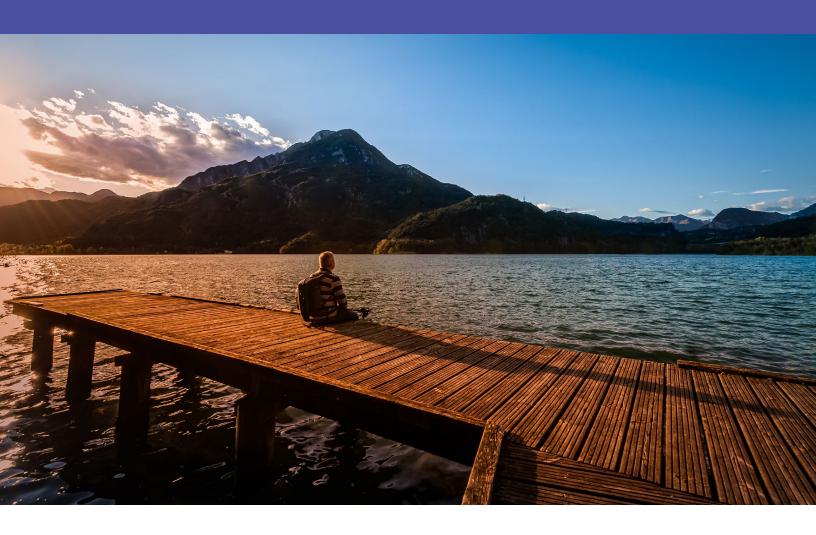
MULTI-SETTING PEACEFUL MIND



A Manual To Aid in Managing Anxiety in Veterans With Memory Impairment

Cynthia A. Kraus-Schuman, PhD, Nancy Wilson, MA, MSW, Whitney A. McCray, LCSW, Jessica Calleo, PhD, Carmen Spain, RN, Mark E. Kunik, MD, MPH Melinda A. Stanley, PhD







TABLE OF CONTENTS

INTRODUCTION	4
Cognitive Impairment and Dementia	5
Anxiety and Dementia	6
The Peaceful Mind Program	7
Cognitive-Behavioral Therapy	8
Learning Strategies	9
References	9
THE AWARENESS TOOL	11
Overview	11
Provider Instructions	13
Sample Practice Sheet	16
Practice Sheet	17
THE BREATHING TOOL	18
Overview	18
Provider Instructions	20
Sample Practice Sheet	22
Practice Sheet	23
INCREASING ACTIVITY TOOL	24
Overview	24
Provider Instructions	26
List of Pleasant Activities	29
Practice Sheet	30

TABLE OF CONTENTS

PEACEFUL SLEEP TOOL	31
Overview	31
Provider Instructions	32
Peaceful Sleep Tools Handout	37
Practice Sheet	40
CALMING THOUGHTS TOOL	41
Overview	41
Provider Instructions	43
Practice Sheet	45



This manual was developed to help providers who are not specialists in dementia, anxiety, or Cognitive Behavioral Therapy (CBT) deliver evidence-based CBT (treatment that is supported by reports in the medical literature) to address anxiety in Veterans with mild-to-moderate dementia or cognitive impairment (problems with thinking, concentrating, problem solving, memory, etc.) from other causes. The material can be taught by a healthcare provider to a Veteran in an individual meeting and/or in a group, with or without the use of a coach.

Coaches are individuals who can support the Veteran's use of the Peaceful Mind Tools, either at home (home healthcare provider, friend, family member) or in a treatment or residential setting (staff, volunteer). A Veteran can have more than one coach (such as, for example, his/her child and home health provider) or, depending on the Veteran's cognitive difficulties, they may not need a coach's assistance at home. However, the presence of a coach may significantly affect whether the Veteran can learn and practice the skills, as well as put them into practice following the end of meetings with the provider.

The materials are divided into chapters. Each chapter presents a specific tool and has the following sections: A "Summary" section, which briefly reviews the purpose of the tool; "Use Over the Course of Treatment," which provides general tips on how to use the skill, including presenting the skill in a group setting; "Provider Instructions," which guide the provider in ways to teach the Veteran how to use the tool; and "Practice Sheets," which guide the Veteran's practice of the tool. Chapters can be presented in any order and taught one-on-one or in a group. Providers can choose specific tools to present to the Veteran. Not every chapter needs to be presented to the Veteran. Throughout the manual, some portions of the content represent scripted narrative that you can use verbatim when talking to Veterans and coaches. These portions are italicized to set them off from the other content.



COGNITIVE IMPAIRMENT AND DEMENTIA

The elderly population (aged 65 or older) in the United States is estimated to be more than 70 million by 2030 (Federal Interagency Forum on Aging Related Statistics, 2010). An estimated 3.8 million individuals with dementia and just over 2.5 million with Alzheimer's disease live in the United States (Plassman et al., 2007); thus, there is a need for evidence-based therapies to help older adults with cognitive problems.

Aging can cause problems in cognition (thinking, concentrating, problem solving, memory, etc.) that differ from person to person. However, it should be noted that not all older adults will experience significant problems with their cognitive abilities. Not all cognitive difficulties are caused by a type of dementia such as Alzheimer's disease. There are many causes of both permanent and temporary cognitive problems, such as physical illness or injury, medication, emotional stress, etc. Accurate diagnosis of cognitive difficulties can help the Veteran and his/her loved ones understand symptoms, make decisions regarding treatment, and plan for the future. Diagnosis of cognitive difficulties can begin with a screening assessment, such as the Montreal Cognitive Assessment (MOCA) (Luis, Keegan & Mullan, 2009; Nasreddine et al., 2005). If you lack experience conducting cognitive screenings, a primary care physician can start the process. Following a screening assessment, a specialist such as a neuropsychologist or neurologist can provide a more comprehensive assessment to diagnose the nature of the Veteran's cognitive difficulties. Keep in mind that the assessment and discussion of a person's cognitive functioning tend to provoke anxiety. Listening and being supportive will help these discussions.

The materials in this manual were developed to assist in the care of Veterans with mild-to-moderate dementia or cognitive impairment. Individuals who have more serious difficulties may not be able to benefit as much from this program.



ANXIETY AND DEMENTIA

Anxiety symptoms occur in up to 71% of patients with dementia (Seignourel et al., 2008). Anxiety can present in physical symptoms (muscle tension, butterflies in the stomach, shortness of breath), behavioral symptoms (avoidance, putting something off/procrastination, pacing, restlessness, snacking excessively), acting out physically (yelling, hitting), worrying (I'm fearful of going to the doctor) and poor concentration and irritability. Significant anxiety can cause a person to have difficulties in activities of daily living and is associated with behavioral problems (Neville & Teri, 2011; Schultz, Holt & Buckwalter 2004). In addition, individuals with dementia and anxiety are at increased risk for being placed in a nursing home (Gibbons et al., 2002), decreased independence and not being able to function well socially (Porter et al., 2003; Schultz et al., 2004). CBT has been recommended to address anxiety in individuals with dementia (National Institute for Health and Clinical Excellence-Social Care Institute for Excellence, 2006). Despite the additional problems anxiety presents for individuals with dementia, there have been relatively few studies evaluating treatments to guide clinical care for treating anxiety in these individuals.



THE PEACEFUL MIND PROGRAM

The Peaceful Mind Program (Stanley et al., 2012) was the first to examine the impact of evidence-based cognitive behavioral treatments for anxiety in patients with dementia. It uses redesigned elements of CBT skills to make them easier to learn and use. Skills were tailored to be used by individuals with dementia by incorporating different learning strategies, particularly by using spaced retrieval (Camp, Koss & Judge, 1999) (a memory-enhancing technique), simplifying the skills, using repetition and practice, using cueing procedures and involving family members and paid caregivers as "coaches" to help the Veteran continue using the skills after they finishe the program. Providers with expertise in dementia care and CBT instructed patients and their coaches in learning skills and guided them in coaching the patients to continue to use the skills. All Peaceful Mind sessions were conducted in patients' homes.

