# Assertiveness and Healthy Boundaries: Guided Self-Help Programme

THE TALKING THERAPIES UK SELF-HELP SERIES



# Assertiveness and Healthy Boundaries: Guided Self-Help Programme

Building confidence to communicate needs and maintain personal limits

A self-help workbook · 7 modules · about 7 weeks

**TALKING THERAPIES UK**

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First edition, 2026.

This workbook accompanies the Assertiveness and Healthy Boundaries: Guided Self-Help Programme programme on the Talking Therapies UK self-help platform. Its text is drawn from the programme and is kept current with it: whenever the programme changes, the workbook is set again.

Revision 4. This printing was set on 7 November 2026 from the programme as it stood that day.

A note on using this workbook. It offers self-help based on established psychological approaches for difficulties of mild to moderate severity. It is not a substitute for assessment or treatment by a qualified professional and is not designed for use in a crisis. The examples in it are fictional; no real person appears in them. If you are worried about your safety, or your difficulties are getting worse, the page headed “When self-help is not enough” says where to turn.

Set in Poppins and Roboto, the Talking Therapies UK typefaces.

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# How to use this workbook

This step-2 equivalent guided self-help programme draws on the robust evidence base of Cognitive Behavioural Therapy, Acceptance and Commitment Therapy and skills-based approaches such as assertiveness training and Dialectical Behaviour Therapy. It helps participants understand the psychology of assertiveness, develop practical communication tools, and learn how to set and protect personal boundaries. The programme is designed for NHS delivery and can be completed in weekly 30-minute sessions.

This workbook is the written form of the Assertiveness and Healthy Boundaries: Guided Self-Help Programme programme on the Talking Therapies UK self-help platform. It follows the programme module by module: each part of the book is one module, and each chapter is one piece of the module's teaching, set in the order the programme presents it.

Read the chapters of a part in order, then turn to the worksheets that follow them. The worksheets are the part of the work that changes things, so give them the time they ask for and come back to them as the weeks go on. You may copy or print the worksheets for your own use, as often as you need.

Most people work through one module a week, which takes the whole programme about 7 weeks. Go at the pace that suits you: a module done properly is worth more than two done quickly.

The check-in questionnaires let you see how things are changing. Complete each one when you reach it, note the date and your total, and compare it with the last.

### When self-help is not enough

- If you are in danger now, or have seriously harmed yourself, call 999 or go to your nearest accident and emergency department.
- If you need help urgently but it is not an emergency, call NHS 111 or contact your GP surgery.
- Samaritans are there day and night, every day of the year: call 116 123 free from any phone.
- If you would rather not talk, text SHOUT to 85258 for free, confidential support at any hour.
- If your difficulties are getting worse as you work through this book, or you find yourself thinking about ending your life, stop and speak to your GP or a mental health professional. A workbook can be a good start, and some difficulties need more help than a book can give.

### What this workbook will help you to do

- By the end of this module you will:
- Be able to describe assertiveness and distinguish it from passive, aggressive and passive-aggressive behaviour
- Understand the relief trap that keeps passive habits in place, and why aggression so often grows out of them
- Know the main kinds of boundary, in work, family, friendship, intimate relationships and online life, and why clear limits protect wellbeing

- Have a three-step assertive script to try in a low-stakes situation this week
- Have an honest baseline record of your own communication style to return to later in the programme
- Be able to distinguish a personal value from a goal and from a rigid rule, and name five to ten of your own core values
- Know the assertive rights that belong to you and equally to others, and have noticed which ones you find hardest to accept
- Understand the ACT distinction between clean and dirty discomfort, and the skill of willingness that lets you act on values while feeling uncomfortable
- Be able to link a value to a concrete request using the four steps of fact, feeling, need and request

PART 1

# Understanding Assertiveness and Boundaries

*What assertiveness is, why healthy boundaries matter, and how to notice your own pattern*

CHAPTER 1

# Welcome to the programme

This guided self-help programme is for people who want to feel more confident in saying what they think, asking for what they need, and protecting their time, energy and wellbeing without damaging the relationships they care about. Over seven modules, each taking around forty-five minutes, you will work through ideas and practical skills drawn from Cognitive Behavioural Therapy (CBT), Acceptance and Commitment Therapy (ACT), and the skills-based traditions of assertiveness training and Dialectical Behaviour Therapy (DBT). The programme is written to the standard of NHS Talking Therapies step-two guided self-help, which means it is suitable to use on its own or alongside routine care from your GP or another service.

