absolutely was a bad habit, and it was right in front of me.

My worst bad habit was my thinking.

As I started to learn more about the nature of thought, I discovered that it can become a bad habit when the mind isn't content. This occurs fairly often. The brain registers this discontent and does what it is programmed to do: to try to analyze it and figure out how to fix the pain so that it goes away. However, in my experience and in the experiences of the thousands of people I've worked with, I have found when the brain tries to escape pain, it reinforces the feeling that “something is wrong with me,” which inevitably adds stress to the pain and kicks up even more emotional suffering.

This sparks the brain to come up with other ways to soothe distress, which can lead to the unhealthy behaviors that we usually associate with bad habits. The fact is, we are not our thoughts; not even the ones that tell us we are.
In step 1, you learned how the depression loop works, and you defined the personal cues that draw you into it. In step 2, you’ll delve further into this exploration by seeking to understand which habitual thoughts keep the loop going, how they can drive your brain NUTs (see sidebar), and how to find ways to begin freeing yourself from your own mind. You’ll also get a clearer view of the behavioral bad habits that keep the loop going, how to recognize them, and how to use a simple step-by-step process to reverse them.

As you do this, you take fuel away from the depressive loop and begin cultivating feelings of trust and self-reliance, which fuels an upward spiral of resiliency.

**WHAT ARE NUTS?**

The acronym NUTs is way of bringing humor to those Negative Unconscious Thoughts that arise constantly in the brain, beneath our awareness, and that feed the depression loop. Examples of NUTs include deep-seated beliefs that “I am unworthy,” “Something is wrong with me,” and “Nothing is ever going to change.” When a challenging event occurs in our lives, these NUTs become a filter that clouds the way we look at the world—and as a result, they can actually make us feel a little nuts! As we begin bringing more attention to what our NUTs are, we become more conscious of what they are. And, if you’ll excuse the pun, understanding our NUTs also strengthens our ability to “crack them,” releasing their hold on us.
Habits of Thinking

Have you ever noticed that your head is full of voices? (I am referring to the automatic thoughts that come to you uninvited.) Have you ever wondered about the nature of those voices? How they constantly rehash past events, judge and compare you with others, and anticipate all the potentially worst-case scenarios? Do you hear the voices right now? The ones that might be saying, “Oh yes, I’ve heard this before” or “What does he mean by ‘voices’?”

Yes, that’s the one.

These voices are constantly running in your mind, sometimes during moments when you’re doing mindless tasks, like when you’re in the shower:

“What do I need to do today? There’s the doctor at eleven o’clock. I need to buy a birthday present for my niece; what am I going to get her? I never know what to get people. I hope she likes what I get her. I’m never good at getting people gifts. I don’t even know why I bother. Ooh, I almost forgot I need to deposit that check today.”

Other times when we’re not feeling well, our minds can feel like they’re going nuts:

[While looking in the mirror]: “Wow, I look great today, don’t I [sarcastic tone]? No wonder I can’t get a boyfriend. I hate how I look. I hate where I’m at, nothing’s ever going to change. Arghh, why am I so negative? Maybe this is why I have so much trouble in relationships.”
Sometimes there are multiple voices at once that argue with one another:

“Another parking ticket? What’s wrong with me?” “Nothing is wrong with you; just think of it as a donation to the city.”

[Sinking feeling] “I’m such a screwup.” “Stop being so negative! Just think good thoughts [irritated tone]!” “Yeah, right, like that’s going to make a difference! I tried that a thousand times. Even my own advice sucks. Not only do I keep sinking myself financially, but I can’t even see how screwed up I am.”

Five Major Mind Traps

Whether they are Negative Conscious Thoughts or NUTs, these five seem to earn the highest marks for keeping us stuck in a perpetual cycle of suffering:
1. Doubt

When it comes to the depressive loop, one of the infamous voices that keep us stuck is doubt. Even as you're reading this book, you might notice it:

“This might work for some people, but it's probably not going to work for me.” The motive of this voice is to keep us safe from some sense of failure or disappointment, but ultimately it keeps us away from new experiences that can be supportive.