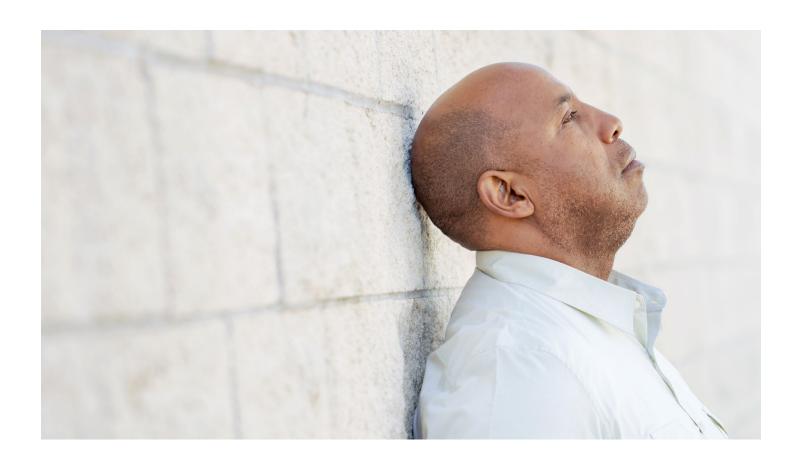
This program (Multi-Setting Peaceful Mind) uses redesigned materials from the original Peaceful Mind Program to help providers who are not specialists in dementia care or CBT deliver CBT to help anxious Veterans with mild-to-moderate dementia or cognitive impairment. This manual aims to improve access to this treatment, which research has shown to be helpful for this group. The materials can be useful in many care settings (inpatient, outpatient, at home, etc.) and may help with symptoms of depression as well.



COGNITIVE BEHAVIORAL THERAPY

The anxiety-management tools presented in Multi-Setting Peaceful Mind are based on CBT techniques. CBT proposes that symptoms of anxiety/depression are influenced by one's thoughts, emotions, physical feelings and behavior. The cycle works like a snowball. This snowball can move in a positive, negative or neutral direction. Changing one part of the cycle (thoughts, feelings [emotional or physical] or behaviors) can change the cycle for better or worse.

The tools presented in this manual address different parts of the CBT cycle to reduce anxiety and improve emotional well-being. These are simplified CBT techniques designed to be more easily used by Veterans with mild-to-moderate cognitive difficulties. The Awareness Tool promotes identification of symptoms, patterns of symptoms and triggers of anxiety. The Breathing Tool addresses the physical feelings of anxiety. The Peaceful Sleep Tool teaches behaviors to promote better sleep so that the Veteran is better able to cope with anxiety or stress. The Increasing Activity Tool attempts to change behaviors to cope with anxiety and boost mood. The Calming Thoughts tool focuses on changing anxiety-driven thoughts. By using one tool, the Veteran may also notice other parts of the cycle improving.



LEARNING STRATEGIES

There are strategies that can aid in the use of the skills, depending on the level of the Veteran's cognitive difficulties. For example, reminder cards (such as index cards) with highlights of the skill can be placed in areas frequented by the Veteran (bedside table, wallet/purse, bathroom mirror, refrigerator door, etc.). Repeated practice when the Veteran is calm and when they are anxious can also reinforce use of the skills. Depending on the Veteran's level of cognitive difficulties, a coach may have to help encourage them to practice and use the skills. A daily time to review materials may help make use of the skills part of a routine. Review of skill use during subsequent visits with the providers can serve as a reminder to use skills, as well as an opportunity to brainstorm use of skills for current or upcoming stressors.

Asking the Veteran to summarize the skill and times when they can use this skill can be helpful in evaluating his/her understanding of the skill and how it could be used in anxiety-causing situations.

REFERENCES

Camp, C. J., Koss, E., & Judge, K. (1999) Cognitive assessment in late-stage dementia. In: P. A. Lichtenberg (Ed), *Handbook of assessment in clinical gerontology* (pp. 442-67). Hoboken, NJ: John Wiley & Sons, Inc.



Federal Interagency Forum on Aging Related Statistics. (2010). Older Americans 2010: Key Indicators of Well-Being. Available at http://www.agingstats.gov/agingstatsdotnet/Main_Site/Data/2010_Documents/Docs/OA _2010.pdf

Gibbons, L., Teri, L., Logsdon, R., McCurry, S., Kukull, W., Bowen, J. & Larson, E. (2002) Anxiety symptoms as predictors of nursing home placement in patients with Alzheimer's disease. Journal of Clinical Geropsychology, 8, 335-342.

Luis, C. A., Keegan, A. P., & Mullan, M. (2009). Cross validation of the Montreal Cognitive Assessment in community dwelling older adults residing in the Southeastern US. *International Journal of Geriatric Psychiatry*, 24, 197-201.

National Institute for Health and Clinical Excellence. (2006). Draft Quality Standard -Social Care. Dementia -Supporting people to live well with dementia. London: National Institute for Health and Clinical Excellence; Report No. NICE Clinical Guidelines 42.

Nasreddine, Z. S., Phillips, N..A., Bédirian, V., Charbonneau, S., Whitehead V., Collin I., & Chertkow H. (2005). The Montreal Cognitive Assessment (MoCA): A brief screening tool for mild cognitive impairment. *Journal of the American Geriatric Society*, 53, 695699.

Neville, C., & Teri, L. (2011). Anxiety, anxiety symptoms, and associations among older people with dementia in assisted-living facilities. International Journal of Mental Health Nursing, 20,195-201

Plassman, B.L., Langa, K.M., Fisher, G.G., Heeringa, S.G., Weir, D.R., Ofstedal, . . . Wallace, R.B. (2007). Prevalence of dementia in the United States: The Aging, Demographics, and Memory Study. *Neuroepidemiology*, 29, 125 – 132.

Porter, V. R., Buxton, W. G., Fairbanks, L. A., Strickland, T., O'Connor, S. M., Rosenberg-Thompson, S., & Cummings, J. L. (2003). Frequency and characteristics of anxiety among patients with Alzheimer's disease and related dementias. *Journal of Neuropsychiatry and Clinical Neurosciences*, 15, 180-6.

Schultz, S. K., Hoth, A., Buckwalter, K. (2004). Anxiety and impaired social function in the elderly. *Annals of Clinical Psychiatry*, 16, 47-51.

Seignourel, P. J., Kunik, M. E., Snow, L., Wilson. N., & Stanley, M. (2008). Anxiety in dementia: A critical review. *Clinical Psychology Review*, 28, 1071-1082. Stanley, M.A., Calleo, J., Bush, A.L., Wilson, N., Snow, A.L., Kraus-Schuman, C., . . . Kunik, M.E. (2012). The Peaceful Mind program: A pilot test of a CBT-based intervention for anxious patients with dementia. *American Journal of Geriatric Psychiatry*, Apr 30 [Epub ahead of print].

OVERVIEW

Summary

Monitoring symptoms promotes Veteran's, provider's and coach's awareness of triggers, symptoms, and consequences of the Veteran's anxiety. It is difficult to remember details of anxiety experiences across time, particularly for people with memory problems. Daily monitoring gives the Veteran an ongoing opportunity to record anxiety experiences and increase awareness. This can help shed light on patterns surrounding anxiety experiences (common triggers or reactions – thoughts, behaviors, physical signs, emotions, etc.), treatment goals, and monitoring of anxiety levels while using a tool. If daily monitoring is not possible because of the nature of your work with the Veteran, discussing elements of his/her present or recent anxiety experiences can start the process of increasing awareness for both you and the Veteran of his/her experience of anxiety.

