Foundation Skills for Stress, Low Mood and Anxiety

THE TALKING THERAPIES UK SELF-HELP SERIES



Foundation Skills for Stress, Low Mood and Anxiety

A six-module foundation course covering the skills and understanding common to stress, low mood and anxiety together, grounded in the UK's best-evidenced large-group psychoeducational approach and in transdiagnostic cognitive-behavioural therapy

A self-help workbook · 6 modules · about 6 weeks

TALKING THERAPIES UK

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First edition, 2026.

This workbook accompanies the Foundation Skills for Stress, Low Mood and Anxiety 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 3. This printing was set on 21 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

Stress, low mood and anxiety are usually written about, and usually treated, as though they were three separate problems needing three separate explanations. In practice, for a great many people, they arrive together, feed into each other, and share a great deal more in common, in how they affect the body, the mind, and behaviour, than their different names suggest. This programme starts from that overlap rather than from a single diagnosis, and teaches the foundation skills that help with stress, low mood and anxiety together, whichever combination of the three best describes your own experience right now. This approach has a genuine and substantial evidence base. Stress Control, developed by Jim White and Mary Keenan and delivered as a large-group psychoeducational course across NHS services for over three decades, is the single best-evidenced large-group approach of its kind in the UK; a 2021 systematic review and meta-analysis published in the British Journal of Clinical Psychology concluded that it is an appropriate and clinically effective approach for mild-to-moderate anxiety and depression, while rightly noting that it works best as one part of a wider, stepped offer rather than the only thing anyone is ever offered. A large multi-service study following over four thousand people through this kind of large-group psychoeducational course found consistently effective outcomes, with very little difference between individual groups, meaning the approach itself, not any one particularly good facilitator or particularly favourable group, is what reliably helps. Separately, and from a more individual-therapy tradition, David Barlow's Unified Protocol for the transdiagnostic treatment of emotional disorders is built on substantial research showing that anxiety and depressive difficulties share common underlying processes, particularly a tendency towards intense negative emotion and unhelpful attempts to avoid, suppress, or escape it, and that treatment aimed directly at those shared processes works at least as well as treating each diagnosis separately, often more efficiently. This programme adapts the shared spirit and well-evidenced principles of both traditions, large-group transdiagnostic psychoeducation and transdiagnostic cognitive-behavioural therapy, into a self-paced written format; it does not claim to be, or to replicate exactly, either named proprietary programme. Who this is for. This programme is written for adults experiencing stress, low mood, anxiety, or some mixture of the three, at a mild-to-moderate level, including anyone unsure which single label, if any, best fits what they are going through. It is intentionally foundational: a good, well-evidenced starting point for a very wide range of people, rather than a deep, specialist treatment for any one specific presentation. Who this is not for, and where to go instead. If you are currently in crisis, experiencing significant suicidal thoughts, or in a mental health emergency, this is not the right starting point; Module 1 sets out where to get help first. If your own experience, once you have worked through Module 1, points clearly towards one specific, well-defined difficulty, a phobia, OCD, a traumatic memory, a particular eating difficulty, a substance use difficulty, a relationship or sexual difficulty, a more targeted programme elsewhere in this catalogue, built specifically for that difficulty, is likely to serve you better than this foundation course alone, and Module 1 and Module 6 both point you towards those more targeted options directly; this programme is designed to sit alongside that catalogue as a front door, not to replace any part of it.

This workbook is the written form of the Foundation Skills for Stress, Low Mood and Anxiety

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 6 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

- Understand why stress, low mood and anxiety are covered together in this programme rather than separately. Understand the stress response and how it shows up physically, mentally and behaviourally. Recognise when urgent support, or a more specific programme elsewhere in this catalogue, is a better starting point than this one. Describe your own current experience honestly as a foundation for the rest of the programme.
- Recognise the physical signature of the stress response in your own body. Practise slow, diaphragmatic breathing as a direct way of calming the stress response. Understand progressive muscle relaxation and the role of physical activity. Commit to practising one physical technique daily this week.
- Understand the connection between thoughts, feelings and behaviour. Recognise common unhelpful thinking patterns that appear across stress, low mood and anxiety. Use a thought record to work through a recent stressful moment.
- Understand approach versus avoidance as a common thread across low mood and anxiety. Understand behavioural activation and graded approach as two expressions of the same underlying principle. Plan one small step of activation or approach to take this week.
- Understand the two-way relationship between sleep and stress, low mood and anxiety. Apply practical sleep hygiene principles. Understand assertiveness as a practical, protective skill for everyday stress.