2. Emptiness

Filled with longing to be someplace else or someone else, our minds settle on the belief that the current moment is never enough, we're not enough, or we can't do enough.

In the movie Big, Tom Hanks plays a young boy who dreams that when he gets bigger, he will finally be happy. But what he finds is that once he gets his wish, the voice inside still isn't satisfied, and he wants to be a kid again. Many of us hear a similar voice: “I'll be happy when I graduate from school and don't have homework anymore.” Or: “If only I could find a new job, everything would get better.” Or: “Once I find someone to marry, my life will be perfect.” The problem with this kind of thinking is that when the awaited event does occur, happiness may not come with it. We trap ourselves into believing that what we have now is not enough; we'll be happy only when some future goal is met, and we get married, get divorced, get a new haircut, get rich, lose weight, buy new clothes, retire—the list is endless.

Meanwhile, this motive of trying to fix the current moment leaves you in a perpetual cycle of dissatisfaction. If you look at it closely, you'll see that often there is pain underneath that dissatisfaction. By focusing on the idea that you're not where you should be,” your brain is constantly reinforcing the message that something is wrong with you, which then highlights a gap
of deficiency that only grows wider as it tries harder. Even after you get what your mind wanted (the new job, the new house, the new partner, and so on), there is only brief relief because although that wanting is appeased for a moment, the voices soon want something else. The root problem is not what you don’t have, but the fact that you really don’t feel whole or complete.

3. Irritation

At other times, the voices feed irritation. Someone might be walking down the hallway at work humming his favorite tune, and the thoughts come up:

“Does he think everyone wants to hear him? Uh, what is he so happy about anyway? He’s probably next on the chopping block.”

Meanwhile, who is suffering? We are the ones in pain, but our brains think that if we project our irritation onto another person with judgment, we will stop the pain and somehow find relief. Or when the anger turns inward, it will motivate us to change even though turning anger inward often sews the seeds of depression. Or if these voices of annoyance continue to come up in our relationships and are not discussed, in time the feelings turn into resentment that inevitably eats away at the relationship like a cancer. But our experience tells a different story. Voices of irritation can alert us that something isn’t right within ourselves or in a relationship. With awareness, we can use this information to be constructive. When this voice is left unchecked, we can get trapped in it.

4. Sluggishness

These voices also seem to get in the way when we’re trying to do good in our lives. Have you ever had the idea of doing something that is healthy for you—maybe hanging out with friends, exercising, meditating, or even just fixing yourself a healthy meal—but then you hear this voice:

“I want to do it, but I’m too tired. I’ll do it tomorrow.”

When we are legitimately tired—maybe we haven’t had
enough sleep or have had an exceptionally taxing day—we need to listen to our bodies and rest. But at other times, these sluggish voices are just another sign that we're avoiding being with ourselves because there is a fear that it will be uncomfortable, so it's better to just check out. The motive to shut down is akin to the motivation of our destructive behaviors, such as using drugs and alcohol, which hide our strong and uncomfortable emotions, but eventually the voices of self-blame, self-judgment, and shame creep in anyway, ultimately feeding the depression loop. However, when we can recognize it, we can face it and when we can face it, we can work with it and break free.

5. Restlessness

Still, we have more voices that scream of restlessness. These days our brains are being trained to be noisier, busier, and more distracted. You might be sitting at a table alone waiting for a drink, and as your eye catches the smartphone on the table, the voices start:

“I wonder if I received any new messages. Nope, not one since a minute ago. What about Facebook, anything there? Some new updates, not that interesting. Twitter? Ah, that's an interesting tweet. I wonder when the drink is going to come?” All the while, your eyes dart around to survey your environment, and your leg shakes up and down.

