

THE TEACHER'S GUIDE TO
MENTAL HEALTH

Don't panic, teacher!

**Study materials and self-experience guide for
participants of the course: Burn-out Syndrome
- Prevention Methods in Practice**



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THE TEACHER'S GUIDE TO THE
MENTAL HEALTH

PART I

A LITTLE BIT OF THEORY



BURNOUT SYNDROME

The concept of burnout emerged in the 1970s. The term "burnout" is a metaphor that "describes the exhaustion of employees' capacity to maintain an intense involvement that has a meaningful impact at work" (Schaufeli, Leiter & Maslach, 2009, p. 205). Christina Maslach, the leading researcher in the field, interviewed human service workers. She found out that they "often felt emotionally exhausted, that they developed negative perceptions and feelings about their clients or patients, and that they experienced crises in professional competence as a result of the emotional turmoil" (Schaufeli, Leiter & Maslach, 2009, p. 206). According to her, there are three primary dimensions of burnout: (McGeary & McGeary, 2012)

- emotional exhaustion: an individual feels exhausted by emotional demands at work
- depersonalization: an individual is detached and cynical towards clients or patients
- accomplishment: an individual considers oneself as ineffective in job responsibilities

Later it was found that these symptoms can also be experienced by people working outside of human services (e.g., managers, entrepreneurs, white and blue-collar workers, Schaufeli, Leiter & Maslach, 2009).

The causes of this syndrome are (Maslach & Leiter, 1997):

- work overload
- lack of control over what we do
- insufficient reward
- unfairness
- the breakdown of community
- value conflict

Some occupations are high burnout risk populations. A common factor is that these workers work long hours for and with other people: (McGeary & McGeary, 2012)

- mental health care providers
- health-care workers
- teachers
- law enforcement workers

Since the effectiveness of burnout treatment is questionable, it is best to take a preventive approach (McGeary & McGeary, 2012). Some approaches focus on the person:

- relaxing activities: mindfulness training, meditation, vacation, etc.
- change of the work pattern: number of hours, breaks, change in the free time activities
- coping skills improvement: cognitive restructuring, time management techniques, communication skills, problem-solving techniques
- social support
- physical exercise

BURNOUT SYNDROME

Other approaches focus on the situation and context:

- the role in organizational decision-making: an increase in the sense of control and self-efficacy
- training in other areas of the job: personal development
- receiving positive feedback and praise
- receiving fair treatment: it influences feelings of engagement
- assessment with the goal of finding the most appropriate job for the individual's skillset
- a positive socioemotional climate

More comprehensive list of first aid: Rankin, J. G. (2017). First aid for teacher burnout: How you can find peace and success. New York: Routledge.



PSYCHOTHERAPY

“Psychotherapy (individual, group, and couple/ family) is a practice designed varyingly to provide symptom relief and personality change, reduce future symptomatic episodes, enhance quality of life, promote adaptive functioning in work/ school and relationships, increase the likelihood of making healthy life choices, and offer other benefits established by the collaboration between client/ patient and psychologist” (American Psychological Association [APA], 2013, p. 102). An important aspect of this process is the utilization of the individual's strengths and competencies (Consoli, Beutler, & Bongar, 2017).

There are various models of psychotherapy (Consoli, Beutler, & Bongar, 2017):

- psychodynamic therapies
- cognitive behavioral therapies
- existential, humanistic, and experiential therapies
- interpersonal psychotherap
- systemic therapies
- integrative and eclectic therapies

Shared features of all therapies: (Orlinsky, 2017)

- therapeutic contract
- therapeutic operations (techniques)
- therapeutic bond
- inner self-relatedness
- progression of in-session impacts
- series of sequential events

Areas of potential focus: (Orlinsky, 2017)

- identity: personal, social
- reason: logic, decision-making
- behaviour: instrumental, expressive
- body: sensations, needs
- emotion: feelings, affective impulses
- fantasy: imaginations, dreams



PSYCHOTHERAPY

Types of goal and focus: (Orlinsky, 2017)

Client's Treatment Goal	Therapist's Clinical Focus	
	"Manifest" Symptoms and Problems of Client	"Underlying Sources" of Client Problems
(1) Relief: reduction of emotional distress and noxious symptoms	Short-term "crisis" or symptom-focused therapy (may involve concurrent pharmacological treatment)	
(2) Problem solving: improved performance and satisfaction in personal relationships	Medium-term Supportive-exploratory therapy (e.g. psychodynamic, cognitive, cognitive-behavioral, experiential, or systemic)	Medium-term Supportive-exploratory therapy (e.g. psychodynamic, cognitive, cognitive-behavioral, experiential, or systemic)
(3) Enlightenment: pursuit of self-understanding, sense of purpose, and meaning in life		Long-term exploratory psychotherapy (e.g. psychoanalytic or existential-humanistic)

What makes psychotherapy work: (Wampold & Imel, 2015)

- relationship: interaction with an empathic and caring therapist
- expectations: collaborative working relationship, acceptance of the explanation and the treatment
- other specific aspects, potential interaction: individual-therapist-issue-therapy approach



RELAXATION

In 1966 Hans Selye defined stress as: “the non-specific response of the body to any demand for change”. That is important, because it means your body’s response is the same when you meet a bear or an angry and rude car driver. Stress, as we will address it, is an inner state. That means its level is very individual no matter the situation.

University student specific stressors:

According to the study of Somerlíková and Salaba (2018), Czech students go through lots of health problems - the most common mental problems are: irritability, fatigue and exhaustion, gloominess, bad mood, nervousness and tension, and sleep difficulties.

Basic methods to reduce stress level: eating habits, sleep and rest, exercise, social support, cognitive approach, spirituality and relaxation (Drotárová & Drotárová, 2003).

Relaxation: relaxation is when the body and mind are free from tension and anxiety. It can be conscious (relaxation methods) or unconscious (sleep).

Relaxed state (physiological relaxation response): Simply put, the relaxation response is the opposite of your body's stress response—your "off switch" to your body's tendency toward fight-or-flight. Your body activates a parasympathetic nervous system, the breath slows down and deepens, the consumption of oxygen decreases, as well as your blood pressure, heartbeat and the whole metabolism. Some neurotransmitters are released, such as serotonin, which positively affects your mood.

Relaxation methods:

- Body focused techniques (e.g. massage or acupressure)
- Breath focused techniques
- Concentration focused techniques (e.g. progressive muscle relaxation, autogenic training, meditation, mindfulness)
- Guided imagery
- Technological relaxations (float tanks, sensory deprivation)
- Others (e.g. aromatherapy, dance relaxation...) (Drotárová & Drotárová, 2003).

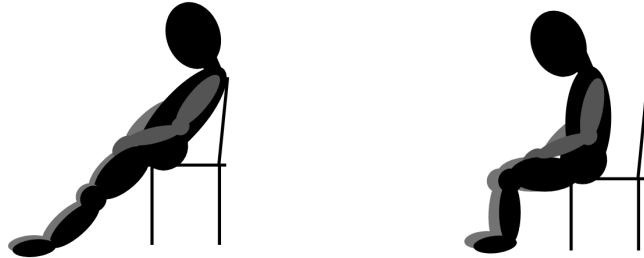
Relaxation preparation:

- calm environment without disturbing elements
- adequate temperature
- appropriate mat
- appropriate relaxation position (Schwartz, 1995).

RELAXATION

Basic relaxation positions:

- lying on your back
- lying on your belly
- the "mexican layabout"
- the coachman position



Personalizing relaxation tips (Schwartz, 1995):

Try to find a time during the day, that will suit you for your relaxation - it may be the morning or the lunch break or maybe before sleep - experiment and explore when you are able to relax the most.

If you are a beginner, it may last about 15-30 minutes till you achieve the relaxed state. With training it can be much faster. Also with every technique the time needed will be slightly different - you and only you can tell how much time you want to spend practising.

Lots of people like relaxation with music in the background, but some of them do not. Find what is best for you. It is crucial that the music should support relaxation, not disturb.

If you fall asleep during the relaxation, it is OK and quite common. If you want to be sure that you won't oversleep - set an alarm to be sure.