USE OVER THE COURSE OF TREATMENT

The Awareness Tool is useful early in treatment. Starting with this skill may be important for learning about the Veteran's experience of anxiety and helping to determine which Peaceful Mind Tool would be useful to teach the Veteran.

Use of the Awareness Tool is flexible. It can be used during an initial session to learn about recent or current anxiety/stress. It can also be incorporated in an initial assessment by any provider (nurse, psychiatrist, psychologist, social worker, etc.), and elements can be included in treatment plans. Awareness Tool Practice Sheets can then be tailored to fit each patient's experience and description of anxiety (see sample practice sheet). These individualized sheets can be used throughout your work with the Veteran to monitor the impact of other tools on the Veteran's experience of anxiety. Self-monitoring might become a daily activity that reminds the Veteran to identify anxiety and use Peaceful Mind tools. Practice Sheets can be reviewed at the beginning of each session to start the discussion about the Veteran's progress using Peaceful Mind Tools. The coach's involvement in completing the forms depends on the Veteran's cognitive abilities and the coach's relationship with the Veteran.



GROUP FORMAT

The Awareness Tool can also be presented in a group format for Veterans with mild cognitive impairment. During the group discussion, each Veteran should have the chance to mention some of his/her triggers and symptoms during the group discussion so that you will know that group members understand the material. It would also be helpful if you could spend a few minutes with the Veterans individually to review what is written on their practice sheets. This would be a time for the Veterans to ask any remaining questions about their anxiety experience.



PROVIDER INSTRUCTIONS

Note: Your role as provider for the Veteran dictates the use of the Awareness Tool. You could use this tool during an initial session to get an understanding of his/her current anxiety experience. You can also assign the Veteran to work on practice sheets between visits so that they can practice using this tool to become more aware of his/her anxiety. Prior to the session, decide whether you will be asking the Veteran to use the practice sheets between meetings or whether you will just be focusing on completing the practice sheet together in your meeting.

1.	. Describe your role in working with the Veteran and the purpose of teaching th	hem
	coping tools during your time together.	

- My role is _____ (explain your role as provider). In my work with you, I am also going to teach you ways to cope with and decrease your (Veteran's word for anxiety) and help you learn how to use the new tools.
- Your job (Veteran) is to practice them and let me know how they are working.
- If there is a coach present: And your job (coach) is to support (Veteran's name) in using his/her new tools in ways that we will decide on together.

2. Give Veteran and coach (if present) a copy of the sample and blank practice sheets Explain the purpose and procedures for self-monitoring.

- The Awareness Tool is one of the first coping tools we will put in your toolbox.
 Tracking your symptoms will help you better understand your anxiety (insert
 Veteran's preferred word for anxiety). When you understand your (anxiety) better,
 you'll be able to do a better job using other tools to decrease (anxiety). Plus, many
 people find that just understanding their anxiety helps them cope with it better.
 The Awareness Tool will also help us decide which Peaceful Mind tools will be most
 helpful to practice.
- Anxiety has different types of symptoms that can be expressed through:
 - Thoughts your worries, what you think when you feel anxious or stressed,
 - Feelings how you feel emotionally (nervous, fearful, irritable, etc.), and how your body feels (tense, upset stomach, sweating, shortness of breath),
 - Behaviors what you do when you feel anxious or stressed, such as avoiding the situation or procrastinating, pacing, snacking too much, getting into arguments, not sleeping well.

3. Guide the Veteran (and coach, if present) in filling out a practice sheet.

• You can focus this discussion on a current anxiety experience or collectively look at triggers and symptoms of the Veteran's anxiety. Assist the Veteran in writing in the

- practice sheet as you discuss triggers and signs. You can also refer to the Sample Practice Sheet: Awareness Tool.
- If the coach is present, ask for his/her suggestions as well for triggers and signs of anxiety/stress.
- Let's complete a practice sheet together.

Questions	Documentation
What makes you anxious (insert Veteran's preferred word for anxiety)? What are your anxiety trigger situations, thoughts or worries?	This information would be noted in the triggers for Anxiety and Stress box on the practice sheet.
How does your body feel when you are anxious?	This information would be noted in the other Signs of Anxiety and Stress box.
Do you feel any other emotions when you are anxious, such as fear, frustration, anger?	This information would be noted in the other Signs of Anxiety and Stress box on the practice sheet.
What do you do when you are anxious? How do you behave when you are anxious? Do you avoid anything when you are anxious? Do you procrastinate when you are stressed? Do you overeat/snack when anxious?	This information would be noted in the other Signs of Anxiety and Stress box on the practice sheet.

• If the Veteran needs some help in noting signs of anxiety, you could offer examples of common symptoms to see if they identify with them, such as muscle tension, irritability, upset stomach, sleep difficulty, problems concentrating, rapid heart rate, increased sweating, feeling restless or on edge, repeatedly checking something (such as repeatedly calling a family member or repeatedly checking the checkbook).

As mentioned above, the Veteran's use of the practice sheet following this visit depends on your role with them and how you both decide to best use this tool. If this was a onetime assessment exercise for both you and the Veteran to understand more fully his/her experience of anxiety, this sheet can be used to help develop treatment plans and provide information about the Veteran's anxiety to other providers. Another option is to ask the Veteran to continue tracking his/her anxiety experience between your visits to help monitor anxiety, continue building awareness (they may not be aware of or remember all of his/her triggers during one visit with you), and monitor use of coping skills.

Coach involvement will vary, depending on the Veteran's level of cognitive impairment and the coach's relationship with the Veteran. You may decide to provide the coach with a copy of the completed practice sheet so that they are aware of the triggers and signs of the Veteran being anxious. This could be particularly helpful to other providers who will be working with the Veteran. The coach may be in the meeting with you and will be assisting the Veteran in using the practice sheets between sessions.

How To Use the Awareness Tool To Help Guide Use of Peaceful Mind Tools

- If the Veteran has **physical** symptoms of anxiety (for example, a rapid pulse, upset stomach, muscle tension, etc.), you may consider using the **Breathing Tool**.
- If the Veteran has **behavioral** symptoms of anxiety (for example, avoidance, procrastination), you may consider using the **Increasing Activity** Tool. This tool is also useful for depressive symptoms.
- If the Veteran reports having **sleep problems**, you may consider using the **Peaceful Sleep Tool**.
- If the Veteran has **thought or worry** symptoms of anxiety, you may consider using the **Calming Thoughts Tool**.

Optional

You can use the Awareness Tool in future sessions by adding a section on whether the Veteran used a tool that they learned and whether it was helpful. This can help remind the Veteran to use the Peaceful Mind tool and track how helpful tools are for the Veteran.

For example, you could add to the Awareness Practice Sheet:			
Did you use the	Tool when you felt anxious?	Yes	No
Was it helpful? Yes	No		

PRACTICE SAMPLE: AWARENESS TOOL

Track Your Symptoms

Tracking symptoms helps you become more aware of your anxiety and helps you choose the Peaceful Mind Tools that are right for you. When you understand your anxiety, you'll be able to do a better job using tools to decrease it. Many people find that just understanding their anxiety helps them cope with it better.

MY EXPERIENCE OF FEELING ANXIETY OR STRESS TODAY INCLUDES:

Triggers for Anxiety and Stress

- 1. Getting a headache
- 2. Being on the highway
- **3.** Being in a crowded store
- 4. Asking for help
- 5. Going to the doctor
- 6. Being in a new place

Other Signs of Anxiety and Stress

- 1. Getting a headache
- 2. Being on the highway
- **3.** Being in a crowded store
- 4. Asking for help
- 5. Going to the doctor
- 6. Being in a new place

Feed	bac	k
------	-----	---

Was the awareness tool helpful to you?