Anytime there is a moment of waiting, most people will reach for their phone to check notifications, emails, surf the web, or play with an app. When there is a space empty of doing, The restless voices rise up. We feel compelled to fill the spaces, but what we don't realize is that it's in these empty spaces, as Viktor Frankl says, where we have a choice between doing and being; it's where possibility and opportunity emerge, and where there is a chance to make changes for the better.

All of these burdening voices feed the depression loop. But the
fundamental question is, Who is behind all these voices? The true answer is that none of these voices are really ours. The number one pothole we continually fall into is believing that we are these thoughts and that these thoughts are facts. One of the main keys to cultivating an antidepressant brain and uncovering happiness is the realization that you are not your thoughts or the stories they tell. Not the ones that tell you how wonderful you are, not the ones that tell you how horrible you are, and not even the ones that are neutral. Who are you, then?

When you pay attention, you’ll find that you are the one who is listening.
WHAT LIES BENEATH YOUR THOUGHTS

What would be there if one day all your thoughts were gone? In 1996 Jill Bolte Taylor, a thirty-seven-year-old brain scientist, suffered a neurological trauma: a stroke that took away access to the left side of her brain, which is the part that is more associated with thinking, analyzing, language comprehension, rehashing past events, and anticipating future ones. When her mother visited, Jill didn’t know who she was but was able to sense her warm energy through tone and body language. Although her thoughts were gone, she still had her awareness. Consider for a moment that beneath all your thoughts, emotions, and sensations that comprise moment-to-moment experience, there is a calm, grounded, enduring awareness that is always there.

Consider what life would be like if you truly knew at the core of your being that these thoughts were not facts and that you didn’t have to buy into them. Take a moment to imagine it. What might come to mind is a scene of you lying on a beach with ocean waves lapping, and if you’re lucky, you can take a few deep breaths and actually taste that peace right now just for a moment.

Some people—but not many—have instant realizations or “aha!” moments that allow them to break away from these kinds of thoughts and change the course of their lives significantly. The rest of us need to work at disconnecting from these thoughts because the habit of believing them is deeply ingrained in our brains thanks to many years of practice. One way to start reversing this habit is by practicing playing with the mind. Take a moment to just listen objectively, as best you can, to the voices that are there, even the ones that are just repeating the words you are reading, and even the ones that question the purpose of this simple exercise.

Play with noticing your thoughts a bit, take control, and shout out a quote from Dr. Seuss: “I like nonsense, it wakes up the brain cells.” Try not to think of a white polar bear—any luck? Probably not. Try to hold onto the image of the white polar bear—any
luck? If you feel a recurring self-judgment, such as “I am stupid,” try saying the word *stupid* thirty times really fast, and see what happens to your perception of the word. How does it change? Ask yourself, “I wonder what thought is going to come up next?” and wait; it always will.

The surest way to become Tense, Awkward and Confused is to develop a mind that tries too hard—one that thinks too much.

—BENJAMIN HOFF, *THE TAO OF POOH*

**Getting Hooked**

Most of the time, the negative thoughts that feed the depressive loop aren’t conscious; they come from our deep-seated beliefs and happen instantly as the brain’s snap judgments. We need to remember that most of the way we react in this world is driven by our subconscious in the form of perceptions, judgments, and opinions, which occur so quickly that they hook us before we even have a chance. Our minds may judge exercise as “bad” before the conscious excuse of being too tired or having no time emerges as a thought. Your partner was “wrong” the moment he opened his mouth. Without awareness of these snap judgments, the depression loop speeds up, and we find ourselves stuck in a familiar pattern again and again.

This is exactly what happened with my client Julia, who was a successful college sophomore when she learned that a former mentor whom she had long admired had committed suicide after a lifelong struggle with hidden depression. This news caused Julia
to spiral into a state of shock and confusion. She thought about all the similarities she had always observed between the two of them, and she worried that if this could happen to her mentor, then maybe it could happen to her. Terrified, Julia fell into a deep depression and eventually admitted herself into a hospital for help.