As with any new skill, your first few relaxation attempts may not measure up to your hopes, though with practice you can learn to relax when you need to. Remember, just as there is no one way to decorate a room, there is no one right way to relax. Experiment. Try several different paths to relaxation, trusting that you know what works best for you. Feel free to adapt and modify the techniques, adding the personal touches that make relaxation easier and more likely to be part of a regular routine.

Like moving into a new room or a new house, the practice of relaxation may take a little getting used to. However, in time, you make the necessary changes, and the room becomes your own and your house becomes your home.

GUIDED IMAGERY

Schwartz, 1995: GUIDED IMAGERY

Visualization is a process in which you use mental images to explore your inner psychic and creative space. You do it every day. Guided imagery takes this process one step further by *guiding* the images toward a specific life-enhancing goal, such as relaxing, healing, promoting personal growth, exploring alternatives, clarifying values, stimulating creativity, or managing stress. In relaxation and guided imagery training the terms visualization and imagery are usually used interchangeably to refer to the active evocation of mental sensory images - sight, sound, taste, smell, and touch.

Research is beginning to document the significant power of our mental processes to positively affect our well-being, yet guided imagery is not magic. The effectiveness of guided imagery is grounded in the mind-body connection. As far as the body is concerned, sensory images have nearly the same impact as actual sensory experience.



Always begin with relaxation. Placing your body and mind in a state of active relaxation is the best preparation for the use of guided imagery.

Since guided imagery is a process of self-exploration by creating images of physical journeys and settings that reflect inner states and feelings, it is most effective when approached with a clear and open mind. Let yourself go with the flow of the narration.

When choosing to immerse yourself in an imagery exploration, there is, by definition, no right or wrong way to do it. You are the explorer, and the territory is all your own. You go where you want, when you want, with whatever supplies you need.



Everyone's life experiences are unique. It is very difficult to anticipate which images may trigger pain for certain people. Keep in mind that even though some guided images may be painful, they may be part of a healing process for past or present wounds. If possible, stay open to all your feelings, even painful ones, and allow yourself to experience them fully. However, if you know in advance that a particular image might be frightening or emotionally upsetting to you, and you would prefer not to explore that area, it is perfectly okay to sit out the exercise, or to modify the image in any way that you want. Trust your intuition and do what is best for you.



MINDFULNESS

Williams & Penman, 2014: Mindfulness: a practical guide to finding peace in a frantic world

Mindfulness originally comes from a buddhist tradition called “sati” in the Pali language, “všímavost” or “bdělá přítomnost” in the Czech language.

Mindfulness is a key concept of buddhism, it is presented as the way of living that frees people and enables them to live their best possible lives. This is Buddha's quote about the importance of mindfulness: *“This is the direct path for the purification of beings, for overcoming sorrow and lamentation, for the disappearance of distress and grief, for the attainment of the practice, for the realization of Nibbāna – namely, the four foundations of mindfulness.”*

According to Buddhism, the Four Foundations of mindfulness are the key things we should practice being mindful of. These are: our bodies, our feelings, our minds themselves, and phenomena or the world around us. By training the mindfulness of these four foundations, we see, more and more, how all of these things really are, outside of our conceptual ideas of them. Training the four foundations of mindfulness is training seeing reality with more clarity and equanimity. And what's more, we have these four things everywhere with us, accessible at any time.

Buddhist thoughts started to invade Europe during the 19th century and came into western psychology around the end of the 20th century. Sigmund Freud was aware of some of the aspects of buddhist psychology - psychoanalysis uses a technique called “free floating awareness”, which is very similar to mindfulness. However, the first western psychologist who was thoroughly interested in the study of Buddhism was Carl Gustav Jung. Also Sigmund Freud was aware of some aspects of buddhist psychology - psychoanalysis uses a technique called “free floating awareness”, which is very similar to mindfulness.

After WWII, buddhist thoughts spread fast, because of the development of humanistic and transpersonal psychology and the postwar freedom to travel.

In the 70's the uncritical excitement died down and meditation became the subject of scientific examination. Because of its overwhelming results, meditation was thereafter integrated into therapies.

The first programs based on mindfulness cultivation started emerging: the most famous worldwide program is the Mindfulness Based Stress Reduction program (MBSR) by American scientist Jon Kabat-Zinn. It was originally made for patients with chronic pain, but now it is used for various groups of people in various social settings (prisons, schools, hospital, etc...).

MINDFULNESS

Numerous psychological studies have shown that people who meditate regularly are happier and more content than average.

- Anxiety, depression and irritability all decrease with regular sessions of meditation. Memory also improves, reaction times become faster and mental and physical stamina increase.
- Regular meditators enjoy better and more fulfilling relationships.
- Studies worldwide have found that meditation reduces the key indicators of chronic stress, including hypertension.
- Meditation has also been found to be effective in reducing the impact of serious conditions, such as chronic pain and cancer, and can even help to relieve drug and alcohol dependence.
- Studies have now shown that meditation bolsters the immune system and thus helps to fight off colds, flu and other diseases.

The neurobiology of mindfulness meditation:

Just like meditation in general, mindfulness meditation also has the effect of irreversible and long term structural and functional changes on the human brain, especially in parts which are responsible for attention, executive functions and emotional regulation.



SPORT AND THE MIND

Physical exercise can have short-term and long-term positive effects on our mind and mental health.

Physical activity is a form of physical stress that puts a strain on our body. It induces several biological processes involving mainly the secretion of hormones and neurotransmitters that influence our bodily condition, our brain and thus even our mind (Harvard Health Publishing, 2020; Alschuler, 2016):

- **Activation of HPA axis** – The hypothalamus, the pituitary gland and the adrenal cortex release a series of hormones (cortisol and adrenaline are the final products) that activate the sympathetic nervous system which influence the bodily stress response -> higher blood pressure, increased heartbeat, faster and deeper breath, sharpened senses, changes in glucose metabolism, immune-system function reduction, which all helps the body to fight the enemy or run away from danger. The parasympathetic system calms the body down afterwards (Understanding the stress response, 2020; Scott, 2020). After the stress response is over, our body needs some time to renew after the reaction and it cannot perform another large stress reaction immediately afterwards. Also, the condition of the body after the stress response can work as a buffer to other stress reactions, even the psychological ones (Zschucke et al., 2015).
- **Endocannabinoids increase** - Endocannabinoids are neurotransmitters that decrease anxiety by attaching to cannabinoid receptors in the brain - the same receptors that marijuana interacts with (Steiner & Wotjak, 2008).
- **Serotonin secretion** - Low levels of serotonin are associated with depression and antidepressants used as medication for treating depression often influence the levels of this substance (Cowen & Browning, 2015, Zimmer et al., 2016).
- **BDNF (brain-derived neurotrophic factor) increase** - BDNF supports neuroplasticity by helping neurons to grow and to form new neural connections. Low levels of BDNF are also associated with depression (Duman & Monteggia, 2006).

However, the studies mentioned above are most often focused on the short term period after the exercise, often in terms of hours. Can sport also influence our mental health even in the long term point of view?

SPORT AND THE MIND

In Chekroud et al.'s (2018) study, people who did regular physical exercise reported less poor mood days than those who do not did not exercise at all. The best mood was reported by people doing team sports, cycling, aerobic and gym activities. In Siefken et al.'s. study (2019), participants who followed World Health Organization's recommendations for regular physical exercise showed lower levels of depression and anxiety. The study of Yen and Cherng (2020) shows that the severity of depressive symptoms in students decreased by 26% after attending a regular jogging programme (3 times a week).

However, sport should not be considered as a universal reliable cure for mental health problems. Even in the studies mentioned above the physical exercise did not have an impact on everyone. It is always important to consider the individual differences and the individual's needs. Nevertheless, as well as the other psycho-hygienic activities, sport can be a useful tool that can help us maintain our mental health, lower the levels of depression and anxiety or reduce acute stress or nervousness that we might face in our everyday life.



