ACCESS

ADJUSTING to CHRONIC CONDITIONS
with EDUCATION, SUPPORT, and SKILLS

Patient Workbook

Version 3.1
1.14.11

Clinician:_____
Clinician's Phone number:_____

Project Coordinator:_____
Project Coordinator's Phone Number:_____

Jeffrey A. Cully, PhD
Melinda A. Stanley, PhD
Michael Kauth, PhD
Aanand Naik, MD
Mark Kunik, MD, MPH
Houston Center for Quality of Care & Utilization Studies
Michael E. DeBakey VA Medical Center
Baylor College of Medicine
South Central MIRECC

ACCESS

ACCESS Patient Workbook
Version 3.2
August 16, 2012

ACCESS

Table of Contents

Scheduling Form ..... Pg. 1

Overview of ACCESS ..... Pg. 2-3

Session #1 – Chronic Cardiopulmonary Disease and Stress . Pg. 5-13

Session #2 – Understanding Personal Impact and Increasing Control ..... Pg. 15-20

Elective Module A – Taking Control of Your Physical Health Pg. 21-46

- Living Healthy (Exercise and Nutrition) ..... Pg. 23-31
- Managing a Chronic Illness (Talking to Your Doctor, Managing Medications & Coping with Flare-ups) ... Pg. 32-46

Elective Module B – Using Thoughts to Improve Wellness .. Pg. 47-55

Elective Module C – Increasing Pleasant Activities ..... Pg. 57-66

Elective Module D – Learning How to Relax ..... Pg. 67-76

Session #6 (End of Active Treatment) ..... Pg. 77-81

Additional Practice Worksheets ..... Pg. 83-84

Notes ..... Pg. 85-88

ACCESS

ACCESS

Scheduling Form

	Date	Time	Phone/Person
Session 1	__/__/__	:	□ In-Person □ Phone Phone Number:_____
Session 2	__/__/__	:	□ In-Person □ Phone Phone Number:_____
Elective Module ____	__/__/__	:	□ In-Person □ Phone Phone Number:_____
Elective Module ____	__/__/__	:	□ In-Person □ Phone Phone Number:_____
Elective Module ____	__/__/__	:	□ In-Person □ Phone Phone Number:_____
Session 6	__/__/__	:	□ In-Person □ Phone Phone Number:_____
Phone Booster 1	__/__/__	:	□ In-Person □ Phone Phone Number:_____
Phone Booster 2	__/__/__	:	□ In-Person □ Phone Phone Number:_____

ACCESS

Adjusting to **C**hronic **C**onditions with **E**ducation, **S**upport, and **S**kills

What is ACCESS?

A **skills-based intervention** specifically designed to help chronically ill patients acquire skills and strategies to address the physical and emotional difficulties that often arise in the presence of a medical illness.

How will ACCESS help me?

You and your clinician will work together to decide upon specific topics to cover and skills to learn ("plan of action") that meet your individual preferences and needs.

Designing a plan of action will include choosing specific "modules" based on which modules you and your clinician think will most dramatically improve your life.

Each **module** covers a specific skill or set of skills that generally take one session to complete.

Modules

Not all modules can be reviewed during the sessions, though all are included in this workbook for your benefit:

Core Sessions 1-2

i. Chronic Cardiopulmonary Disease and Stress

ii. Understanding Personal Impact and Increasing Control

Elective Modules (Sessions 3, 4, 5)

A. Taking Control of Your Physical Health

1. Living Healthy (Exercise and Nutrition)

2. Managing a Chronic Illness (Talking to Your Doctor, Managing Medications, Coping with Flare-ups)

B. Using Thoughts to Improve Wellness

C. Increasing Pleasant Activities

D. Learning How to Relax

How is the intervention offered and what is expected of me?

There are a total of **six** active intervention sessions (weekly meetings of 30-45 minutes). You are expected to attend all of the intervention sessions. However, if you prefer, many of the sessions can be covered by telephone rather than meeting in-person.

Between sessions, you will be asked to put the skills you learn into action with help from your clinician.

After the six intervention sessions, you will also receive 2 follow-up booster sessions, which are covered over the telephone.