Each module builds on the one before. In this first module you will gain a clear picture of what assertiveness is and how it differs from passive and aggressive behaviour, see why clear boundaries protect both your mental health and your relationships, and begin to notice your own patterns of communication. Module 2 turns to your values and your rights. Module 3 works on the thoughts that keep people quiet. Modules 4, 5 and 6 teach the practical skills: clear expression and careful listening, saying no and holding a limit, and staying steady when a boundary is challenged. Module 7 helps you keep what you have gained.

You can read or listen at your own pace. Keep a notebook, or a note on your phone, for the exercises, and come back to any section whenever you need a reminder. You will also meet three people throughout the programme: Priya, a care worker who cannot say no to an extra shift; Dave, whose family assumes he will host every Christmas; and Tom, a student in a shared house where his food keeps disappearing. Their situations are ordinary, which is the point. Assertiveness is rarely tested in dramatic moments. It is tested in rotas, group chats and kitchens.

Learning any skill is gradual, and feeling awkward at first is part of it rather than a sign that it is not working. If at any point things feel much worse rather than better, that is a signal to reach out rather than push on alone: contact the practice through the messaging button, speak to your GP, or if you feel unsafe right now call 999 or the Samaritans on 116 123.

Settle somewhere quiet, have a pen to hand, and let us begin.

CHAPTER 2

# What assertiveness is

Assertiveness is the ability to express your thoughts, feelings and needs directly, honestly and respectfully, while recognising that the other person has the same rights as you. The modern understanding of it owes a great deal to the psychologists Robert Alberti and Michael Emmons, whose book Your Perfect Right first appeared in 1970 and has been revised many times since. They described assertive behaviour as behaviour that lets a person act in their own best interests, stand up for themselves without undue anxiety, express honest feelings comfortably, and exercise their own rights without denying the rights of others. Every clause in that description matters, and the last one most of all. Assertiveness is not a polite word for getting your own way. It is a way of saying your piece clearly and then allowing the other person to respond.

It helps to picture a line with three points on it. At one end sits passive behaviour, at the other aggressive behaviour, and in the middle assertive behaviour.

The passive pattern. Passive behaviour means putting your own needs aside, usually to avoid conflict or to keep someone's approval. You say yes when you mean no. You stay silent when something upsets you, or you hint and hope. You apologise for things that are not your fault. In the moment it feels safer, and often it is rewarded with a smile or a thank-you. Over time, though, chronic passivity is consistently associated with resentment, low self-esteem and a background hum of stress, because your needs do not disappear when you ignore them. They go unmet, and you carry the cost.

The aggressive pattern. Aggressive behaviour is the opposite extreme: pursuing your own needs at the expense of other people's. It can look like shouting, blaming, sarcasm, threats, or simply steamrollering a conversation. Aggression often works in the short term, which is why people keep using it, but it damages relationships and invites retaliation, so the same argument comes round again with more heat each time.

The assertive pattern. Assertive behaviour balances respect for yourself with respect for the other person. You state your view clearly, usually in the first person, you ask for what you want, you say no when you mean no, and you listen to the reply. You do not insist on winning; you insist on being heard. People who communicate this way tend to report less anxiety, less low mood and better relationships, and assertiveness training itself has a long trial record as a treatment in its own right. A review by Speed, Goldstein and Goldfried in 2018 called it a forgotten evidence-based treatment, forgotten mainly because its methods had been absorbed into almost everything else.

**A NOTE**

*A quick test of any response you are considering: am I being honest about what I need, and am I respecting the other person's rights? If the answer to both is yes, you are in assertive territory, whatever words you end up choosing.*

The most hopeful thing about assertiveness is that it is a skill, not a personality type. Nobody is simply born assertive, and nobody is condemned to be passive. People learn their style, usually

early and usually for good reasons, and a learned style can be relearned through practice, feedback and reflection. That is what the rest of this programme is for.

Priya is thirty-four and works as a senior care assistant in a residential home for older people in Bolton. She is good at her job and she knows it, but the home is short-staffed, and the deputy manager, Gail, has her number. On a Tuesday evening Priya is on the sofa with her partner Sam when her phone lights up: “Any chance you could do tomorrow 7 till 3? Really stuck.” Priya has already worked four long days. She feels her stomach drop. She types “Yeah no problem x” before Sam has finished asking what the message said.

Nothing about this exchange looks dramatic. Priya was friendly, Gail was grateful, and the rota is covered. But Priya did not want to say yes, she did not say what she needed, and she will spend the next day tired and quietly furious with Gail, with Sam for not objecting, and with herself. She has applied the honesty test to herself and failed the first half of it.

What this shows is that passivity often feels like kindness from the inside and looks like reliability from the outside. The cost is paid later, and it is paid by Priya.