SPORT AND THE MIND

WHO: Recommended levels of physical activity for adults aged 18 - 64 years

Quoted directly from: World Health Organization. (n.d.) Physical activity and adults. <https://www.who.int/teams/health-promotion/physical-activity/physical-activity-and-adults#:~:text=Adults%20aged%2018%E2%80%9364%20should,%2D%20and%20vigorous%2Dintensity%20activity>

In adults aged 18–64, physical activity includes leisure time physical activity (for example: walking, dancing, gardening, hiking, swimming), transportation (e.g. walking or cycling), occupational (i.e. work), household chores, play, games, sports or planned exercise, in the context of daily, family, and community activities. In order to improve cardiorespiratory and muscular fitness, bone health, and reduce the risk of NCDs and depression:

- Adults aged 18–64 should do at least 150 minutes of moderate-intensity aerobic physical activity throughout the week or do at least 75 minutes of vigorous-intensity aerobic physical activity throughout the week or an equivalent combination of moderate- and vigorous-intensity activity.
- Aerobic activity should be performed in bouts of at least 10 minutes duration.
- For additional health benefits, adults should increase their moderate-intensity aerobic physical activity to 300 minutes per week, or engage in 150 minutes of vigorous-intensity aerobic physical activity per week, or an equivalent combination of moderate- and vigorous-intensity activity.
- Muscle-strengthening activities should be done involving major muscle groups on 2 or more days of the week.

These recommendations are relevant to all healthy adults aged 18–64 years unless specific medical conditions indicate to the contrary. They are applicable for all adults irrespective of gender, race, ethnicity or income level. They also apply to individuals in this age range with chronic noncommunicable conditions not related to mobility such as hypertension or diabetes.

These recommendations can be valid for adults with disabilities. However, adjustments for each individual based on their exercise capacity and specific health risks or limitations may be needed.

SPORT AND THE MIND

There are multiple ways of accumulating the total of 150 minutes per week. The concept of accumulation refers to meeting the goal of 150 minutes per week by performing activities in multiple shorter bouts, of at least 10 minutes each, spread throughout the week and then adding together the time spent during each of these bouts: e.g. 30 minutes of moderate-intensity activity 5 times per week.

Pregnant, postpartum women and persons with cardiac events may need to take extra precautions and seek medical advice before striving to achieve the recommended levels of physical activity for this age group.

Inactive adults or adults with disease limitations will have added health benefits if moving from the category of “no activity” to “some levels” of activity. Adults who currently do not meet the recommendations for physical activity should aim to increase the duration, the frequency and finally the intensity.



MINDFUL YOGA

Yoga = combination of physical, mental and spiritual practices (Moss, 2018).

The term “yoga” comes from the Sanskrit word “yuj” which means “to attach.” Thus, yoga is often interpreted as “the union.” It is understood as a way to unite our mind and body, our ego-self and divine self, the body, God and soul. However, apart from the spiritual practice, yoga is used worldwide to relax and improve strength, flexibility, breath control, body perception and overall well-being (Moss, 2018). There are many different types of yoga that differ for example in the difficulty of the exercises, the surroundings (e.g. heat environment), or the activities involved (e.g. singing, praying, meditating; Moss, 2018; Yoga Point, n.d.).

Mindful yoga – practicing yoga with awareness and acceptance of where we are in the here and now.

Patañjali Yoga Sutras (a Hindi text from the fifth century which was written in Sanskrit) divides yoga into eight aspects:

I. Yama – ethical observances and principles

- **Asima** – non-violence, not to hurt any living being
- **Satya** – truth (telling the truth, accepting our true self)
- **Asteya** – non-stealing, not-being envious, not manipulating
- **Brahmacharya** – chastity, marital fidelity, or sexual restraint
- **Aparigraha** – non-possessiveness, non-attachment, acceptance of yourself here and now

II. Niyama – Commitments that yoga practitioners decide to follow in everyday life.

III. Asana – The component of yoga that people are most often familiar with. Asanas are the particular postures of our body we are trying to get in when practicing yoga exercise. However, more or less difficult asanas should not be the main goal of yoga. In yoga, the journey, not the destination should be our main goal. We can understand yoga as an opportunity to listen to our body, to be kind to it and to challenge it a little bit to get as close to the particular asana as possible for us in the moment, but not to push it into a certain position for which it is not ready yet.

IV. Pranayama – breath control exercises (Moss, 2018). This type of exercise helps us to focus on our body and stay mindful, but it also has physical benefits. It helps strengthen the abdominal muscles and as it is usually associated with prolonged exhaling, which activates the parasympathetic nervous system (Holcombe, 2017) which elicits the bodily relaxation response and decreases anxiety (Hurley, 2018).

MINDFUL YOGA

V. Pratyahara - turning the attention inwards.

VI. Dharma - concentration or focus.

VII. Dhyana - meditation and contemplation.

VIII. Samaghi - union or oneness with the divine

Other terms associated with yoga

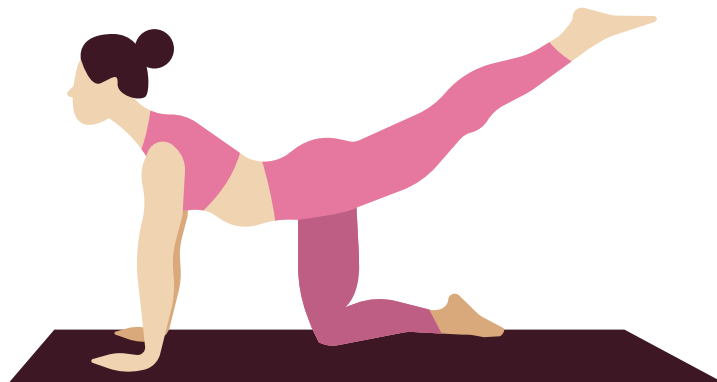
Dristhti - in some yoga exercises, the lecturer asks you to focus on a certain point of your body, a certain dristhti (for example fingertips, abdominal parts, back), which should help you to focus on the particular asana.

Chakras - another term known even to people who do not practice yoga. Chakras refer to energies that belong to particular parts of your body. Whether you believe in chakras or not, imaging them might help you to relax and to perform certain asanas.

Mudra - a symbolic gesture with the hands and fingers, usually used in pranayama or meditation.

Mantra - a chant or prayer repeated over and over for spiritual or ritualistic reasons. The sound itself is considered as even more important than the meaning of the particular mantra. Om - the sound of the soul, the universe.

Namaste - a Hindu greeting that is used to express respect (usually by kids to the elderly). In western yoga classes it is often misinterpreted as having a spiritual meaning . In fact, in India it is used rather as a greeting without any spiritual connotation (Singh, 2015).



JACOBSON'S PROGRESSIVE RELAXATION TECHNIQUE GUIDE

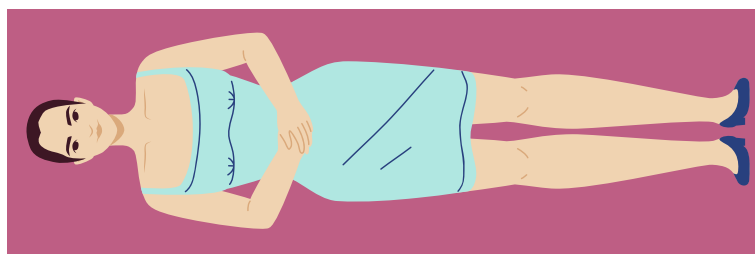
Jacobson's progressive muscle relaxation (JPMR) is a technique created by the physician and psychiatrist Edmund Jacobson (Gessel, 1989).

The aims of the relaxation are to notice and observe the tension that we might feel in the muscles of our body and to relax the muscles afterwards to release the tension (Jacobson, 1890).

Jacobson believed (and also provided empirical evidence) that the muscular tension in our body might stimulate our nerves, which either causes or exaggerates the symptoms of nervousness, anxiety and stress (Gessel, 1989). He also described so called "highly nervous people" who are in tension due to a hectic, restless lifestyle and who are due to this high tension more vulnerable, to the impact of casual stressors (Jacobson, 1890). He also believed that after releasing the tension in our muscles, the nerves get less stimulated and thus the relief from nervousness and anxiety symptoms appears. In his clinical practice he observed an improvement in most of his patients.

However, Jacobson's technique requires dedication to learn how to relax, because to undergo the entire process of a whole body relaxation requires hours of practice every day.

Jacobson created specific guides to follow when learning to relax, however, it might be in a personalised way. In the first guide a person learns how to relax lying down, the second one is dedicated to sitting relaxation (Jacobson, 1980).