- Consolidate the skills covered across this programme into a realistic, ongoing plan. Build a personal early-warning plan for harder periods. Decide whether a more targeted programme elsewhere in this catalogue would now serve you well, having worked through this foundation course.

PART 1

Understanding Stress, Low Mood and Anxiety — A Shared Starting Point

Why this programme covers all three together, how the stress response works, and checking this is the right starting point for you

CHAPTER 1

Welcome to the programme

Most self-help programmes, including several others in this catalogue, are built around one specific difficulty: depression, generalised anxiety, panic, a particular phobia. This programme is deliberately different. It starts from an observation that will likely feel familiar if you have ever tried to describe your own experience using just one of those labels and found it did not quite fit: stress, low mood and anxiety very often arrive together, influence each other, and share a great deal in how they show up in the body, in thinking, and in behaviour, far more than treating them as three unrelated problems would suggest.

This programme works through six modules: understanding stress, low mood and anxiety together and checking this is the right starting point, controlling the physical side of stress, controlling unhelpful thinking patterns, controlling actions through doing rather than avoiding, sleep and everyday confidence, and finally bringing it all together into your own ongoing plan, including knowing when a more specific programme might serve you even better than this one.

Before any of that, this first module explains why this combined, foundational approach works, and makes sure it is genuinely the right starting point for your own situation.

CHAPTER 2

Why stress, low mood and anxiety are covered together

Large-group psychoeducational courses that teach skills for stress, low mood and anxiety together, rather than treating each as a separate illness needing separate input, have a substantial evidence base in the UK. Stress Control, developed by Jim White and Mary Keenan and delivered across NHS services for more than three decades, is the best known and best evidenced of these; a systematic review and meta-analysis published in 2021 concluded that this kind of large-group psychoeducation is appropriate and clinically effective for mild-to-moderate anxiety and depression, and a separate large study following over four thousand people through similar courses found consistently effective outcomes across very many different groups and facilitators, suggesting the approach itself, rather than any particular group being unusually good, is what reliably helps.

Separately, researchers working from an individual-therapy tradition have reached a closely related conclusion. David Barlow's Unified Protocol for the transdiagnostic treatment of emotional disorders rests on a substantial body of research showing that anxiety and depressive difficulties, whatever their specific diagnostic label, tend to share common underlying processes, in particular a tendency towards intense negative emotion and a range of understandable but unhelpful ways of trying to avoid, suppress, or escape that emotion once it arrives. Treatment aimed directly at those shared processes has been found, across a number of trials, to work at least as well as treating each diagnosis separately, and often more efficiently, since most people struggling with their mental health are not neatly struggling with only one thing at a time.

This programme draws on the shared spirit and well-evidenced principles of both traditions. It is not a claim to replicate either named programme exactly; it is an adaptation of genuinely well-evidenced, transdiagnostic foundations into a self-paced, written format.

CHAPTER 3

The stress response: one system, many presentations

A great deal of what gets labelled separately as stress, low mood or anxiety traces back to the same underlying system: the body's stress response, sometimes described as fight, flight, or freeze. This system evolved to deal with short-term physical threat, flooding the body with adrenaline and cortisol, quickening the heart and breathing, tensing muscles, and sharpening attention onto the perceived threat, all genuinely useful if the threat is a physical danger that fighting or fleeing can resolve quickly.

The difficulty is that this same system activates for threats that are not physical and not brief: a difficult relationship, financial worry, an overloaded diary, a persistent sense of failure or inadequacy, a looming deadline, or simply an accumulation of smaller pressures with no obvious single trigger at all. When the stress response activates repeatedly or for a long period without the fight-or-flight resolution it evolved for, the result is the familiar, exhausting combination of physical tension, disturbed sleep, difficulty concentrating, irritability, low energy, and a mind that will not settle, which can then be labelled, depending on which part of the picture is most prominent, as stress, as low mood, or as anxiety, when in fact it is frequently one underlying system under sustained pressure, showing up in several overlapping ways at once.