Session #1
Chronic Cardiopulmonary Disease and Stress

Session Overview (Goals & Possible Outcomes):

GOALS:

- ☐ I. Provide information about ACCESS – how we intend to help.
- ☐ II. Introduce the ACCESS materials and procedures.
- ☐ III. Learn from you (the patient) about your chronic condition, including any feelings of stress or negative emotions you have experienced.
- ☐ IV. Discuss overlap between physical and emotional health, including concept of self-management.
- ☐ V. Discuss concept of quality of life as it applies to you.
  1. Quality of Life Worksheets
  2. Most pressing concerns
  3. Strategies for improving quality of life
- ☐ VI. Introduce home practice (narrative exercise, past coping).

PHYSICAL HEALTH OUTCOMES

- ☐ Increase physical symptom recognition.
- ☐ Gain insight into your chronic illness and its impact.
- ☐ Begin coping strategies for symptom management.

EMOTIONAL HEALTH OUTCOMES

- ☐ Increase sense of hope.
- ☐ Increase control and power.
- ☐ Increase your ability to recognize stress and depression.
- ☐ Begin coping strategies for managing stress.

ACCESS "Basics"

What is healthy coping versus unhealthy coping with chronic conditions?

There are different ways for a person with a chronic condition to manage his/her disease. A **healthy way to cope** with chronic illness is to keep your life active and full and not to withdraw and make the disease the center of your life.

You have the ability to determine how much your illness affects your life.

How a person with a chronic condition decides to manage illness is a decision within a person's control. It is important to realize that YOU possess the ability to change how much your illness will affect your life through your thoughts and behaviors.

Decide what areas of your life you want to address.

Because you are in control, it is possible for you to decide what areas of your life you want to address. Self-management is a skill to employ when tackling these areas and involves first identifying things you want to accomplish in life.

Self-Management

Self-management is an individual's ability to manage the symptoms, lifestyle changes, and consequences of their chronic condition. This does not mean that individuals must "do it alone." Rather it means that individuals with chronic conditions can acquire skills that empower them to take control of their emotional and physical health.

The following diagram shows how the concept of self-management skills can improve quality of life.

Chronic illness
(Symptoms, required lifestyle changes, functional limitations)

↓

Decreased quality of life
(Negative view of self and future)

↓

Self-management skill development
(Managing symptoms, managing stress, living healthy)

↓

Increased feelings of control,
improved management of the illness

↓

Improved quality of life and
decreased impact of physical illness

Understanding your Quality of Life

Clinician Guided Worksheet

Instructions: Consider the aspects of your life that cause you to experience stress and those that feel neutral or positive. Put checks in the red boxes to indicate the particular aspects of your life that are stressful. Then put checks in the blue boxes for those aspects of your life that do not cause you to experience stress or help you to feel comfortable or positive.

Stress

← Physical Health →

- ☐ Symptoms ☐
- ☐ Medications ☐
- ☐ Physical Limitations ☐
- ☐ Lifestyle Changes ☐

← Family, Social, Spiritual Life →

- ☐ Relationships ☐
- ☐ Social Activities ☐
- ☐ Hobbies / Work ☐
- ☐ Financial Issues ☐
- ☐ Spirituality ☐

← Emotional Health →

- ☐ Mood ☐
- ☐ Worry / Stress ☐
- ☐ Thoughts about the Future ☐
- ☐ Feelings of Control ☐
- ☐ Self-esteem / Self-image ☐

Neutral / Comfortable / Positive

Improving your Quality of Life

Clinician Guided Worksheet

The following worksheet lists different aspects of your life that we might be able to target as part of our work together.

✓ Place a check mark next to the items that you think will make a difference in your quality of life.

∗ Place a star next to the ones that you would be most interested in addressing first (these would represent your ideas of what would be the most likely to have an impact on your quality of life).

Physical Health
☐ Increasing knowledge about chronic disease
☐ Learning how to manage symptoms
☐ Learning how to lead a healthy lifestyle
☐ Learning how to handle flare-ups
Family, Social, and Spiritual Life
☐ Increasing involvement with family and friends
☐ Increasing social activities
☐ Becoming more active in hobbies
☐ Addressing financial concerns
☐ Increasing spiritual or religious activities
Emotional Health
☐ Improving self-image and self-esteem
☐ Increasing feelings of hopefulness about the future
☐ Increasing feelings of being a useful person
☐ Decreasing stress
☐ Decreasing feelings of depression
☐ Decreasing feelings of worry or anxiety

My Most Pressing Concerns

Summarize the previous two worksheets and list your top 2 or 3 concerns.

1. _____
_____

2. _____
_____

3. _____
_____

List some possible coping strategies you might use to address these concerns.