THE TEACHER'S GUIDE TO THE
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PART II

TRY THIS AT HOME



BURNOUT SELF-CHECK:

OLBI-S English version

Instruction: Below you will find a series of statements with which you may agree or disagree. Indicate the degree with which you agree with the given statement by selecting the corresponding number.

	Strongly agree	Agree	Disagree	Strongly disagree
1 I always find new and interesting aspects in my studies.	1	2	3	4
2 It happens more and more often that I talk about my studies in a negative way.	1	2	3	4
3 Lately, I tend to think less about my academic tasks and do them almost mechanically.	1	2	3	4
4 I find my studies to be a positive challenge.	1	2	3	4
5 Over time, one can become disconnected from this type of study.	1	2	3	4
6 Sometimes I feel sickened by my studies.	1	2	3	4
7 This is the only field of study that I can imagine myself doing.	1	2	3	4
8 I feel more and more engaged in my studies.	1	2	3	4
9 There are days when I feel tired before I arrive in class or start studying.	1	2	3	4
10 After a class or after studying, I tend to need more time than in the past in order to relax and feel better.	1	2	3	4

	Strongly agree	Agree	Disagree	Strongly disagree
11 I can tolerate the pressure of my studies very well.	1	2	3	4
12 While studying, I often feel emotionally drained.	1	2	3	4
13 After a class or after studying, I have enough energy for my leisure activities.	1	2	3	4
14 After a class or after studying, I usually feel worn out and weary.	1	2	3	4
15 I can usually manage my study-related workload well.	1	2	3	4
16 When I study, I usually feel energized.	1	2	3	4

Note. Disengagement items are 1, 3(R), 6(R), 7, 9(R), 11(R), 13, 15.

Exhaustion items are 2(R), 4(R), 5, 8(R), 10, 12(R), 14, 16.

(R) means reversed item when the scores should be such that higher scores indicate more burnout.

Means and standard deviations for German students (N=560):

	Mean	SD
Exhaustion	2.28	.61
Disengagement	1.99	.55

Sources of the questionnaire:

Demerouti, E., Mostert, K., and Bakker, A. B. (2010). Burnout and work engagement: A thorough investigation of the independency of both constructs.. *Journal of Occupational Health Psychology*. *Journal of Occupational Health Psychology*. <http://doi.org/10.1037/a0019408>

Reis, D., Xanthopoulou, D., and Tsaousis, I.. (2015). Measuring job and academic burnout with the Oldenburg Burnout Inventory (OLBI): Factorial invariance across samples and countries. *Burnout Research*. *Burnout Research*. <http://doi.org/10.1016/j.burn.2014.11.001>

RELAXATION

Find an audio recording of an autogenic training - it is very simple (try for example YouTube). Choose the recording with the voice and pace you like the most.

Experiment with different times of the day, different relaxation positions, etc. and optimise the training for yourself. Try to practise the relaxation every day for the following week. Make notes about how it was, what worked and did not work for you etc.

Your notes

Day 1:

Day 2:

Day 3:

RELAXATION

Day 4:

Day 5:

Day 6:

Day 7:



GUIDED IMAGERY

Find an audio recording of a guided imagery - it is very simple (try for example YouTube). Choose a recording with a voice and a pace you like.

Experiment with different themes of imagery. Try to practise imagery every day for the following week. Make notes about how it was, what worked and did not work for you etc.

Your notes:

Day 1:

Day 2:

Day 3:

GUIDED IMAGERY

Day 4:

Day 5:

Day 6:

Day 7:



MINDFULNESS

Try to practise one mindfulness practise every day for the following week:

Day 1: Mindful eating

Today, pay your attention to every meal you eat. If you can, switch off your phone, or the notifications, so you can be more present during eating. Focus on every sense: touch (how does the food feel in your hand, on your lips or in your mouth?), sight (let your eyes explore every part of the food), hearing (what do you hear when eating, chewing...), smell (what is the scent like, what does it remind you of?) and taste (try to sense the taste as if you had never eaten that meal before).

Your notes:

Day 2: Mindful walking

Today go for a mindful walk. If you can, switch off your phone, or the notifications, so you can be more present during walking. Focus on every sense: touch (how does the walk feel - the contact of your feet with the ground, or the wind on your skin...), sight (let your eyes explore the world as if you had never seen it before), hearing (do you hear birds sing, or the wind blow in the crowns of trees...), smell (what is the scent of the air like?) and taste (try to sense a taste of the air...).

Your notes:

MINDFULNESS

Day 3: Sitting meditation

Go to <https://www.youtube.com/watch?v=I9Z4t9ZiUzM> (or find the youtube video called: Jon Kabat-Zinn, Guided Mindfulness Meditation, Series 1, Sitting Meditation). Try this guided meditation by Jon Kabat Zinn himself.

Your notes:

Day 4: Mindful shower

Today, take a mindful shower. Focus on every sense: touch (how does the water feel on your skin...?), sight (let your eyes explore the water drops and stream), hearing (how does the water sound...?), smell (what is the scent of your soap like? does the water itself have a smell?) and maybe the taste also (can you tell if the water has any taste?).

Your notes:

MINDFULNESS

Day 5: Mindful hearing

Try to focus on your hearing today.

Whatever you do remember to stop for a second and realize what you're hearing? Notice all of the quiet sounds you normally ignore or do not hear at all. Try to find new sounds you have never noticed or appreciate some pleasant ones you usually omit.

Your notes:

Day 6: Mindful sight

Try to focus on your sight today.

Whatever you do remember to stop for a second and realize what you see? Notice all of the details you normally ignore or do not see at all. Try to find something you have never noticed or appreciate something you usually omit.

Your notes:

MINDFULNESS

Day 7: Mindful day

Have a whole mindful day today! Finally take notes of everything that you find interesting about it. How was it? Was it hard? What did you enjoy about it? What surprised you? What aspects of mindful living do you want to incorporate into your regular routine?

Your notes:



SPORT AND THE MIND

Your self-experience task for the following week is to practice a mindful physical activity. Choose any sport you like, you would like to try, you used to do, you are used to doing, you have never tried before - any sport that is attractive to you for whichever reason. Practice the sport mindfully at least 3 times a week but if you feel like kindly challenging yourself, you can try it even every day. For the purpose of this exercise, choose only one sport so that you can observe the differences between particular days.

When practicing the sport try to follow these principles of mindful sport:

- listen to your needs and to the needs of your body
- start to do the sport when your body feels like doing the sport
- when doing the sport, put as much effort into it as your body feels like putting into it
- do not have any expectations about your performance
- try to do the sport for the sport itself and for yourself, not for the highest performance, nor for the best results, nor for completing this task
- if you feel like sweating, breathing deeply, and feeling pain in your muscles, go for it, your activity can be hard as well as it can be a mild exercise when your heartbeat barely gets faster, it's all up to you.

Your notes:

Sport chosen:

Why did you choose this sport:

Day 1: How did you feel when and after doing the sport? How was it:

SPORT AND MIND

Day 2: How did you feel when and after doing the sport? How was it:

Day 3: How did you feel when and after doing the sport? How was it:

The other days (if you decided to practice more times):
How did you feel when doing the sport? How was it:



MINDFUL YOGA

Try to practice yoga exercise every day for the following week. Do not force yourself into particular positions, try to listen to your body. Try to be here and now.

If you want to challenge yourself a little bit more, you can try to follow the eight aspects of yoga mentioned above.

Enjoy!

Your notes:

Day 1:

Day 2:

Day 3:

MINDFUL YOGA

Day 4:

Day 5:

Day 6:

Day 7:



JACOBSON'S PROGRESSIVE RELAXATION TECHNIQUE GUIDE

During next week you are going to practice Jacobson's progressive muscle relaxation (JPMR) every day. You will not be able to complete the whole programme that Jacobson recommended to calm and relax the whole body, since only the left hand training takes nearly a week. However, if you enjoy the relaxation during the week and if you want to undergo the whole process, you can find the instructions even for the other parts below.

The process is adapted from Jacobson's book *You must relax* (1980).