CHAPTER 4

Checking this is the right starting point for you

This programme is intentionally foundational and broad, which is exactly its value for a great many people, but it is worth being honest about where a different starting point serves you better.

A NOTE

If you are currently in crisis, experiencing significant suicidal thoughts, or otherwise in a mental health emergency, please contact the Samaritans free, at any time, on 116 123, call 999, or go to your nearest A&E. This programme is not designed for that situation, and a different kind of support is what you need first.

If, once you have described your own situation honestly below, it points clearly towards one specific, well-defined difficulty, this catalogue includes a number of more targeted, deeper programmes built specifically for conditions including depression, generalised anxiety, panic, worry, social confidence, health anxiety, anger, sleep, perinatal wellbeing, long-term conditions, OCD, trauma, disordered eating, emotional eating, harmful substance use, sexual difficulties, and adult ADHD; where one of those fits your own situation clearly, it is likely to serve you better on its own, or this foundation course may still be a sensible, broader starting point alongside or before it. Module 6 returns to this directly, once you have a clearer sense, from working through this programme, of exactly what your own pattern looks like.

WORKSHEET

Sort each situation into the right route

Before describing your own situation, sort eight short presentations into the three categories described above.

This programme is a good fit for a broad, mixed, or not-yet-clear picture of stress, low mood and anxiety at a mild-to-moderate level. A different, more urgent route is needed first wherever there is a current mental health crisis or significant risk to safety. A more targeted programme might serve better wherever the situation described points clearly towards one specific, well-defined difficulty that this catalogue covers in its own dedicated programme.

The groups: A This foundation programme is a good fit B A different, more urgent route is needed first C A more targeted programme might serve better

Write the letter of the group each item belongs to in its box.

☐ 1. A 29-year-old who feels generally stressed, tired, and on edge most days, without being able to point to one clear cause, finding it hard to say whether it is stress, low mood, or anxiety, just that something feels persistently off

☐ 2. A 44-year-old managing a demanding job and family life, sleeping badly, snapping at people more than usual, and generally feeling stretched too thin, with no single dominant symptom

- [ ] 3. A 51-year-old having thoughts that life is not worth living this week, with a specific plan starting to form
- [ ] 4. A 33-year-old who has had an intense, specific fear of flying for years, otherwise coping well in every other area of life, wanting focused help with that one fear before an upcoming trip
- [ ] 5. A 38-year-old several months into persistent low mood, loss of interest in almost everything, and difficulty getting out of bed, with no significant anxiety symptoms, wanting a thorough, structured approach to the low mood specifically
- [ ] 6. A 26-year-old who has just started a stressful new job, feeling generally wound up and tense most evenings, sleeping poorly, keen to learn some general tools before things get worse
- [ ] 7. A 47-year-old experiencing severe depression with a significant current risk to their safety, needing urgent mental health support this week
- [ ] 8. A 35-year-old with intrusive, repetitive thoughts that feel senseless but deeply distressing, alongside compulsive checking rituals that now take up several hours a day, wanting to understand what is happening and where to get proper help

The answers are at the back of the book.

WORKSHEET

Describing your own current experience

Take fifteen minutes and write an honest account of your own situation: how stress, low mood and anxiety currently show up for you, in whatever combination, and what has brought you to this programme now.

Then check what you have written against the three routes above. If this programme is the right fit, Module 2 turns to the physical side of stress.

Describe your own current experience of stress, low mood and anxiety honestly, in whatever combination applies, and check it against the three routes above.

CHAPTER 5

What you have done in this module

You understand why this programme covers stress, low mood and anxiety together, grounded in the well-evidenced large-group psychoeducation tradition and in transdiagnostic cognitive-behavioural therapy, rather than treating these as three unrelated problems. You understand the stress response as one underlying system capable of showing up in several overlapping ways. You have checked your own situation against the three routes above and, if you have reached this point without being redirected elsewhere, you have a first honest account of your own current experience to build on. The next module turns to the physical side of stress, and to practical ways of working with it directly.