1. _____
_____

2. _____
_____

3. _____
_____

Narrative Exercise

Home practice #1 (Session 1)

Please respond to the following prompts/questions about what it means to you to have a chronic medical condition. Feel free to write notes rather than full sentences in order to save time.

- Consider the effects your illness had on your beliefs about yourself.

_____

_____

_____

- What impact has your illness had on your life (including work/hobbies and other people including family)?

_____

_____

_____

- What impact has your illness had on your thoughts about your future?

_____

_____

_____

If you have difficulty with this exercise, or want to learn more, here are some additional questions designed to help you express how you feel about having a chronic medical condition.

- Has your physical illness impacted your sense of hope? If so, how?

_____

_____

_____

- Has your physical illness reduced your feelings of independence, or usefulness? If so, how?

_____

_____

_____

- Have you recognized any losses related to your physical illness? If so, please explain.

_____

_____

_____

- Do you feel you have control over your physical illness or do you often feel that your physical illness controls you? Please explain.

_____

_____

_____

- Do you feel overwhelmed, have trouble making decisions, or simply feel that you are stuck and need some help moving forward?

_____

_____

_____

What You Are Already Doing to Cope

Home practice #2 (Session 1)

What are you currently doing (or have done in the past) to help you manage your physical and emotional health and well-being?

_____

_____

_____

_____

What is working for you now?

_____

_____

_____

_____

What did not work as well?

_____

_____

_____

Examples of coping might include:

- working on hobbies, activities or staying busy
- working actively with your doctor
- talking to or getting reassurance from a friend or loved one
- using positive thinking to help cope with a difficult situation
- using a skills such as breathing deeply to help you relax

Session #2
Understanding Personal Impact and Increasing Control

Session Overview (Goals & Possible Outcomes):

Goals:

- ☐ I. Review between session assignments:
  - A. Personal meaning of having a chronic illness
  - B. Past and current self-management approaches
- ☐ II. Set initial goals.
- ☐ III. Discuss intervention options and match to individual patient needs.
- ☐ IV. Discuss action plans
- ☐ V. Next assignment: Apply and monitor first action plan.

Physical Health Outcomes

- ☐ Increase insight into struggles of having a chronic condition.
- ☐ Use of goal setting and action plans will help guide the way to improved health.

Emotional Health Outcomes

- ☐ Increase feelings of control and power.
- ☐ Build hope and confidence.
- ☐ Talking about concerns will decrease negative emotions.

Overall Goals

What I hope to accomplish…

Please list specific goals/activities you plan to attain - when, where, what, how:

1. _____

2. _____

3. _____

How important are these goals to you?

Not very important 1 2 3 4 5 6 7 8 9 10 Very important

List of modules to help me meet my goals:

1. _____

2. _____

3. _____

How confident are you that these modules will help?

Not confident 1 2 3 4 5 6 7 8 9 10 Very confident

ACCESS Elective Modules

Elective Modules occur during sessions 3, 4, and 5. We would like to work with you to select 2 or 3 modules that best meet your needs. Here is a list of modules / skills we offer.

A. **Taking Control of Your Physical Health** (module may need 2 sessions)

1. Living Healthy (Exercise and Nutrition)

   Skills to improve your diet and exercise by setting up a program that you help to design.

2. Managing a Chronic Illness (Talking to Your Doctor, Managing Medications, Coping with Flare-ups)

   Communication skills to more effectively talk to your doctor and ultimately to get more answers to your medical questions and help you to feel like an active member of your treatment team. Skills to help you to better manage the complexities of managing multiple medications and how best to deal with side effects. Skills to better manage symptom flare-ups. Special attention will be given to when you should contact a medical provider.

B. **Using Thoughts to Improve Wellness**

This module was designed to change the way you think about specific situations. These exercises help you to avoid negative or pessimistic thinking and maximize positive or optimistic thoughts.

C. **Increasing Pleasant Activities**

This module focuses on increasing the number of pleasant or enjoyable activities in your life. These exercises will help you to feel better about yourself by becoming more active in the things you like you to do.

D. **Learning How to Relax**

This module focuses on helping you to learn skills to relax. These skills are particularly helpful for individuals who feel stress.