Jacobson's progressive muscle relaxation - lying down version

General recommendations for the **lying down version** of JPMR

During the relaxation:

- lie on a wide couch or bed
- lie on your back
- the hands are put alongside your body, but in a way so that they do not touch your body (chest, stomach) or the clothes on it
- the legs are placed straight, do not bend or cross them
- you may or may not place a small pillow under your head. Either way, your head should not fall backwards
- do not speak or be spoken to

The aim of the relaxation is to **observe and recognise the tension** in the muscles when they are contracted and to **relax** them afterwards. Observation and relaxation are both of the same importance.

The relaxation part should **be the opposite** of the tension and of the effort you put into the contraction.

Jacobson says: **Do nothing** when you relax. Do the opposite of doing anything.

Jacobson recommends 1 - 2 hours of JPMR every day. But change this time to any that is suitable for you so that you feel comfortable and not under any pressure.

Try to avoid the **effort error** - do not put any effort into making your muscles relaxed.

Do not perform too much contraction when exercising JPMR - three to five contractions per hour are enough.

You do not need to measure the exact time of the individual parts of the JPMR.

The arrows in the pictures below show you where you should primarily feel the tension.

JACOBSON'S PROGRESSIVE RELAXATION TECHNIQUE GUIDE

A brief dictionary you might use when following the instructions of JPMR:

Slovníček

arch - prohnout se do oblouku
bend - ohnout, prohnout, pokrčit
buttock - hýždě
cheeks - tvář, líce
draw - táhnout, zatáhnout
elbow - loket
extend - roztáhnout, natáhnout, napnout
eyeball - oční bulva
floor of the mouth - patro v puse
forehead - čelo
forearm - předloktí
heel - pata
jaws - čelisti
hip - bok, kyčel
lips - víčka
lips - rty
muscle - sval
press - zatlačit, tlačit
shoulders - ramena
shoulder blade - lopatka
shrug - pokrčit rameny
stifle - potlačit, zatlačit
strain - zátěž, tlak, vypětí
tension - napětí, pnutí
thigh - stehno
toe - prst u nohy
tongue - jazyk
wrinkle - vrásky, svraštit čelo
wrist - zápěstí

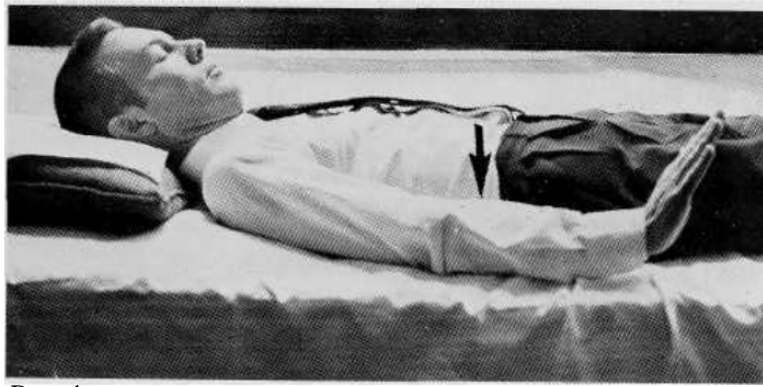
JACOBSON'S PROGRESSIVE RELAXATION TECHNIQUE GUIDE

The day by day programme for the complete JPMR of the whole body:

Left hand (or right hand if you are left handed).

Day 1

1. Lie quietly on your back with your eyes open for about 3 minutes, close your eyes gradually. Keep them closed for the rest of the relaxation.
2. Bend the left hand steadily back at your wrist and hold for up to a minute. Observe the strain and tension.
3. Relax all the muscles involved. Do the opposite of tension. Do nothing. Relax for several minutes.
4. Repeat up to three times.



Day 1

Day 2

1. Lie for 10 minutes, close your eyes gradually, then keep them closed.
2. Bend and relax the left hand as you learnt on day one.
3. Bend the hand forward at the wrist, hold it for up to a minute, observe the tension in your hand.
4. Relax the left hand for several minutes. Do nothing.
5. Repeat the forward bending and following relaxation up to three times.

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Day 2

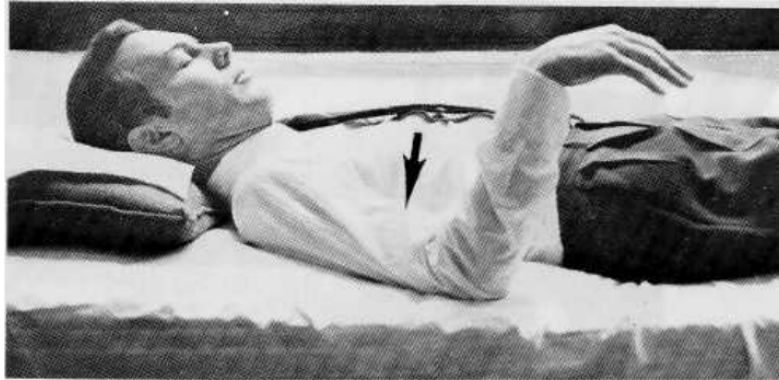
Day 3

1. Lie on your back with your eyes open, close them gradually. Do nothing else. Just relax. Do not contract any part of your body. If you feel any tension, try to relax the tense muscle.

Day 4

1. Lie several minutes on your back, close the eyes gradually, then keep them closed.
2. Repeat the Day 1 and Day 2 contractions and relaxations once.
3. Bend your left arm at the elbow (in an about thirty degrees angle) letting the hand drop at the wrist. Observe the tension. Hold two or three minutes.
4. Relax for about three minutes. Do the opposite of contraction, do nothing.
5. Repeat two times with the period of relaxation longer with every attempt.

JACOBSON'S PROGRESSIVE RELAXATION TECHNIQUE GUIDE



Day 4

Day 5

1. Lie your left wrist and forearm on one or two books (see the picture).
2. Lie several minutes on your back, close the eyes gradually, keep them closed.
3. Press gently against the books, observe the tension.
4. Relax the hand for several minutes.
5. Repeat up to three times.



Day 5

JACOBSON'S PROGRESSIVE RELAXATION TECHNIQUE GUIDE

Day 6

1. The same as day 3. Lie on your back with eyes open, close them gradually. Do nothing more. Just relax. Do not contract any part of your body. If you feel any tension, try to relax the tense muscle.

Day 7

1. Lie several minutes on your back, close the eyes gradually, keep them closed.
2. Stifle the left hand so that it is rigid, but straight, do not move it. Observe the tension. Hold for 30 seconds.
3. Relax the hand gradually to gain the opposite of contraction.
4. Repeat three times. In each attempt the contraction should be a little milder (the last one is very weak) and the relaxation should be deeper and longer.

You find the instructions for the lying down version of JPMR of the remaining body parts below. You might follow them if you wish to. You might interchange the sequence of the body parts or repeat particular sequences as you need. After completing all of the body parts, according to Jacobson, you should be able to relax your whole body and reduce the symptoms of your nervousness and anxiety.

Try to integrate a period without any tension (as Day 3 or 6) from time to time.

JACOBSON'S PROGRESSIVE RELAXATION TECHNIQUE GUIDE

Routine for EVERY body part relaxation:

The basic course of every relaxation is the same for every body part:

1. Lie for several minutes on your back, close the eyes gradually, keep them closed.
2. Contract a particular muscle part and observe the tension.
3. Relax the muscle. Try to do the opposite of contraction. Do nothing.
4. Repeat the contraction - relaxation up to three times.

Right hand

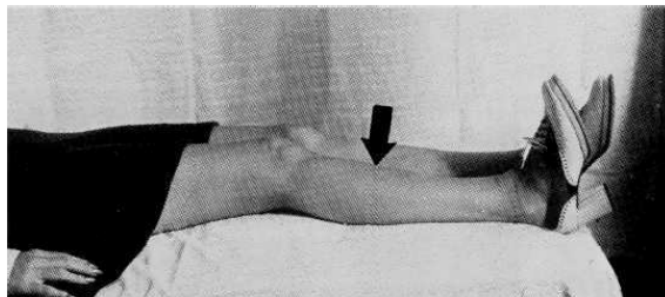
Follow all days of the instructions for the left hand, this time for the right hand.

Right and left leg

The relaxation of the legs should take **9 days each**. First complete all the days for one leg and then all days for the other one.