Yes No

PRACTICE SHEET: AWARENESS TOOL

Track Your Symptoms

Tracking symptoms helps you become more aware of your anxiety and helps you choose the Peaceful Mind Tools that are right for you. When you understand your anxiety, you'll be able to do a better job using tools to decrease it. Many people find that just understanding their anxiety helps them cope with it better.

MY EXPERIENCE OF FEELING ANXIETY OR STRESS TODAY INCLUDES:

Triggers for Anxiety and Stress 1. ______ 2. _____ 3. _____ 4. _____ 5. _____ 6. _____

Other Signs of Anxiety and Stress	
1	
2	
3	
4	
5	
6	

Feedback

Was the awareness tool helpful to you?

_____ Yes _____No

OVERVIEW

Summary

The Breathing Tool is a simple, portable relaxation skill. Often when people get anxious, their breathing becomes rapid and shallow. The Breathing Tool teaches the Veteran to take long, deep breaths. Breathing slowly and deeply is a simple, portable tool that can be used with Veterans who have varying levels of cognitive impairment, in any setting. This tool is a fairly easy skill with which coaches can become comfortable in guiding the practice with the Veteran. This can be a brief session with the main components being to explain the skill; provide a summary handout; practice with the Veteran; and, if a coach is present, teach the coach how to help support the Veteran using the Breathing Tool.

Use Over the Course of Treatment

The Breathing Tool can be a useful coping skill taught early in your work with the Veteran. Depending on your role as a provider for the Veteran, you can assign them and/or his/her coach to use the skill between visits; and/or you may use this skill during your other interactions with the Veteran when they appear anxious or stressed. This skill would be especially helpful for providers who work with the Veteran throughout the day (that is, in an inpatient unit, nursing home, etc.). This tool may also be helpful during other potential stressful procedures, such as imaging and blood draws.

The practice sheet includes space to include signs/symptoms of anxiety and triggers. It also includes the Breathing Tool instructions and a place to indicate whether using the skill was helpful. The Veteran can use this independently or with the assistance of a coach. This form could also be given to other providers to help them use the skill with the Veteran.

Note to Outpatient Providers:

If you are working with the Veteran in outpatient visits, you may also consider using practice sheets. The practice sheets allow the Veteran to track symptoms, triggers, and use of the Breathing Tool between visits. You can provide the Veteran with multiple copies of the practice sheets to track symptoms, triggers, and his/her use of the skill. If Veterans have a coach working with them, the coach may also assist in completing the practice sheets and encouraging the Veteran to practice regularly and use the Breathing Tool in an anxious or stressful moment. It would be most beneficial if the coach could be present during your meetings with the Veteran, so that you can watch them practice using Breathing Changes with the Veteran.

Note to Inpatient Providers:

As a provider who may have more access to the Veteran throughout the day, you have the unique opportunity to encourage use of the Breathing Tool before, during and after an anxious or stressful moment. For example, if you know they feel anxious at the end of family visits, you can coach them with this tool as his/her family is leaving. You can promote the use of the skill by other staff, including staff who may be working on another shift. You can also encourage the use of practice sheets if you have enough time during your meetings with the Veteran. The coach may be a family member who will be working with the Veteran following discharge or staff at the Veteran's discharge destination. If possible, speak with the coach prior to the Veteran's discharge to provide a summary of the skills you have been using with the Veteran; and let them know about the practice sheet.

Group Format

The Awareness Tool can also be presented in a group format for Veterans with mild cognitive impairment. During the group discussion, each Veteran should have the chance to mention some of his/her triggers and symptoms during the group discussion; so that you will know that group members understand the material. It would also be helpful if you could spend a few minutes with the Veterans individually to review what is written on their practice sheets. This would be a time for the Veterans to ask any remaining questions about their anxiety experience.



PROVIDER INSTRUCTIONS

1. Remind the Veteran who you are and why you are meeting with them.

(Optional) If you are using daily practice sheets, review daily practice for the preceding week, as follows:

- Review practice sheets.
 - Look for patterns of symptoms.
 - Answer Veteran and coach questions about filling out the forms.
- Review the skill that has been practiced (if you had been working on using another skill).
 - Answer Veteran (and coach if present) questions about using the skill.
 - Ask how the skill was practiced.
- Problem-solve any issues with using other skills.

2. Introduce breathing changes.

- Today we will learn how to use the Breathing Tool, which can help you cope with and decrease your (anxiety). This is a very powerful tool that many people find to be very helpful.
- Often when you're anxious or uneasy, your breathing gets rapid and shallow. By paying attention to your breathing and taking slow, deep breaths, you can actually make your entire body more relaxed.
- Breathing slowly and deeply is a simple, portable tool that you can use anywhere.

3. Instruct the Veteran in the breathing skill.

- Distribute and review the Practice Sheet: Breathing Tool for the Veteran and coach (if present).
- Demonstrate the breathing skill.
 - We are going to work on breathing slowly and deeply.
 - Close your eyes.
 - Breathe with me while I count. We will start by counting to 3. (The duration of the count may depend on health and prior breathing difficulties.)
 - I will count like this: Inhale 2-3; exhale 2-3. I would like you to try to keep breathing the entire time I am counting, all the way through "3." This means that you will not be holding your breath but instead breathing in very slowly and then out very slowly.
 - Let's begin: Inhale 2 -3; exhale 2-3. Repeat this step as many times as appropriate for learning.

- Try to make your breathing smooth, and do not stop between inhaling and exhaling.
- Let's practice again.
- You may find these other Breathing Tool variations helpful.
- You can use an even simpler instruction to try for more cognitively impaired Veterans
 Breathe slowly and deeply.
- You can include a reminder instruction on a note card or practice sheet, such as, "When I feel anxious, I can take a deep breath."
- You can use more complex breathing components with Veterans with milder cognitive impairment, such as pointing out the value of breathing deeply - the patient can place a hand on his/her stomach to see it move out with inhale and in with exhale.

Note: It may be helpful to put the Breathing Tool instructions on cards that can be placed in the Veteran's wallet/purse or in places that the Veteran frequently sees in his/her home (such as a bedside table, taped to the bathroom mirror, by his/her medication cabinet, etc.). Talk with the Veteran and coach about their ideas of reminder card placement.

4. Use the skill in the following situations:

- You can use the practice sheet to help facilitate use of the skill. Provider, Veteran and/or coach can write in specific signs and triggers of anxiety. You can refer to the sample practice sheet completed with example triggers and signs for anxiety and stress.
- Talk about signs and triggers for anxiety or stress.
 - What are signs that you are anxious or stressed? How does your body feel
 - (rapid pulse, sweating, pacing, snacking, irritability, etc.)
- What are triggers for anxiety and stress? Any upcoming events?
- Daily practice Daily practice can make the Breathing Tool a good habit and easier to use when you are stressed.
 - What are upcoming situations when the breathing skill would be helpful?
 - How can your coach help you use this skill?
- Write any other tips that would be helpful to the coach in promoting the Veteran's use of this skill (the Veteran may need a reminder by the coach to use the Breathing Tool).

Note: When filling out forms, try to use the Veteran's preferred term for anxiety or stress.

BREATHING TOOL: PRACTICE SAMPLE

Mark the number of times you experience signs and triggers for stress and anxiety.

My Signs of Anxiety and Stress To	oday
Calling Daughter for Help	Getting a Headache
Re-Opening Door	Asking for Help
Checking Fridge	Closed Door
Waking up at Night	Daughter
Butterflies in Stomach	Being in a New Place

Often when you're anxious or uneasy, your breathing gets rapid and shallow. By paying attention to your breathing and taking slow, deep breaths, you can actually make your entire body more relaxed.

Basic Breathing Steps:

- 1. Take slow, even, deep breaths.
- 2. Inhale while counting slowly... 1, 2, 3.
- 3. Exhale while counting slowly... 1, 2, 3.
- 4. Practice this with your eyes closed.