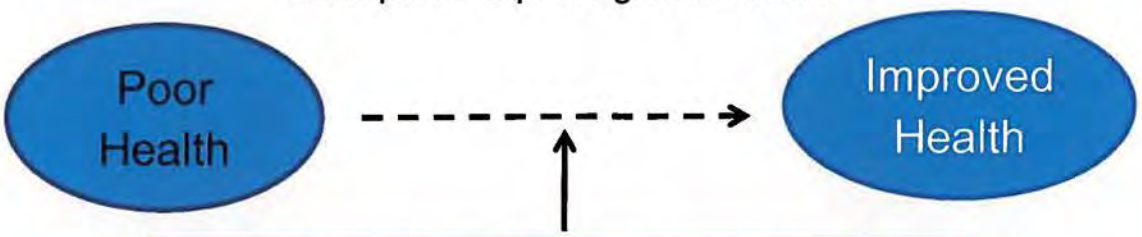
Action Plans

Example 1: Cross Country Trip – Getting from Houston to Boston by car

ACTION PLAN OR STEPS NEEDED

1. I need to decide which roads I will take
2. I need to estimate how long will it take to get there
3. I need to decide where I will stay (e.g. hotel).
4. I need to estimate how much money I will need and whether I have enough to travel right now.
5. I need to make a list of the supplies I will need including the type of clothes I will wear and food.

Example 2: Improving Your Health



ACTION PLAN OR STEPS NEEDED

1. I should talk to my doctor
2. I can exercise more frequently
3. I could eat healthier
4. I need to take my medications as prescribed
5. I could learn to think more positively
6. I could try to re-engage in activities I used to do to improve my mood.

Initial Action Plan

The specific goal or activity you plan to attain:

_____

_____

_____

Timeline for obtaining goal:

_____

_____

_____

Steps to help me accomplish my goal:

_____

_____

_____

Potential obstacles or barriers, and ways to overcome them:

_____

_____

_____

How important is this goal to you?

Not very important 1 2 3 4 5 6 7 8 9 10 Very important

How likely are you to follow through with these steps in the next week?

Not likely 1 2 3 4 5 6 7 8 9 10 Very likely

Carrying Out & Monitoring Action Plan

Goal: _____

_____

Day 1	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**
Day 2	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**
Day 3	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**
Day 4	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**
Day 5	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**
Day 6	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**
Day 7	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**

Elective Module A
Taking Control of Your Physical Health

Session Overview (Goals & Possible Outcomes):

Goals:

- ☐ I. Review home practice from prior session.
- ☐ II. Review module specifics and discuss how controlling physical health symptoms can improve quality of life, well-being, and mood.
  - Living Healthy (exercise and nutrition)
  - Managing a Chronic Illness (How to talk to your doctor, managing medications, coping with flare-ups)
- ☐ III. Review concepts of self-management and goal setting.
- ☐ IV. Review what patient is doing and has done in the past to improve physical health.
- ☐ V. Select submodules.
- ☐ VI. Complete self-management skill submodules.
- ☐ VII. Set goals and action plan.
- ☐ VIII. Assignment- Apply and Monitor Action Plan.

PHYSICAL HEALTH OUTCOMES

- ☐ Increase energy.
- ☐ Improve communication with your doctor.
- ☐ Better manage your medications and side-effects.
- ☐ Better manage symptom flare-ups.

EMOTIONAL HEALTH OUTCOMES

- ☐ Increase feelings of control and confidence.
- ☐ Decrease feelings of depression and low energy.

Module A: Taking Control of Your Physical Health

This module contains 5 submodules or skills that you and your therapist can focus on. You can select one or more of these submodules or skills depending on your physical health needs.

Submodules (skills)

Living Healthy

Exercise – This submodule (or skill) was designed to help patients to develop an individual exercise plan to increase strength and stamina and to improve emotional well-being.

Nutrition – This submodule (or skill) was designed to help patients to better manage their diet and food consumption. Often changes to diet can lead to improved overall health, improved weight, and improved energy levels and mood.

Managing a Chronic Illness

Talking to Your Doctor – This submodule was designed to help patients to communicate more effectively with their healthcare providers. A good relationship with your doctor can be critical for health and well-being. Strategies are provided to make your interactions with your doctors more effective.

Managing Medications – This submodule was designed to help patients to manage their medications. Medically ill patients are often asked to take a large number of medications which can be hard to manage and may cause important side effects. Strategies are provided to help you manage your medications more effectively.