The contraction parts of particular days are:

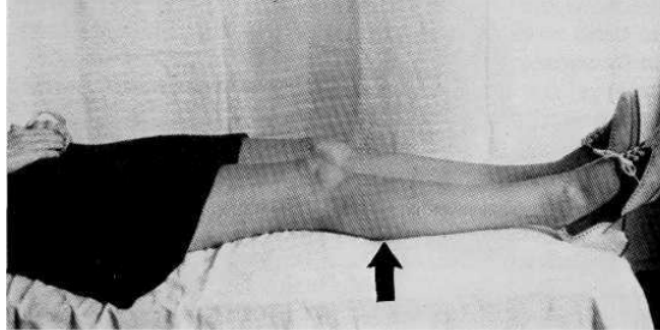
Day 1 - Bend the foot or toes forward your face.



Day 1

Day 2 - Bend your toes or foot downward.

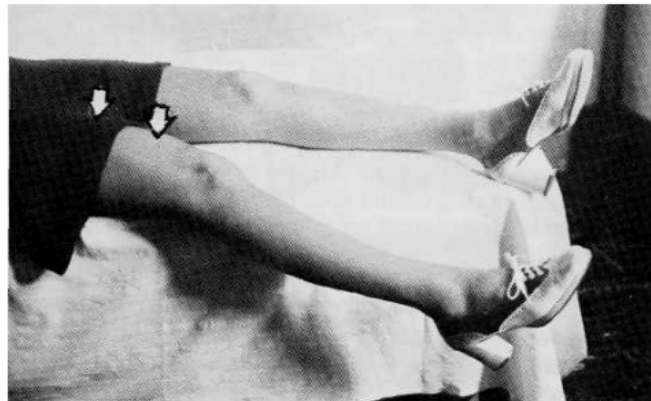
JACOBSON'S PROGRESSIVE RELAXATION TECHNIQUE GUIDE



Day 2

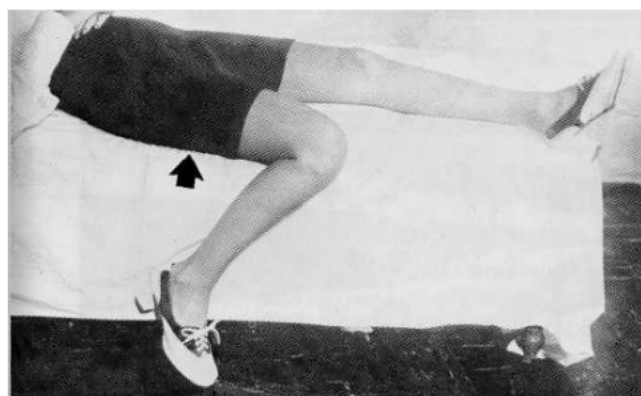
Day 3 - Relaxation without any tension.

Day 4 - Extend your leg, put it slightly off the bed, do not touch the ground. Observe the tension in your upper thigh.



Day 4

Day 5 - Bend your leg with the heel pressing upward. Observe the tension in the back part of the thigh.

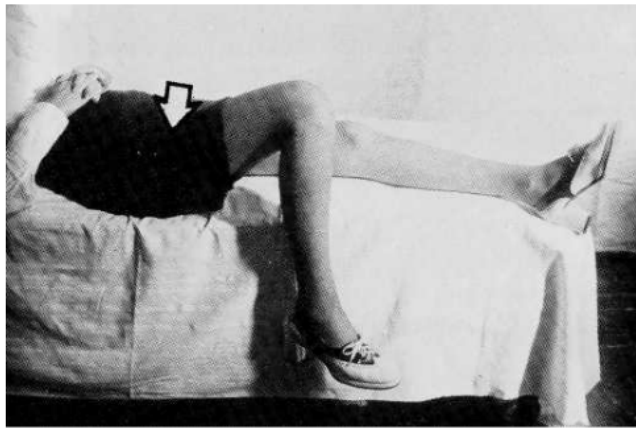


Day 5

JACOBSON'S PROGRESSIVE RELAXATION TECHNIQUE GUIDE

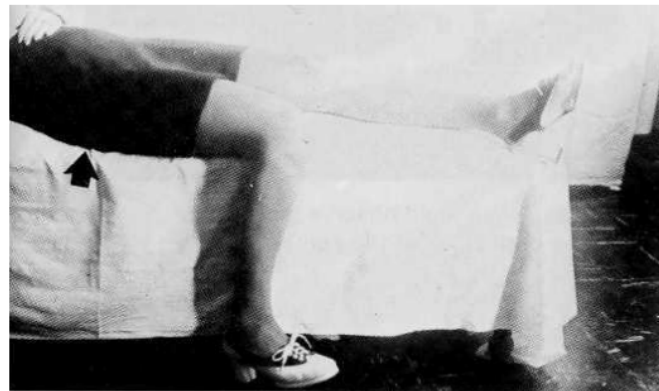
Day 6 - Relaxation without any tension.

Day 7 - Bend the leg at the hip with the other leg hanging limply over the edge of the bed.



Day 7

Day 8 - Press your heel down against the floor. Observe the tension in your buttock.



Day 8

Day 9 - Relaxation without any tension.

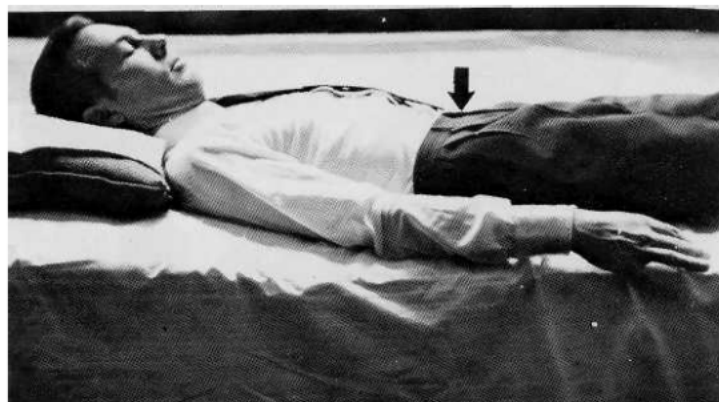
JACOBSON'S PROGRESSIVE RELAXATION TECHNIQUE GUIDE

Abdomen, back and chest

The relaxation of the abdomen and chest should take **3 days altogether**.

The contraction parts of particular days are:

Day 1 - draw the abdominal muscles



Day 1

Day 2 - arch your back until you feel the tension along both sides of the spine.



Day 2

Day 3 - during ordinary quiet breathing note the faint and diffuse tension all upon your chest. You should feel the tension when inhaling, during the exhalation you should feel relaxation. **Note!** This day **should not** be followed by intentional relaxation of the breathing muscles! Just focus on the contractions and relaxations when breathing normally.

JACOBSON'S PROGRESSIVE RELAXATION TECHNIQUE GUIDE



Day 3

Shoulders

The relaxation of the shoulders should take **1 day**.

For the contraction part:

1. Extend the arm forward and inward. Observe the tension.
2. Relax. Do nothing. Do the opposite of anything.
3. Move your shoulders backward and toward the spine, your shoulder blades come together.
4. Relax. Do nothing.
5. Shrug the shoulders.
6. Relax. Do nothing.

Neck

The relaxation of the neck should take 2 days.

For the contraction part:

1. Incline the head to the left, to the right, forward and backward. Observe the tension.
2. Let the head fall slowly, relax the muscles.
3. Repeat the same practice for Day 2.

JACOBSON'S PROGRESSIVE RELAXATION TECHNIQUE GUIDE



Neck

Face

The relaxation of the face should take **2 days**.

For the contraction parts:

1. Wrinkle your forehead.
2. Relax, do nothing.
3. Frown your brows.
4. Relax, do nothing.
5. Shut your eyelids.
6. Relax. Do nothing.
7. Repeat for each of the three days.