CHECK-IN

Mood check-in (PHQ-9)

Before you begin, take a few minutes to complete this short questionnaire. It is the same one used in NHS Talking Therapies and gives us a baseline against which to measure your progress over the programme.

Over the last 2 weeks, how often have you been bothered by any of the following problems?

	Not at all (0)	Several days (1)	More than half the days (2)	Nearly every day (3)
1. Little interest or pleasure in doing things	0	1	2	3
2. Feeling down, depressed, or hopeless	0	1	2	3
3. Trouble falling or staying asleep, or sleeping too much	0	1	2	3
4. Feeling tired or having little energy	0	1	2	3
5. Poor appetite or overeating	0	1	2	3
6. Feeling bad about yourself — or that you are a failure or have let yourself or your family down	0	1	2	3
7. Trouble concentrating on things, such as reading the newspaper or watching television	0	1	2	3
8. Moving or speaking so slowly that other people could have noticed. Or the opposite — being so fidgety or restless that you have been moving around a lot more than usual	0	1	2	3
9. Thoughts that you would be better off dead, or of hurting yourself in some way	0	1	2	3

Total: _____ **Date:** _____

Add up the numbers you have circled. A total of 0 to 4 suggests minimal symptoms of depression, 5 to 9 mild, 10 to 14 moderate, 15 to 19 moderately severe and 20 to 27 severe. Note your total and the date, so you can compare the next check-in with this one.

If you circled anything other than 0 for the last question, please talk to your GP or call NHS 111 today. If you are in danger now, call 999.

The PHQ-9 and GAD-7 were developed by Drs Robert L. Spitzer, Janet B. W. Williams, Kurt Kroenke and colleagues, with an educational grant from Pfizer Inc. No permission is required to reproduce, translate, display or distribute them.

CHECK-IN

Everyday life check-in (WSAS)

And one more short questionnaire about how things are affecting everyday life: work, home, social life, relationships and leisure. Functioning often recovers on a different timetable to symptoms, and it matters just as much.

This check-in uses the WSAS (Work and Social Adjustment Scale). If you are using the online programme, complete it there, where your scores are kept and compared for you. If you are working from this book alone, your GP or therapist can give you a copy.

WORKSHEET

Taking this forward

Before you move on, take two minutes to make this module harder to lose. Skills fade fastest in exactly the moments they are needed most, so the work here is to decide now, while things are steady, what you will reach for when they are not.

If things ever feel much worse rather than better, that is a signal to reach out rather than push on alone: use the messaging button to contact the practice, speak to your GP, or if you feel unsafe right now contact 999 or the Samaritans on 116 123.

Three short answers, in your own words. First: what single idea or skill from this module do you most want to keep? Second: when, realistically, will it be hardest to use, name the actual situation. Third: what exactly will you do in that moment? Write it as a sentence you could follow when stressed.

PART 2

Controlling Your Body — The Physical Side of Stress

How stress shows up physically, breathing retraining, progressive muscle relaxation, and the role of physical activity

CHAPTER 6

Starting with the body

Stress, low mood and anxiety are often thought about mainly in terms of thoughts and feelings, but the body is usually where they are felt first and most insistently: tight shoulders, a churning stomach, a racing heart, bone-deep tiredness. This module starts with the body deliberately, because physical techniques tend to be the quickest route to some relief, and because calming the body also tends to quieten the mind, often more effectively than trying to think your way out of a stressed state directly.

The end of the sample

This is a free sample of “Foundation Skills for Stress, Low Mood and Anxiety”, and it ends here.

Everything you have read here is from the opening of the book, set exactly as it is printed in it. The rest follows in the same way, chapter by chapter, with its worksheets, its examples and its reference list.

The full book is on sale in the Talking Therapies UK shop. A copy is yours to keep, as a PDF and an ebook, licensed to you by name: a short line saying so is printed at the foot of each page of the PDF and on the title page of the ebook.