Coping with Flare-ups – This submodule was developed to help patients to cope with the discomfort of having a symptom or condition "flare-up". Symptom flare-ups can be troubling and distressing and may even lead to a trip to the hospital emergency room. This submodule teaches strategies to help patients avoid flare-ups as well as strategies to manage flare-ups once they occur.

Exercise/Physical Fitness

What do you hope to accomplish?

1: _____

2: _____

3: _____

Steps for designing an exercise/fitness program

1. Begin by discussing and obtaining permission to undertake exercise with your doctor
2. Keep your exercise goal in mind
3. Choose exercises you want to do, and can do
4. Choose the time and place to exercise; make an action plan designed to meet your goal
5. Make an exercise diary or calendar to keep track of your progress
6. Revise your program as needed

Benefits of exercise

Physical activity and exercise are not only vital to your health but can actually be fun too. Exercise is a useful tool to manage your illness and for making everyday activities less stressful. Regular exercise actually improves your strength, energy, and self-esteem, and even lowers feelings of anxiety and depression.

Formal and informal ways to exercise

Daily exercise can include both formal planned activities and simply being more physical in everyday life. Your day is probably filled with great opportunities for being more active, or perhaps a formal exercise program is more helpful.

Schedule exercise

Setting aside specific blocks of time during the week is a great way to start a formal exercise program. An informal goal might not require a scheduled time but should include a plan to be more active in your daily life. Whether formal or informal, it is important to choose a goal (something you want to do) that exercise can help you reach.

Steps involved in choosing an exercise goal and making a plan to be more active

1. Choose a goal, thinking about why you can't or don't do this now.
2. Decide what about your abilities makes it difficult to do what you want.
3. Design your exercise plan. Remember to discuss and obtain permission to undertake your exercise plans with your doctor.

Anticipating barriers

Despite our best intentions, common barriers to exercise do come up.

Get creative and find better ways to counter the excuses and become more positive about exercise and its benefits. Remember that the best way to accomplish your exercise goal is to build a program that suits your needs.

Give the plan a chance to succeed by setting reasonable goals and staying motivated. And, remember to enjoy the exercise itself, not just its benefits to your health!

Remember to set small goals to avoid a letdown or frustration. Small steps often lead to more positive feelings of accomplishment.

Action Plan
Exercise/Physical Fitness

The specific goal or activity you plan to attain:

_____

_____

_____

Timeline for obtaining goal:

_____

_____

_____

Steps to help me accomplish my goal:

_____

_____

_____

Potential obstacles or barriers, and ways to overcome them:

_____

_____

_____

How important is this goal to you?

Not very important 1 2 3 4 5 6 7 8 9 10 Very important

How likely are you to follow through with these steps in the next week?

Not likely 1 2 3 4 5 6 7 8 9 10 Very likely

Carrying Out & Monitoring Action Plan

Goal: _____

_____

Day 1	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**
Day 2	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**
Day 3	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**
Day 4	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**
Day 5	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**
Day 6	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**
Day 7	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**

Nutrition and Eating Healthy

What do you hope to accomplish with this module?

1: _____

2: _____

3: _____

Healthy eating is important to have more energy and to improve health outcomes. Developing better eating habits, however, is difficult without a plan.

Select the dietary recommendations that are right for you, by first identifying which of the following chronic medical conditions you have.

Congestive Heart Failure recommendations

- ✓ Limit sodium intake to 2400 mg or 2.4 gm per day.
  Use spices and herbs to enhance food flavor rather than salt.
  Avoid canned and processed food as these foods have high amounts of added salt.
- ✓ Choose foods that contain high amounts of calcium (low fat dairy products), magnesium (nuts and green leafy vegetables), and potassium (bananas and oranges).
- ✓ You may need to restrict your fluid intake.
  Don't forget that foods such as soups, gravies, and sauces contain high amounts of fluid as well.
  Speak with your physician or registered dietitian to determine how much fluid you can consume in a day.
- ✓ Be cautious when using a salt substitute. Salt substitutes may negatively interact with any diuretic (i.e., 'water pills') you are on and be dangerous for your health. Consult with your physician or registered dietitian before trying these.

Chronic Obstructive Pulmonary Disease recommendations

- ✓ Select nutrient-dense foods with adequate calories and protein to allow you maintain a healthy body weight.
  If you are gaining weight, you are eating more than your body needs. If you are losing weight, you are not eating enough to meet your body's needs.
- ✓ Eat 6 or more small meals throughout the day.
  If your appetite is poor, consider drinking calorie rich supplements between or with meals.
- ✓ Eat a diet with less carbohydrates and more fat (preferably monounsaturated and polyunsaturated fat).
- ✓ Consume adequate amounts of fluid.