Did this breathing tool help you?	Yes	No
-----------------------------------	-----	----

BREATHING TOOL: PRACTICE SHEET

Write in your own signs and triggers, and then mark the number of times you experienced these signs and triggers for stress and anxiety.

My Signs of Anxiety an	nd Stress To	day	
	-		
	-		
	_		
	_		
	-		

Often when you're anxious or uneasy, your breathing gets rapid and shallow. By paying attention to your breathing and taking slow, deep breaths, you can actually make your entire body more relaxed.

Basic Breathing Steps:

- 1. Take slow, even, deep breaths.
- 2. Inhale while counting slowly... 1, 2, 3.
- 3. Exhale while counting slowly... 1, 2, 3.
- **4.** Practice this with your eyes closed.

Did this breathing tool help you?	Yes	No
-----------------------------------	-----	----

OVERVIEW

Summary

The Increasing Activity Tool derives from behavioral activation, an intervention that involves increasing pleasurable activities, which then leads to increased positive mood and behaviors. The Increasing Activity Tool can help break patterns of inactivity and boredom. Use concrete goals to encourage Veterans to participate in pleasurable activities that improve thoughts, mood, and overall quality of life. For the most benefit, these activities should occur on a regular basis; and coaches should actively participate in these activities. Main components of this tool include exploring activities the Veteran currently enjoys and previously enjoyed, providing handouts of potential activities, and planning for pleasurable activities. Follow-up visits could include talking about the progress of scheduling regular pleasurable activities and addressing obstacles to completing these.



Use Over the Course of Treatment

The Increasing Activity Tool derives from behavioral activation, an intervention that involves increasing pleasurable activities, which then leads to increased positive mood and behaviors. The Increasing Activity Tool can help break patterns of inactivity and boredom. Use concrete goals to encourage Veterans to participate in pleasurable activities that improve thoughts, mood, and overall quality of life. For the most benefit, these activities should occur on a regular basis; and coaches should actively participate in these activities. Main components of this tool include exploring activities the Veteran currently enjoys and previously enjoyed, providing handouts of potential activities, and planning for pleasurable activities. Follow-up visits could include talking about the progress of scheduling regular pleasurable activities and addressing obstacles to completing these.

Group Format

This skill can also be presented in a group format using the same provider instruction sheet. Small changes to the format would include providing time for group discussion and involving group members in providing ideas for activities for one another with the aid of the List of Pleasant Activities. Group members may also provide ideas for overcoming roadblocks to participating in activities.

Optional

As more activities are added to the Veteran's schedule, a calendar and/or a daily schedule may be helpful for several reasons. First, it may help in planning activities. Second, it will help remind Veterans and coaches about activities. Third, it may help Veterans look forward to the coming activities. Some patients may prefer to have a list of activities written for them for each day, as a monthly or weekly calendar may contain too much information.



If the Veteran is in the process of changing living arrangements (going from inpatient care to home, from home to a personal care home, etc.), separate activity lists for present and future settings may help promote continued use of this tool.

PROVIDER INSTRUCTIONS

- 1. Review practice of prior skill (if you have taught the Veteran a Peaceful Mind Tool in prior meeting).
 - Review practice sheets. (Should anything be added to the practice sheet?)
 - What triggered anxiety for the Veteran?
 - How did they use the Peaceful Mind Tool? Was it helpful?
 - Answer coach (if present in meeting) and Veteran questions about using the skill.
 - Address any problems with using the skill over the previous week.

Note: Involvement of coach in this session - Instructions include tips for involving the coach in the discussion. If the coach is not involved with the Veteran in your sessions, the practice sheet and a summary phone call can help to encourage the coach's support of the Veteran using the Increasing Activity Tool.

- 2. Introduce the Increasing Activity Tool by explaining the purpose of behavioral activation. You might say, for example:
 - When people are feeling (Veteran's word for anxiety), they often also feel sad or blue.
 - Feeling sad can also change your behavior by decreasing your energy to try activities, even activities that you once found enjoyable. This means that taking part in an activity when you are nervous or feeling sad is difficult.
 - It is also hard to organize your time to become more involved in fun activities when you are sad.
 - On the other hand, participating in fun activities can boost your mood and energy levels and distract you from feeling (anxious) or sad.
 - The Increasing Activity Tool focuses on adding more fun activities into your daily life to help boost your mood and cope with anxiety.
- 3. Explain how we can use the Veteran's current activities and desires to increase activities.
 - Ask the Veteran and coach (if present) for feedback about the Veteran's involvement in enjoyable activities.
 - Explain how we can identify pleasant activities by learning about what they enjoyed in the past and what they are doing now that bring feelings of enjoyment and achievement. You might say something, such as: Sometimes by talking about what

you enjoy doing now and what you enjoyed doing in the past, we can create and schedule activities that will build on those interests, so you have more feelings of achievement and pleasure/fun overall.

4. Make an Activity List with the patient.

- In this discussion, you may give the Veteran and coach (if present) the List of Pleasant Activities.
- Suggest to the Veteran that the first step is for them to think of some enjoyable
 activities with which they would like to be involved. You can also ask the coach if
 they have any suggestions for enjoyable activities. Questions that can be asked
 include the following:
 - Are there things that you currently do that are pleasurable, important to you or give you a feeling of satisfaction? Do you want to increase some of these activities?
 - What other things or activities would you like to do that you are not doing now?
 What would be enjoyable or satisfying to do? This could be something you have enjoyed or valued in the past or something new that you want to try. What keeps you from doing these activities?
- Refer to the List of Pleasant Activities handout if the Veteran and coach (if present) have difficulty identifying activities.
- Discuss possible obstacles the Veteran may encounter, such as arranging transportation, getting supplies, scheduling, etc.
- If some tasks the Veteran suggests are unreasonable, suggest activities that may be related to his/her idea but more suited to his/her capabilities and living setting.

If you are working with the Veteran in an inpatient setting:

- An inpatient setting will likely limit the Veteran's access to the enjoyable activities they have been involved with prior to his/her stay. If the Veteran's stay on the unit is likely to be brief, this session might focus on planning for enjoyable activities following discharge. If the Veteran is going to be on the inpatient unit for a longer period of time, the initial focus of the Increasing Activity Tool should be for his/her time on the unit, while a second discussion can be for planning to use Increasing Activity following discharge.
- If the coach is a friend or family member, inquire about his/her ability to bring enjoyable activity items to the Veteran that meet the safety guidelines of the inpatient unit (for example, books, magazines, photo albums).
- Scheduled friend/family phone calls may also be considered as possible enjoyable activities during an extended inpatient stay.

5. Help the Veteran fill out the practice sheet.

- The Practice Sheet: Increasing Activities provides a written summary of this tool and an area for the Veteran to write his/her activity goals. These can be both short-and long-term goals.
- Encourage the Veteran to decide on an activity to be completed before your next visit, as well as other activities to look forward to in the near future.
- Ideally, there will be some activities the Veteran can participate in on a regular basis(such as, for example, reading before bed, going on a date with his/her spouse on Fridays, making/receiving calls with family on Sundays, attending a religious meeting once a week, etc.).
- If the coach is not present during your sessions, provide a completed sheet for them.
- If possible, having a short phone call with the coach may help summarize the Veteran's planned use of the Increasing Activity Tool.

Optional

- Activities may be added to note cards or posted reminders to remind the Veteran to do these activities when they are anxious or sad.
- You may want to warn the Veteran that activities may at first create anxiety because they are new, but they should increase feelings of pleasure and achievement if they are continued.
- Other Peaceful Mind tools that you have used with the Veteran may also be combined with the Increasing Activity Tool. For example, the Veteran may benefit from using the Breathing Tool before or during an activity.