After leaving the hospital, Julia sought my help. One area we focused on was recognizing the intrusive thoughts that scared her. She told me that many times she just found herself in a funk and riddled with anxiety. I told her that these NUTs can sneak up beneath our awareness and affect our mood. When I told her about NUTs, Julia said, “That’s a good name for them because they drive me nuts!” We both had a good laugh, and that seemed to lighten her mood. In the days that followed, she ended up using this acronym to cut some humor into the moments and unhook herself when she found the depressive loop in action. This helped her at times to nip it in the bud. Humor can be a wonderful anti-depressant.

Name Your NUTs

In uncovering your NUTs and naming them, you can become more aware of them. You can practice training your brain to make space between your awareness and the thoughts themselves. Getting into that space instantly diffuses their power over you and allows you to breathe easier. As you practice and repeat naming your NUTs, you’ll get better and better at recognizing them and setting them aside.

To explore this more deeply, think about your top five NUTs. Spend a few minutes writing them down in the space below or in your journal. When they’re captured on paper, you can’t help but see the space between your awareness of the thoughts and
the thoughts themselves, which allows you to start the process of gaining freedom from them.

In 1980 Steve Hollon, professor of psychology at Vanderbilt University and Philip Kendall, professor of psychology and director of the Child and Adolescent Anxiety Disorders Clinic at Temple University, conducted a study to formulate a list of the top automatic negative thoughts that people experience when depressed. Notice the themes of deficiency and hopelessness that are infused through the list. You can use the findings of this study below to help you create your list. You may see your own NUTs in this list, or you may have others:

1. I feel as though I’m up against the world.
2. I’m no good.
3. Why can’t I ever succeed?
4. No one understands me.
5. I’ve let people down.
6. I don’t think I can go on.
7. I wish I were a better person.
8. I’m so weak.
9. My life’s not going the way I want it to.
10. I’m so disappointed in myself.
12. I can’t stand this anymore.
13. I can’t get started.
14. What’s wrong with me?
15. I wish I were somewhere else.
16. I can’t get things together.
17. I hate myself.
18. I’m worthless.
19. I wish I could just disappear.
20. What’s the matter with me?
21. I’m a loser.
22. My life is a mess.
23. I'm a failure.
24. I'll never make it.
25. I feel so helpless.
26. Something has to change.
27. There must be something wrong with me.
28. My future is bleak.
29. It's just not worth it.
30. I can't finish anything.


Right now write down your top five NUTs.

1. __________________________________________
2. __________________________________________
3. __________________________________________
4. __________________________________________
5. __________________________________________
6. __________________________________________

__________________________________________

After you write your own list of NUTs, take a few minutes to think about them. What patterns do you notice about them? Do they occur more frequently or less frequently when you're feeling well? Are they more convincing or less convincing when you're not feeling well? If you tune in to these questions, more often than not, you'll notice that these thoughts occur less often and are much less convincing and believable when you're feeling well and things seem to be going your way. That is proof that thoughts are not facts. If they were, just like the fact that a chair is a chair regardless of your mood, they would always remain the same.

As you begin to see these thoughts from a distance, you're literally priming your mind to objectively notice them appearing and disappearing more in daily life. You are now relating to them instead of from them, starting the process of dis-identifying from them, reversing the mind habits that keep you stuck.

__________________________________________

Thoughts are not facts. If they were, just like the fact
that a chair is a chair regardless of your mood, they would always remain the same.

Let’s take this one step deeper now. Whenever I’m working with people in breaking free from mind traps, I share with them a series of questions adapted from American speaker and author Byron Katie that can help crack the NUTs and expose the lies that they’re telling. As you practice continually cracking them, you get better and better at creating distance from your thoughts, dispelling their accuracy and seeing with greater clarity.

To start off, take one of the NUTs you listed above that represents a belief. This might be something like “I’m so weak” or “My future is bleak” or “I’m unworthy of love.”