Diabetes Mellitus recommendations

- ✓ In general, refrain from eating refined carbohydrates and simple sugars (e.g., sweets, juices, soda, white bread, white rice, canned fruit). Substitute these foods with very low carbohydrate foods (e.g., meats, nuts), low carbohydrate foods (e.g., vegetables), and healthy carbohydrate foods (e.g., fresh and frozen fruit, beans, and whole grain breads, pastas, and rice).
- ✓ Choose foods that are low in saturated fat, trans-fatty acids, and cholesterol (e.g., low or non-fat dairy products, lean meats such as poultry and fish, baked or grilled foods, and fresh fruits and vegetables).
- ✓ If you are having trouble managing your blood sugar, or if you are not regularly monitoring your blood sugar, and are therefore unsure of how controlled it is, consult your physician, registered dietitian, or certified diabetes educator.

General recommendations

- ✓ If you have multiple chronic medical conditions and are on multiple medications, it is best to work with your physician and registered dietitian to plan the best nutrition plan possible.

- ✓ Remember that as a self-manager, it is up to you to identify and make the best changes for you. You don't need to change everything at once, or even today. If today does not seem right, identify a starting point sometime in the future and stick to it. Once you begin, start with what feels right, then keep track of what you are currently eating to identify how and where to make changes in your habits. Goal setting and action planning skills will help you to achieve your goals.

- ✓ Learn to read food labels (brochure available)

- ✓ If interested, we also have a detailed packet of information from the U.S. Department of Health and Human Services about proper nutrition in the brochure section of this workbook.

Action Plan
Diet and Nutrition

The specific goal or activity you plan to attain:

_____

_____

_____

Timeline for obtaining goal:

_____

_____

_____

Steps to help me accomplish my goal:

_____

_____

_____

Potential obstacles or barriers, and ways to overcome them:

_____

_____

_____

How important is this goal to you?

Not very important 1 2 3 4 5 6 7 8 9 10 Very important

How likely are you to follow through with these steps in the next week?

Not likely 1 2 3 4 5 6 7 8 9 10 Very likely

Carrying Out & Monitoring Action Plan

Goal: _____

_____

Day 1	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**
Day 2	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**
Day 3	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**
Day 4	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**
Day 5	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**
Day 6	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**
Day 7	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**

Talking to Your Doctor

What do you hope to accomplish with this module?

1: _____

2: _____

3: _____

Good communication allows for more efficient use of your time and your physician's. It also may lead to more satisfying office visits.

Keeping lines of communication open with your doctor is important. Your relationship with your doctor is a long-term partnership that requires work. It is important to remember that your doctor is usually on a very tight schedule but is often willing to answer your specific questions.

Good communication with your doctor is the foundation of managing your chronic health conditions including managing medication and coping with flare-ups.

When you are able to talk openly with your doctor, they are better able to address your concerns. A good relationship with your doctor can help you feel more comfortable about your physical health. When this relationship is strong and effective, both the patient and the doctor are more likely to report feeling positive about the future.

Good communication starts with preparation.

Your next appointment can be more valuable for both you and your doctor when you come prepared to discuss the details of your health status and current medication habits. Preparation is important, therefore, to get the most from your visit.

Remember to take P.A.R.T. - Prepare, Ask, Repeat, and Take action (see the next page for further explanation).

How to take P.A.R.T. in Your Health Care

1. **PREPARE** an agenda before your first visit.
   a. Make a list of your concerns and prioritize them from most to least important.
   b. Try to bring up your main concerns at the beginning of the session. Realize that it is unrealistic to expect a long list of items to be addressed in one appointment.
   c. Be concise, and give the physician feedback about your treatment.
   d. It is often helpful to take notes or bring another person along as a second listener/questioner.

2. **ASK** your doctor questions about:
   a. Diagnosis (What are your most pressing health issues?)
   b. Tests (What additional tests are needed and what information will they provide?)
   c. Treatments (What are the treatments and/or side effects of treatment? What are the alternatives?)
   d. Follow-up to treatment (What are the next steps? What can you do in between doctor visits – e.g., self-management or lifestyle changes?)