▶ LIST OF PLEASANT ACTIVITIES

 Excursions/Community Going to the park or beach Going out to dinner Going to the library or bookstore Going to the movies Going shopping Going fishing 	Social Activities 1. Getting together with friends 2. Visiting a neighbor 3. Having family over, visiting family 4. Eating out with friends 5. Going to a community center 6. Playing bingo, games or cards
Health and Wellness 1. Grooming (hair or makeup) 2. Eating healthier 3. Relaxing, meditating or yoga 4. Exercising	Physical Activity 1. Walking for exercise or pleasure 2. Light housekeeping, sweeping 3. Swimming or water exercises 4. Gardening or planting
Spiritual, Religious and Kind Acts 1. Going to a place of worship 2. Attending a wedding, baptism, —— bar mitzvah, or other religious function 3. Reading the Bible 4. Attending a Bible study group 5. Doing favors for others 6. Volunteering	Recreational Activities 1. Sewing or woodwork 2. Keeping a journal, diary, scrapbook or photo album 3. Playing with or having a pet 4. Drawing, painting or crafts 5. Singing or listening to music 6. Reading the paper or magazines 7. Watching TV, listening to the radio 8. Doing puzzles or playing cards

PRACTICE SHEET: INCREASING ACTIVITIES

INCREASING YOUR ACTIVITY

- When you are nervous or feeling sad, it can be difficult to take part in an activity, even a fun activity.
- Positive activities can boost your mood, energy levels, and distract you from feeling anxious or sad. They can also help prevent you from feeling anxious or sad later.
- The Increasing Activities Tool helps you add more positive activities to your daily life to help boost your mood and cope with anxiety.







MY ACTIVITY GOALS:

1	
2.	
3. _	
4	

Feedback

Did your mood improve while participating in these activities? _____ Yes _____No

OVERVIEW

Summary

The Peaceful Sleep Tool presents simple sleep-hygiene skills to help the Veteran with sleep difficulties that can sometimes accompany anxiety. Some sleep issues, such as sleep apnea, cannot be addressed by sleep skills; and the Veteran should be referred to a physician if such problems are suspected (for example, snoring loudly; having breathing lapses while sleeping; feeling painful, restless legs while in bed).

Use Over the Course of Treatment

The Peaceful Sleep Tool can be introduced to any Veteran who has sleep difficulties. The provider, Veteran, and coach can work together to develop gradual steps toward following sleep rules. These skills may be most useful for patients and coaches who live together, as coaches can remind the patient to practice sleep tools and may even benefit from using the skills themselves. If the coach does not live with the patient, however, they may still remind the patient of these skills. If the Veteran has minimal cognitive impairment, the Peaceful Sleep Tool may not require much coach involvement.

Note to Inpatient Providers

Inpatient providers can discuss the sleep tools with an emphasis on continued use after the Veteran discharges. Inpatient providers who work with Veterans transitioning to their setting for a longer term (such as a nursing home) can try to replicate routines the Veteran was used to at home (such as continuing to watch the news before bed or getting up at the same time in the morning and reading the newspaper) and create new routines suited to the Veteran's present environment (such as participating in the afternoon exercise class) to promote better sleep.

Group Format

This skill can also be presented in a group format for individuals with mild cognitive impairment using the same provider instruction sheet. Small changes to the format would include providing time for group discussion. Group members may also provide ideas for overcoming roadblocks to implementing sleep tools.

PROVIDER INSTRUCTIONS

- 1. Review practice of prior skill (if you have taught the Veteran a Peaceful Mind Tool in the previous meeting), including the practice sheets (if used).
 - Discuss how and when the skill was practiced.
 - Discuss whether the skill was helpful.
 - Answer any questions regarding use of skill.
- 2. Begin discussing sleep by talking about the relationship between sleep and anxiety/mood, and ask about the Veteran's sleep and satisfaction with his/her sleep.

You might want to say, for example:

- Older adults need about 7 hours of sleep, which can be less than they needed when they were younger.
- Sleep can be disrupted when you are anxious, stressed, worried, or sad.
- Even though older adults need less sleep, they still experience more tiredness and have difficulty coping with anxiety or sadness when sleep is disrupted.
- How has your sleep been lately? How many hours of sleep do you get at night? Do
 you have problems going to or staying asleep? Do you sleep during the day? Do you
 notice a relationship between feeling stressed or down and your sleep? How much
 caffeine do you drink a day? Tell me about how you exercise during the week.
- 3. Introduce nighttime sleep skills.

You may start by saying:

There are simple skills you can do at night that can improve your ability to sleep and feel rested the next day. We will start with a few examples and talk about whether they may be helpful for you to try.



- Provide Peaceful Sleep Tools handout.
- Review the tools on the handout, allowing time for the Veteran and coach (if present) to discuss their sleep habits and ways in which the Peaceful Sleep Tools may be helpful. Mark or highlight the tools the Veteran is interested in possibly trying.

A. Set a regular bedtime and wake time.

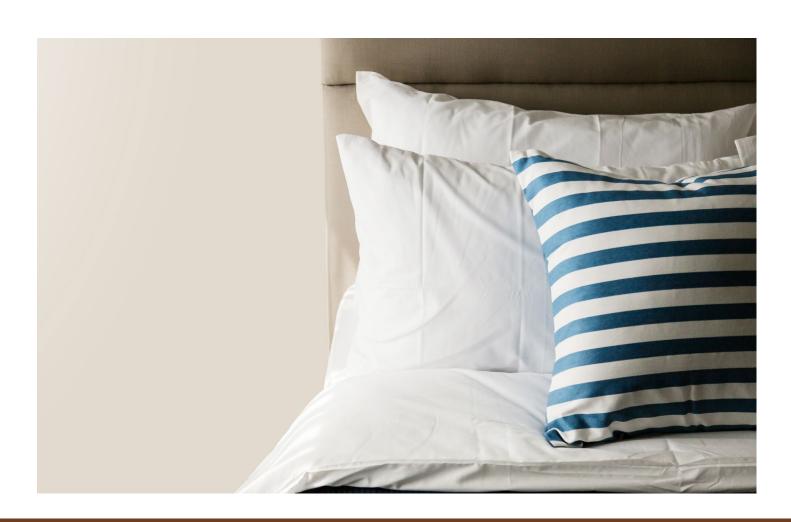
- Review Veteran's bed and wake time.
- Encourage them to set a regular bedtime and not to expect to sleep for more than 6-8 hours.
- You may say: It's helpful to go to bed at the same time and wake up at the same time. Although it may be hard when you didn't sleep well, it is important to wake up at about the same time every morning, give or take 30 minutes. This good habit helps you get a good night's sleep.
- Sometimes people want to sleep later after a difficult night, but then they often have even more trouble getting to sleep the next night. Setting an alarm can help this pattern.
- Actually, when you get used to it, getting up at a regular time can create new pleasures with some early morning activity (for example, walking, reading, drinking coffee).
- **B.** Develop a routine when it is time to get ready for bed.
 - A routine helps prepare your body for sleep.
 - Review current activities before going to bed and ways to make these a routine, including the addition of calming or relaxing activities.
 - Emphasize the importance of doing activities in the same order around the same time every night.