Face

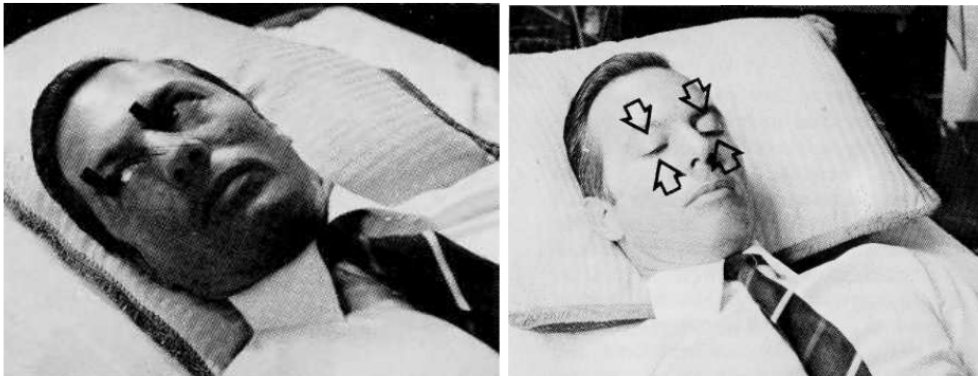
JACOBSON'S PROGRESSIVE RELAXATION TECHNIQUE GUIDE

Eyes

The relaxation of the eyes should take **7 days**.

For the contraction parts:

1. With closed eyes (on the picture there are opened for illustration purposes) look left, look right, look up, look down, look forward so that you try to see something right in front of you. Observe the tension in the eye area.
2. Relax your eyebulb. Let it fall as it needs to.
3. Repeat the whole process times every day.



Eyes

Mental activities:

The relaxation of mental activities should take **7 days**.

The contraction parts are:

Day 1

1. Remain in a silent room.
2. With your eyes closed, imagine that you see the ceiling and then the floor of the room. Notice and observe the slight tension in your eyes and eyes muscles.
3. Relax your eyes.
4. Repeat up to three times.

JACOBSON'S PROGRESSIVE RELAXATION TECHNIQUE GUIDE

Day 2

1. With your eyes closed, imagine the wall on your left and then on your right. Observe the mild tension in your eye area.
2. Relax your eyes.
3. Repeat up to three times.

Day 3

1. With eyes closed, imagine a car passing in front of you. Observe the tension in your eye area.
2. Relax your eyes.
3. Repeat up to three times.

Day 4 and 5

1. With your eyes closed imagine a small object - birds flying, flowers in the wind, a ball floating in the sky, a tall tree or tower, a passing train, a blade of grass, a sailing boat, a rolling ball, a circle, triangle, square, ...
2. Relax your eyes.
3. Repeat up to three times.

Day 6 and 7

1. With your eyes closed, imagine more complex pictures and sensations. For example yourself reading the newspaper, studying or watching a lecture at school, going for a social meeting...
2. Relax your eyes.
3. Repeat up to three times.

JACOBSON'S PROGRESSIVE RELAXATION TECHNIQUE GUIDE

Cheeks

The relaxation of the cheeks should take **1 day**.

For the contraction part:

1. Bare your teeth and observe the tension in your cheeks.

Jaws

The relaxation of the jaws should take **2 days**.

For the contraction part:

1. Close your jaws tightly and observe the tension.
2. Repeat both days.

Lips

The relaxation of the lips should take **1 day**.

For the contraction part:

1. Round the lips as when saying "oh" and observe the tension.

Tongue

The relaxation of the tongue should take **2 days**.

For the contraction part:

1. Press the tongue towards the floor of the mouth and observe the tension.
2. Repeat every day.

Speech

The relaxation of speech should take **3 days**.

For the contraction part:

1. Relax the whole body calmly for about 15 minutes.
2. Count aloud from 1 to 10. Observe the tension when speaking.

JACOBSON'S PROGRESSIVE RELAXATION TECHNIQUE GUIDE

3. Relax your mouth.
4. Count from 1 to 10 half as loudly. Observe the tension.
5. Relax your mouth.
6. Count from 1 to 10 half as loudly as in point 4. Observe the tension.
7. Relax your mouth.
8. Count from 1 to 10 nearly inaudibly. Observe the tension.
9. Relax.
10. Repeat every day.

Imagined speech

The relaxation of imagined speech should take **7 days**.

For the contraction part:

1. Imagine or recall yourself speaking in a particular situation: for example ordering food in a restaurant, telling a story to your friend, reading a book to a child, etc...
Observe the slight tension of your tongue.
2. Repeat for each of the 7 days.

THE TEACHER'S GUIDE TO THE
MENTAL HEALTH

PART III

BONUS WORKBOOK



FIVE FINGERS OF GRATITUDE

Every evening write at least five things you are grateful for. If it's hard for you, use this structure:

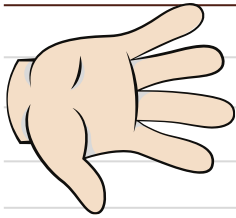
For your baby finger think of **someone** in your life you appreciate.

For your ring finger think of something "**big**" that you are grateful for.

For your middle finger think of something "**small**" that you are grateful for.

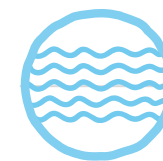
For your pointing finger think of an **activity** you enjoy and appreciate.

For your thumb think of a **possession** that you are grateful for.



FLOW LIST

During which activities do you forget the outside world completely?
Try to achieve at least one flow every day. In the evening write up to three activities which lead to the state of flow.



THE TEACHER'S GUIDE TO THE

MENTAL HEALTH

REFERENCES

CONTINUE ON YOUR OWN
You can do it, teacher!



REFERENCES

BURN OUT

In my mind: Burnout <https://www.youtube.com/watch?v=HfhMO-MtnHY>

SciShow Psych: When work becomes overwhelming https://www.youtube.com/watch?v=Sceo_3BVv0s

Ch. Maslach: Understanding job burnout <https://www.youtube.com/watch?v=gRPBkCW0R5E>

TEDx The importance of self care for teachers: <https://www.youtube.com/watch?v=5O5QIqlDxjg>

TED How burnout makes us less creative: <https://www.youtube.com/watch?v=Dvhu2OK7ffg>

Kati Morton (therapist and youtuber) burnout playlist:

https://www.youtube.com/playlist?list=PL_loxoCVsWqxj0ocM5GjaDsEdfLfwCdHW

Maslach, C., & Leiter, M. P. (1997). *The truth about burnout: how organizations cause personal stress and what to do about it* (First edition). Jossey-Bass, a Wiley Imprint.

McGeary, C. A., & McGeary, D. D. (2012). Occupational Burnout. In *Handbook of occupational health and wellness* (pp. 181-200). New York: Springer.

Schaufeli, W. B., Leiter, M. P., and Maslach, C.. (2009). *Burnout: 35 years of research and practice*.

Career Development International. Career Development International.

<http://doi.org/10.1108/13620430910966406>

Rankin, J. G. (2017). *First aid for teacher burnout: How you can find peace and success*. New York: Routledge.

PSYCHOTHERAPY

Case study clinical example CBT: first session with a client with symptoms of depression

<https://www.youtube.com/watch?v=7LD8iC4NqXM>

How therapy changed my life <https://www.youtube.com/watch?v=VuKuQx-qOnQ>

CrashCourse: Getting help - psychotherapy <https://www.youtube.com/watch?v=6nEL44QkL9w>

Three approaches to psychotherapy <https://www.youtube.com/watch?v=NFT89grAUOI&t=545s>

Three approaches to psychotherapy II <https://www.youtube.com/watch?v=UOXQqevUjyk&t=1s>

<https://www.youtube.com/watch?v=BKOik9gcaow>

<https://www.youtube.com/watch?v=Zz-VobOkhew>

SciShow Psych: Does psychotherapy work? <https://www.youtube.com/watch?v=J44e8gpA7fk>

Kati Morton (therapist and youtuber) <https://www.youtube.com/user/KatiMorton>

Duff the psych (therapist, youtuber and podcaster): Psychologist reacts to therapy scenes

<https://www.youtube.com/watch?v=ZeLvu51P5XA&list=PL-lAny8Nr2z7DQoSPQjGykSp-Xq2DV8gd>

TEDx: Battling the stigma related to therapy https://www.youtube.com/watch?v=f_ldS6-hRqA&t=1s

Scott B. Kaufman (psychologist, podcaster):

Cognitive Behavioral Therapy Made Simple with Seth Gillihan
<https://scottbarrykaufman.com/podcast/cognitive-behavioral-therapy-made-simple-with-seth-gillihan/>

Existential-Humanistic Therapy with Kirk Schneider
<https://scottbarrykaufman.com/podcast/existential-humanistic-therapy-kirk-schneider/>

American Psychological Association. (2013). Guidelines and principles for accreditation of programs in professional psychology. Washington, DC: Author.