3. **REPEAT** back important points.
   a. Remember to briefly repeat back important points from the visit to your doctor. This helps to avoid misunderstandings and miscommunication. This step is particularly important if you are unsure of something. It is important to clearly understand what to do next at the end of the visit.
   b. Talk to your doctor about anything standing in the way of taking action. Remember, it is important that you and your doctor are on the same page regarding your treatment.

4. **TAKE ACTION**

   a. Remember that if you are unhappy with your health care system, take action. The more informed you are, the better partnership you can have with your doctor.

      i. Find out who is running the system and how decisions are made and speak-up.

      ii. Ask questions that can point you to the right person to call or write.

It is always acceptable to ask for second opinions even if you have been with a doctor for a long time and like him/her. Good communication skills make it easier for everyone, including the doctor.

Getting Ready for Your Doctor Visit

Date of Appointment: _____

Agenda - What do I want to get out of the meeting with my doctor?

1) _____

2) _____

3) _____

4) _____

* Tip: List agenda items in order with the most important item at the top. This way you are sure to get the top items answered during your appointment.

Questions I want to ask

1) _____

2) _____

3) _____

4) _____

Information from my doctor:

_____

_____

_____

_____

_____

* Tip: Repeat what you heard to make sure you understood correctly what the doctor was recommending.

Action Plan
Talking to My Doctor

The specific goal or activity you plan to attain:

_____

_____

_____

Timeline for obtaining goal:

_____

_____

_____

Steps to help me accomplish my goal:

_____

_____

_____

Potential obstacles or barriers, and ways to overcome them:

_____

_____

_____

How important is this goal to you?

Not very important 1 2 3 4 5 6 7 8 9 10 Very important

How likely are you to follow through with these steps in the next week?

Not likely 1 2 3 4 5 6 7 8 9 10 Very likely

Carrying Out & Monitoring Action Plan

Goal: _____

_____

Day 1	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**
Day 2	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**
Day 3	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**
Day 4	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**
Day 5	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**
Day 6	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**
Day 7	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**

Managing Your Medications

What do you hope to accomplish with this module?

1: _____

2: _____

3: _____

Managing your medications start with talking to individuals who know about medications (e.g. your doctor).

Your doctor can help you to make important decisions about how to take your medications, which medications you really need, and what life effects you might get.

What are the benefits of taking medication?

Medications are powerful tools and can often involve side effects. Managing your medications is vital to obtaining the best possible treatment for your condition while experiencing the fewest possible side effects. It is important to ask your doctor if the benefits from the medication outweigh the side effects.

What is the goal in managing medications?

The goal is to maximize benefits and minimize side effects. It is important to communicate with your doctor to ensure that you are taking the fewest medications, the lowest effective doses, and for the least amount of time.

Keep lists and records of the following and take them to your next appointment:

- All medications you are taking including *why* you are taking them. We suggest a master list of medications with a brief description for each prescription (e.g., Zoloft for mood).
- Allergies or strange reactions to medication.
- Major diseases and medical conditions you suffer from.
- Past medications used to treat your disease.
- All supplements you are taking including herbal products, vitamins, minerals, etc.

Are there alternatives?

Remember to ask if alternative medications with equal benefits and fewer side effects are available.

Become informed about what you are taking.

Knowing more about your medications will motivate you to take them regularly.

Medications can help or harm.

The key is to remember that medications can help or harm. Although medications may improve your health they can also cause unplanned and unwanted side effects. Knowing more about your medications and maintaining good communication with your doctor (and pharmacist) is important to your treatment and well being.

Ask the doctor questions.

Examples:

- What is the name of the medication?
- What is the medication supposed to do?
- How and when do I take the medication and for how long?
- What foods, drinks, other medications, or activities should I avoid while taking this medication?
- What are the most common side effects, and what should I do if they occur?
- Are any tests involved in monitoring the use of this medication?
- Is an alternative or generic medication available?
- Is there any written information about the medication?

Take medications as directed.

Once your doctor has prescribed a medication, it is important that you take it as indicated or it may not be helpful. Knowing more about your medications will motivate you to take them regularly.

It may be helpful to set routines or use tools (pill organizers, etc.) to help you to remember to take your medicines.