- **C.** If restless-leg syndrome or other muscle problems interfere with sleep, encourage the Veteran to stretch legs and/or soak legs in a warm bath just before bed.
- **D.** Discuss with the Veteran ways to relax before bedtime or when waking up during the night by, for example, listening to calming music, using deep-breathing skills, using calming thoughts, or using their imagination to help them think of a calm place they have been or can imagine being.
- **E.** Limit the use of the bedroom: Use the bedroom/bed only for sleep or intimacy.
 - You may say: It is important to use the bed/bedroom for sleeping, so that your body will form a good habit of going to sleep when you go to bed.
 - This means no TV, eating, reading, etc. in bed. If you like to read to relax or get sleepy for the evening, put on your pajamas and sit in a chair to read until you are sleepy enough to go to bed.
- F. Get out of bed if you are not asleep in 15 to 20 minutes.
 - You may say: When you go to bed at your regular time, but don't fall asleep within 15 to 20 minutes, you should get up and get out of bed and do something else until you feel sleepy again.
 - Remember, you do not want to do anything in bed for any extended period of time but sleep.
 - This fosters the routine of the bed/bedroom and sleep and lessens the pattern between the bed and worrying about getting to sleep.
 - This rule can be used throughout the night: If you get up in the middle of the night and can't get back to sleep in 15 to 20 minutes, then move to another location until you are sleepy and do something calming.
 - Notes: If the patient lives in one room (that is, in an assisted-living facility), encourage them to move to a chair if no other room is available and if that is physically possible. If the patient can't leave the bed, perhaps adjusting it to a more upright position during the day, and to a flatter position for sleeping at night, can help form an association between one bed set-up for wake time and another bed position for sleeping. Keep in mind that some patients are fall risks. This risk can increase if the patient is groggy.
- **G.** Use other calming tools to help you sleep.
 - If you have learned other Peaceful Mind Tools such as the Breathing Tool or Calming Thoughts Tool, you can practice them as you prepare for bed.
 - It may help to post reminder cards to use your Peaceful Mind Tools where you can easily see them while in bed, such as on a note card you keep on your nightstand.

- **H.** Make your bed and bedroom as conducive to sleep as possible.
 - Think of all the distractions, such as light, noise, or movements, that might be keeping you awake at night. Then, try to minimize them.
 - You may consider such things as putting curtains up, sleeping with earplugs in, or anything else to minimize distractions that keep you awake.
- Decrease pain.
 - Distract yourself from pain by doing enjoyable things just before bed.
 - Talk with your physician regarding the impact of pain on your sleep.
- **4. Introduce Daytime Sleep Skills:** There are also simple things that you can do during the day to help you sleep better at night and feel more rested during the day. Let's talk about a few of these skills today.
 - A. Do not nap or sleep after 3:00 PM.
 - Naps can be disruptive to nighttime sleeping.
 - If you are unable to avoid a nap mid-day, limit it to 1 hour, and do not sleep after 3:00 PM.
 - It may help to nap somewhere other than in your bed to decrease your nap time.
 - **B.** Do not drink caffeinated drinks in the afternoon.
 - Surprisingly, the effects of caffeine can last up to 8 hours, so do not drink caffeine after (8 hours before patient's normal bedtime).
 - C. Exercise at least 3 to 4 days per week before (4 hours before normal bedtime).
 - Exercising in the morning or afternoon can help make you tired at night.
 - Beware, though, if you exercise too close to bedtime, it can raise your heart rate and body temperature and cause you to have more trouble falling asleep.
 - Veterans should check with their physicians for exercise ideas that are appropriate for their health conditions.
 - **D.** Try spending a few minutes each morning in natural sunlight.
 - Spending some time in natural light has been shown to help a person feel better overall and actually improve sleep.
 - However, do not spend too much time in the sun if you sunburn easily or if it is too hot outside.

- 5. Help the Veteran choose how they will include these skills into his/her daily habits.
 - Choose one or two specific Sleep Tools to include into the Veteran's daily routine.
 - You may write out the Sleep Tools on reminder index cards and discuss where the cards can be placed.
 - Explicitly note on the practice sheet the Sleep Tools the Veteran is going to try to incorporate into his/her routine
 - The Veteran may have more than two Sleep Tools they are interested in trying. Encourage gradual incorporation of tools to lessen possible frustration in making too many changes in daily routine at once.
- **6. Include the coach.** If the coach is another staff member, they may benefit from having a copy of the practice sheet so that they can support the Veteran's use of the selected Sleep Tools.



PEACEFUL SLEEP TOOLS

MANY PEOPLE HAVE TROUBLE SLEEPING BECAUSE THEY ARE WORRYING. IF YOU DO NOT GET A GOOD NIGHT'S SLEEP, REMEMBER THAT YOU CAN ALWAYS GET MORE THE NEXT NIGHT. THESE SIMPLE RULES CAN HELP YOU SLEEP AND FEEL RESTED THE NEXT DAY.

Nighttime Skills

Go to sleep and wake up at the same time every day.

 Going to sleep and waking up at the same time every day creates good habits.

Develop a routine or habit when it is time to get ready for bed.

- A routine will help calm you and prepare your body for sleep.
- This may include brushing your teeth, taking medications, calling someone, and/or listening to calming music.

Stretch legs or soak legs in a warm bath just before bed.

 Stretching your legs and/or soaking them in a warm bath just before bed can help calm muscles and stop them from moving at night.

Relax before bedtime or when waking up at night.

 Relaxation before bed or when waking up at night may include deep breathing, listening to calming music or reading.

Limit the use of the bed for sleep or intimacy with your partner.

Do not do anything else except sleep in bed or be intimate with your partner. This
includes reading, worrying, talking, or watching TV.

Get out of bed if you are not asleep in 15 to 20 minutes.

• When you don't fall asleep within 15 to 20 minutes, you should get up and do something calming or relaxing (such as reading, breathing deeply, listening to calming music) until you feel sleepy again.

- This rule can be used throughout the night. If you get up in the middle of the night and can't get back to sleep in 15 to 20 minutes, then do something calming or relaxing outside of the bed until you are sleepy.
- If it is difficult for you to leave the bed at night, you can alter your bed or bedroom so that it is different during the time you are doing your calming or relaxing activity than it is when you try to sleep.
 - For example, rather than leaving the bed for 15 to 20 minutes, you can turn the light on and/or prop yourself with pillows and read. When you are sleepy and ready to try to sleep, return to the original sleep situation (i.e., turn the light off, return pillows, put the book away).
 - Remember, getting out of bed while groggy could be dangerous if you are prone to falling, so be careful!

Use other calming tools to help you sleep.

- If you have learned other Peaceful Mind Tools such as the Breathing Tool or Calming Thoughts Tool, you can practice them as you prepare for bed.
- It may help to post reminder cards to use your Peaceful Mind Tools where you can easily see them while in bed, such as on a note card you keep on your nightstand.

Make your bed and bedroom as conducive to sleep as possible.

- Think of all the distractions, such as light, noise, or movements that might be keeping you awake at night. Then, try to minimize them.
- You may consider such things as putting curtains up, sleeping with earplugs on, or anything else to minimize distractions that keep you awake.

Decrease pain.

- Distract yourself from pain by doing enjoyable things just before bed.
- Talk with your physician regarding the impact of pain on your sleep.



Daytime Skills:

Do not nap or sleep after 3 PM.

- Naps can be disruptive to nighttime sleep.
- If you are unable to avoid a nap mid-day, limit it to one hour and not after 3:00 pm.

Do not drink caffeinated drinks in the afternoon.

 Caffeine can keep you awake for up to 8 hours, so do not drink caffeine after 8 hours before normal bedtime.

Exercise at least 3 to 4 days per week before (4 hours before bedtime).

- Exercising in the morning or afternoon can help make you tired later in the day, but if you exercise too close to bedtime, it can raise your heart rate and body temperature and cause you to have more trouble falling asleep.
- Talk with your physician for exercise ideas that are safe and fit your needs.

Try spending a few minutes each morning in natural sunlight.

- Spending some time in natural light has been shown to help a person feel better overall and actually improve sleep.
- However, do not spend too much time in the sun if you sunburn easily or if it is too hot outside.



PRACTICE SHEET: PEACEFUL SLEEP

SLEEP IS GOOD FOR YOU!