1. Once you’ve come up with the belief, ask yourself, “Is it true?” Just notice what comes up. You might notice what many people do, that oftentimes the answer is “Well, yes, it’s true.” This is the brain initially reacting; it’s the autopilot you live with and believe is you.

2. Next, ask yourself, “Is it absolutely true?” Can you say that this thought is 100 percent accurate without any doubt? This question gets us to look at the thought again, pause, and gain a bit more distance from it. We have more perspective on the actual thought itself. At this point, many people might say, “Well, I can’t say it’s a hundred percent accurate; I guess there’s a possibility that I can see it in a different way.” Notice if this is your experience as you do it with your NUT.

3. The third question asks, “How does this thought make you feel?” Here we’re beginning to see the thought as part of a cycle—we might say a part of the depressive loop—that is causing a reaction. Common responses are “It causes
feelings of sadness, anger, shame, hurt, or fear.” We can go further and ask, “What impact does the thought have on you when it’s visiting you frequently?” The answer, inevitably, is, “It cycles me into feeling moody, depressed, or anxious.” This tends to lead us to habits of behavioral avoidance such as procrastination, eating, drugs, alcohol, sex—you name it. But in this process, we’re stepping outside of it and taking the energy out of the looping.

4. Ask yourself, “What would the days, weeks, and months ahead look like if I no longer had this thought or belief?” Check in here and, as best you can, really imagine this. What comes up for you? Would you feel lighter, happier, or more capable? Would you have more energy, be more motivated, or be less inclined to engage in unhealthy habits? Would it change your relationships with yourself and others for the better? Would you feel more hopeful, open, more alive?

5. Finally, “Who would you be without these thoughts?” This dips us underneath the thinking itself and back to that seat of awareness that is really who we are. If you check in deeply, you might even have a sense that you are aware of being aware right now. This is where you are no longer ensnared by the trivial nature of these mental happenings in your head, but can finally taste the mystery of life unfolding.

You can begin reversing the habits of thinking by (1) actively playing with the voices in your head, (2) naming the NUTs, and (3) cracking them to dispel their lies. This starts to loosen your relationship with thoughts and their hold on you.
ENCOURAGE YOUR POSITIVE THOUGHTS

An important element of uncovering happiness is to notice the positive thoughts that are there and encourage them. Not only does encouraging positive thoughts help us balance our brains’ inherent negativity bias, but science also shows that it opens our mind up to greater possibilities. From time to time, you might notice a nourishing thought arise, such as “I’m good enough,” “Life is fine as it is,” “I’m worthy of love,” or “What a beautiful moment.” We can be on the lookout for these thoughts and fan the flame with a play on these same questions:

1. “Is it true?” Because of the strength of our inner critics, our minds are often quick to dismiss positive thoughts, so you may notice a quick “No, it’s not true. I’m not really beautiful, worthy of love, good enough [and so on] . . .”
2. “Is it possible that it’s true?” Here is where we open the door a bit and ask if there is any possibility that it’s true, no matter how small our minds may say it is. The answer inevitably here is “Yes, I guess there is a possibility.”
3. “If you step into that possibility for a moment, how does that make you feel?” Two things can happen here. You may find that fear arises: the fear of the unknown. What would life be like if I stepped into this light? It reminds me of a poem by spiritual author and lecturer Marianne Williamson that starts, “Our greatest fear is not that we are inadequate, our deepest fear is that we are powerful beyond measure.” Remind yourself that it doesn’t serve you or the world to be in your small self. However, you might also experience a positive emotion such as joy, contentment, or confidence.
4. “Can I allow myself to linger in this feeling for a few moments?” When we allow ourselves to savor what’s good, our “good-feeling” neurons fire together. And as psychologist Donald Hebb put it memorably, “Neurons that fire together wire together,” promoting resiliency in the future.

In the following steps, we’ll be uncovering our natural antidepressants. But before we do that, we have to uncover the bad habits that arise from these thoughts; the ones that perpetuate the depressive loop.