Consoli, A. J., Beutler, L. E., & Bongar, B. (Eds.). (2017). Comprehensive textbook of psychotherapy: Theory and practice (2nd). New York: Oxford University Press.

Orlinsky, D. E. (2017). Unity and Diversity Among Psychotherapies. In Comprehensive textbook of psychotherapy: Theory and practice (2nd, pp. 11-30). New York: Oxford University Press.

Wampold, B. E., & Imel, Z. E. (2015). The great psychotherapy debate: The evidence for what makes psychotherapy work (2nd). New York: Routledge.

SPORT AND MIND

- Alschuler, L. (2016, August 21). The HPA axis. Integrative therapeutics. <https://www.integrativepro.com/Resources/Integrative-Blog/2016/The-HPA-Axis>
- Chekroud, S.R., Gueorguiva, R., Theutlin, A. B., Paulus, M., Krumholz, H. M., Krystal, J. H., & Chekroud, A. M. (2018). Association between physical exercise and mental health in 1.2 million individuals in the USA between 2011 and 2015: a cross-sectional study. *The Lancet Psychiatry*, 5(9), 739-746.
- Cooney, G. M., Dwan, K., Carolyn, A. G., Debbie A. L., Rimer, J., Waugh, F. R., McMurdo, M., & Gillian, E. M. (2013). Exercise for depression. *Cochrane Database of Systematic Reviews*, 12(9). <http://norskhph.no/wp/wp-content/uploads/2014/11/Cooney-Exercise-for-depression-Cochrane-2013.pdf>
- Cowen, P. J. & Browning, M. (2015). What has serotonin to do with depression? *World Psychiatry*, 14(2), 158-160. Long-term effects of aerobic exercise on psychological outcomes. *Preventive Medicine*, 28, 75-85.
- DiLorenzo, T., Bargman, E. P., Stucky-Ropp, R., Brassington, G. S., Frensch, P. A. & LaFontaine, T. (1999).
- Duman, R. S., & Monteggia, L. M. (2006). A neurotrophic model for stress-related mood disorders. *Journal of Psychiatric Neuroscience and Therapeutics*, 59(12), 1116-1127.
- Harvard Health Publishing. (2020, July 6). Understanding the stress response: Chronic activation of this survival mechanism impairs health. <https://www.health.harvard.edu/staying-healthy/understanding-the-stress-response>
- Helgadóttir, B., Forsell, Y., Hallgren, M., Möller, & J. Ekblom, Ö. (2017). Long-term effects of exercise at different intensity levels of depression: A randomized controlled trial. *Preventive medicine*, 105, 37-46.
- Hötting, K. & Röder, B. (2013). Beneficial effects of physical exercise on neuroplasticity and cognition. *Neuroscience Biobehavioral Reviews*, 37(9), 2243 - 2257.
- Kim, Y. I. & Cherng, S. (2016). The impact of the exercise on basal BDNF in athletic adolescents. *The Journal of Physical Therapy Science*, 28(11), 3066-3069.
- Scott, E. (2020, July 24). What is cortisol? *Verywellmind*. <https://www.verywellmind.com/cortisol-and-stress-how-to-stay-healthy-3145080>
- Siefken, K., Junge, A., & Leammle, L. (2019). How does sport affect mental health? An investigation into the relationship of leisure-time physical activity with depression and anxiety. *Human Movement*, 20(1), 62-74.
- Steiner, M. A. & Wotjak, C. T. (2008). Role of the endocannabinoid system in regulation of the hypothalamic-pituitary-adrenocortical axis. *Progress in Brain Research*, 170, 397-432.
- Yen, K. T. (2020). Secondary prevention of depressive prodrome in adolescents: Before and after attending a jogging program on campus. *International Journal of Environmental Research and Public Health*, 17, 7705.
- Zimmer, P., Stritt, C., Bloch, W., Schmidt, F. P., Hübner, S. T., Binnebößel, S., Schenk, A., & Oberste, M. (2016). The effects of different aerobic exercise intensities on serum serotonin concentrations and their association with Stroop task performance: a randomized controlled trial. *European Journal of Applied Physiology*, 116, 2025-2034.
- Zschucke, E., Renneberg, B., Dimeo, F., Wüstenberg, T., Ströhle, & A. (2015). The stress-buffering effect of acute exercise: Evidence for HPA axis negative feedback. *Psychoneuroendocrinology*, 51, 414-425.

MINDFUL YOGA

- Holcombe, K. (2017, April 12). Breathe easy: Relax with pranayama. *Yoga Journal*. <https://www.yogajournal.com/>
- Hurley, T. (2018, October 16). Activating the parasympathetic nervous system to decrease stress and anxiety. CanyonVista recovery center. <https://canyonvista.com/>
- Moss, H. (2018). *Practice of mindful yoga*. Leaping Hare Press.
- Yoga Point. (n.d). Velký průvodce mezi druhy a styly jógy. <https://www.yogapoint.cz/joga/druhy-jogy/velky-pruvodce-druhy-styly-jogy/>

RELAXATION, IMAGERY

- Arnett, J. J. (2000). Emerging adulthood: a theory of development from the late teens through the twenties [Online]. *American Psychologist*, 55(5), 469-480. <http://doi.org/10.1037//0003-066X.55.5.469>
- Drotárová, E., & Drotárová, L. (2003). *Relaxační metody: malá encyklopedie : [jak zvládat stres]*. Praha: EPOCH. <https://nevypustdusi.cz/2018/11/05/relaxacni-techniky/>
- Křivohlavý, J. (1994). *Jak zvládat stres*. Praha: Grada Avicenum.
- Linhartová, D. (2008). *Vysokoškolská psychologie*. Mendelova zemědělská a lesnická univerzita v Brně.
- Míček, L. (1986). *Duševní hygiena: vysokoškolská učebnice pro studenty filozofických fakult oboru psychologie (2. vyd)*. Praha: Státní pedagogické nakladatelství.
- Říčan, P. (2004). *Cesta životem*. 2. vyd. Praha. Portál, 4004, 390.
- Selye, H. (1966). *Život a stres*. Bratislava: Obzor.
- Schwartz, Andrew E. *Guided imagery for groups: fifty visualizations that promote relaxation, problem-solving, creativity, and well-being*. Duluth, Minn.: Whole Person Associates, c1995. ISBN 1570250669.
- Slavík, M. (2012). *Vysokoškolská pedagogika; Pro odborné vzdělávání. Higher education pedagogy. For vocational training*. Praha: Grada Publishing as, 1.
- Somerlíková, K., & Salaba, J. (2018). Subjektivní hodnocení vlastního zdraví studenty vybraných vysokých škol. *Hygiena*, 63(4), 129-134. doi: 0.21101/hygiena.a1704.

MINDFULNESS

- Benda, J. (2007). Všíímavost v psychologickém výzkumu a v klinické praxi. *Československá psychologie*, 51(2), 129-140.
- Frýba, M., & Hoskovec, J. (1991). *Abhidhamma: základy meditativní psychoterapie a psychohygieny*. Stratos.
- Germer, C., Siegel, R. D., & Fulton, P. R. (Eds.). (2016). *Mindfulness and psychotherapy*. Guilford Publications.
- Kabat-Zinn, J. (2003). Mindfulness-Based Interventions in Context: Past, Present, and Future [Online]. *Clinical Psychology: Science And Practice*, 10(2), 144-156. <http://doi.org/10.1093/clipsy.bpg016>
- Nyanatiloka, & Thera, N. (2009). *Buddhistický slovník: příručka buddhistických pojmů a nauky*. DharmaGaia.
- Nyánatiloka. (1993). *Slovo Buddhovo: Nyánatiloka*. Stratos.
- Treadway, M. T., & Lazar, S. W. (2009). The neurobiology of mindfulness. In *Clinical handbook of mindfulness* (pp. 45-57). Springer, New York, NY.
- Williams, M., & Penman, D. (2011). *Mindfulness: a practical guide to finding peace in a frantic world*. Hachette UK.