- ✓ Better sleep can help you cope with anxiety and stress
- ✓ This week, try using one or more of the Peaceful Sleep Tools

Sleep Tools I am Going to Try This Week:		
1		
2		
3		
4		
5.		
6		

Other Sleep Tools I will Try Later: 1. ______ 2. _____ 3. _____ 4. _____ 5. _____ 6. _____

Practice Tips

- 1. Practice, practice, practice. It may take a while before you notice benefits from using Peaceful Sleep Tools. It took time for you to develop your old sleep habits, so it will take time to develop your new peaceful sleep habits
- 2. Add tools gradually to your routine

Feedback

Did these tools help improve your sleep?

_____ Yes ____No

OVERVIEW

Summary

This section presents Calming Thoughts, a simplified version of examining and challenging thoughts that contribute to anxiety, a tool used in CBT. In Peaceful Mind, the provider takes the lead in modifying anxiety-related thoughts and developing potential Calming Thoughts. Calming Thoughts help the Veteran cope with anxiety by changing the thoughts that they focus on during the anxiety-producing situation. Calming Thoughts can increase the Veteran's perceptions of control and may help them perceive the situation in a new, less anxiety-provoking manner. These statements can be framed as "self-talk" or self-instructions.

Use Over the Course of Treatment

Using your knowledge about the Veteran's stressors and strengths, prepare some Calming Thoughts you think will work for them before your meeting to teach this tool. You may have noticed statements you or others have made to the Veteran or statements they have said to him-/herself that have helped ease anxiety – use these statements as potential Calming Thoughts to present to the Veteran. However, be flexible during the session, and consider input from the Veteran and coach (if present) about what Calming Thoughts they feel would be most helpful. See the practice sheet for a listing of examples of general Calming Thoughts that may be useful. A listing such as this, with additional Calming Thoughts designed specifically for the Veteran, may be given to the Veteran and coach (if present) to help them select Calming Thoughts to try.

For example, if the Veteran is anxious when getting labs drawn, a calming thought might be, "I can do what I need to do, even though I'm anxious," or "This is not the worst thing in the world," or "I've made it past tougher hurdles." Rather than thinking, "I hate shots; I don't want to do this; It's going to hurt," the Veteran would use a Calming Thought to help cope (by changing his/her thoughts) about the anxiety-provoking lab situation.

The Calming Thought Tool is a more complex tool than the Breathing or Increasing Activity Tools. Veterans may benefit from having some success with another Peaceful Mind Tool before working with Calming Thoughts. Calming Thoughts can be written on index cards (reminder cards) to be carried in a pocket, wallet, or purse; placed on a bedside table or the refrigerator; or taped to a mirror. Coaches can be made aware of the Calming Thought the Veteran has found helpful via the practice sheet so that they can remind the Veteran to use this tool or repeat the Calming Thought when they notice they are anxious. It will take some practice for the Veteran to get comfortable with using this tool. Encourage them to keep practicing, as this tool might take a little longer to master than the other tools. It may take some time for the Veteran to discover the Calming Thought that works best for them.

Group Format

Given that this tool usually takes more time to master, presenting this in a group format may be most beneficial for Veterans with minimal cognitive impairment. The same Provider Instruction outline can be used for the group format, with minor changes. Allow for group discussion, and ask group members if they have questions after each section of the provider outline. Another way of teaching this tool is to present the tool in group format, and then spend a small amount of time with each Veteran individually to make sure they understand the Calming Thought Tool and is able to pick a few Calming Thoughts to try the next time they feel anxious.



PROVIDER INSTRUCTIONS

1. Review practice of prior skill (if you have taught the Veteran a Peaceful Mind Tool in prior meeting).

- Review practice sheets (Should anything be added to the practice sheet?)
- What triggered anxiety for the Veteran?
- How did they use the Peaceful Mind tool? Was it helpful?
- Answer coach (if present in meeting) and Veteran questions about using the skill.
- Address any problems with using the skill over the previous week.

2. Introduce Calming Thoughts.

- Give the patient and coach the Practice Sheet: Calming Thoughts Tool.
- Explain the purpose of Calming Thoughts. For example, you might want to say:
 - **A.** What you think about before and during an anxious situation influences your emotions, how you behave, and how well you can cope with the situation.
 - **B.** A Calming Thought is a phrase you say to yourself that helps decrease your anxiety about a situation.
 - C. It can be like an instruction to yourself or "self-talk."
- Provide examples, such as:
 - A. Relax, and take a deep breath.
 - B. It's ok if I make a mistake.
 - C. I can get through this.
 - **D.** I can do this.

3. Choose Calming Thoughts.

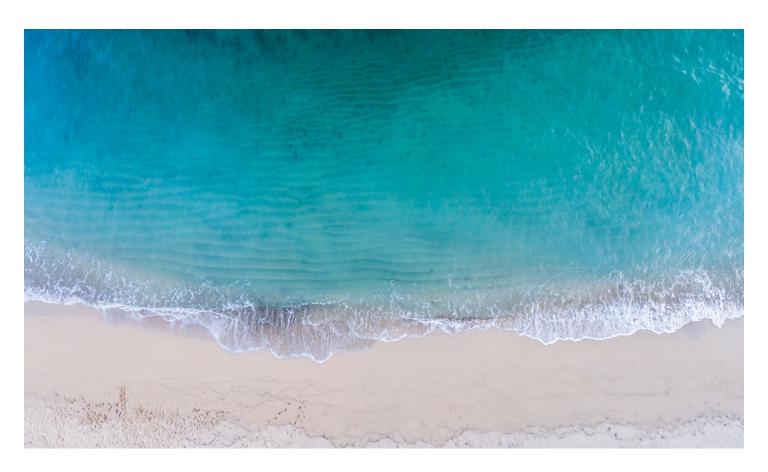
- Review Practice Sheet: Calming Thoughts.
- Determine with Veteran and coach (if present) which of these Calming Thoughts might help.
- Explain that the patient and coach can also come up with other Calming Thoughts in addition to those provided.
- Help the Veteran choose one or two Calming Thoughts to try when they next feel anxious.
- Make sure the Veteran believes the chosen Calming Thoughts. It does not help to say, "It's all going to work out," if the Veteran does not believe it.
- Mark and/or write in on the practice sheet the Calming Thoughts chosen by the Veteran.

- Have the Veteran talk about an anxiety-provoking situation; then say the chosen Calming Thought(s), and discuss whether focusing on the Calming Thought(s) reduces his/her anxiety.
- Discuss possible upcoming anxiety-provoking situations during which Calming
 Thoughts may be helpful. You could make a reminder note on a practice sheet to use
 before the situation, for example, Review before Doctor Appointment on Tuesday.

4. Give the Veteran tips to help them use this tool.

- Discuss whether the patient would like the Calming Thought(s) written on index cards to carry with them or to be posted in a visible place.
- Explain that Calming Thoughts or self-instructions may work best if the patient actually says the statement aloud and/or reads it on a reminder index card.
- 5. Discuss how the Veteran and coach (if present) would like to work together to practice using Calming Thoughts daily. If the coach is not present, giving them the practice sheet with selected Calming Thoughts may be helpful to assist them in promoting the Veteran's use of this tool.

6. Answer any questions.



PRACTICE SHEET: CALMING THOUGHTS

THOUGHTS MATTER!

What you think about before and during a stressful time influences your emotions, how your body feels, how you behave, and how well you can cope with the situation. A Calming Thought is a phrase you say to yourself that helps to decrease your anxiety about a situation. It can be like an instruction to yourself or "self-talk."

Check a few of the calming thoughts below that you would like to use. Feel free to add in any of your own.

Jaiming	Inoughts	
	Relax and take a deep breath.	
	It is okay if I make a mistake.	
	I'll take things one step at a time.	
	I can do this, even though I am anxious.	
	I can deal with this situation.	
	Don't worry - worry won't help.	
	I can take one step at a time.	
	Even if I make mistakes, it will be ok.	
	This is not the worst thing in the world.	
	I will be ok.	
eedback	<	
Vhere the calming thoughts helpful to you? YesNo		