My Medication List

Medication Name	Reason for Medication	Dose / When to take	Notes (Side Effects, Special Instructions)
Example: Tylenol	*Example: Joint Pain*	*100 mg as needed*	*Upset stomach - take with food*

Action Plan
Managing Medications

The specific goal or activity you plan to attain:

_____

_____

_____

Timeline for obtaining goal:

_____

_____

_____

Steps to help me accomplish my goal:

_____

_____

_____

Potential obstacles or barriers, and ways to overcome them:

_____

_____

_____

How important is this goal to you?

Not very important 1 2 3 4 5 6 7 8 9 10 Very important

How likely are you to follow through with these steps in the next week?

Not likely 1 2 3 4 5 6 7 8 9 10 Very likely

Carrying Out & Monitoring Action Plan

Goal: _____

_____

Day 1	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**
Day 2	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**
Day 3	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**
Day 4	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**
Day 5	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**
Day 6	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**
Day 7	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**

Managing Flare-ups

What do you hope to accomplish with this module?

1: _____

2: _____

3: _____

This section will help you recognize, prevent, and handle possible flare-ups related to your medical condition.

You can take steps to prevent flare-ups from occurring in the first place.

Things that are in your control include:

- ✓ Remembering to take your medications
- ✓ Better managing your medications and their side effects
- ✓ Making healthy choices such as quitting smoking, eating healthy, and exercising
- ✓ Monitoring your health
- ✓ Getting a flu shot and/or a pneumonia shot
- ✓ Consulting with your doctor and getting regular check-ups
- ✓ Maintaining healthy surroundings (e.g., avoid smoking and smokers)

Be familiar with your body.

It is important to be familiar with your body and with your condition. This familiarity can be achieved through active participation in your health.

Monitoring is the key to handling flare-ups effectively.

If you are able to recognize ongoing versus new or severe symptoms, you will be in a better position to direct your own care.

Controlling a flare-up once it occurs

The first step is to see if you recognize the symptoms you are having.

- **If symptoms are familiar, begin strategies for coping.**
  If you are having symptoms that you have experienced in the past and know that they are part of the daily management of your illness, you can begin coping strategies.
- **If symptoms are unfamiliar or severe, SEEK MEDICAL CONSULTATION IMMEDIATELY.**
  If you are experiencing severe symptoms, symptoms that you do not recognize, or symptoms that have required medical attention it the past – SEEK MEDICAL CONSULTATION IMMEDIATELY.

When to contact your doctor?

It is vital that you contact your doctor if things appear to suddenly become markedly worse with your condition.

Relaxation skills to lower stress (for familiar symptoms only)

Reducing stress can help prevent and cope with an exacerbation. You can begin by implementing skills designed to lower your stress. Reducing stress and increasing relaxation can help by keeping you more in control of your emotional health so that you are in a better position to cope with your physical health.

These relaxation skills include:

- ✓ Deep breathing.
- ✓ Visualizing pleasant surroundings and outcomes.
- ✓ Positive self-statements.
- ✓ Changing your immediate surroundings if these are causing you physical or mental stress.

Action Plan
Managing Flare-ups

The specific goal or activity you plan to attain:

_____

_____

_____

Timeline for obtaining goal:

_____

_____

_____

Steps to help me accomplish my goal:

_____

_____

_____

Potential obstacles or barriers, and ways to overcome them:

_____

_____

_____

How important is this goal to you?

Not very important 1 2 3 4 5 6 7 8 9 10 Very important

How likely are you to follow through with these steps in the next week?

Not likely 1 2 3 4 5 6 7 8 9 10 Very likely

Carrying Out & Monitoring Action Plan

Goal: _____

_____

Day 1	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	Notes/Comments:
Day 2	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	Notes/Comments:
Day 3	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	Notes/Comments:
Day 4	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	Notes/Comments:
Day 5	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	Notes/Comments:
Day 6	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	Notes/Comments:
Day 7	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	Notes/Comments:

Elective Module B
Using Thoughts to Improve Wellness

Session Overview (Goals & Possible Outcomes):

Goals:

- ☐ I. Review previous session's assignment.
- ☐ II. Discuss the ways thoughts relate to mood and functioning.
- ☐ III. Identify negative thoughts.
- ☐ IV. Change thought patterns.
  - o A. Modify negative thoughts.
  - o B. Think of some coping self-statements.
- ☐ V. Set action plan.
- ☐ VI. Assignment: Monitor thoughts and increase use of coping self-statements.

PHYSICAL HEALTH OUTCOMES

- ☐ Feel better.
- ☐ Increase energy levels and decrease fatigue.
- ☐ Decrease pain.

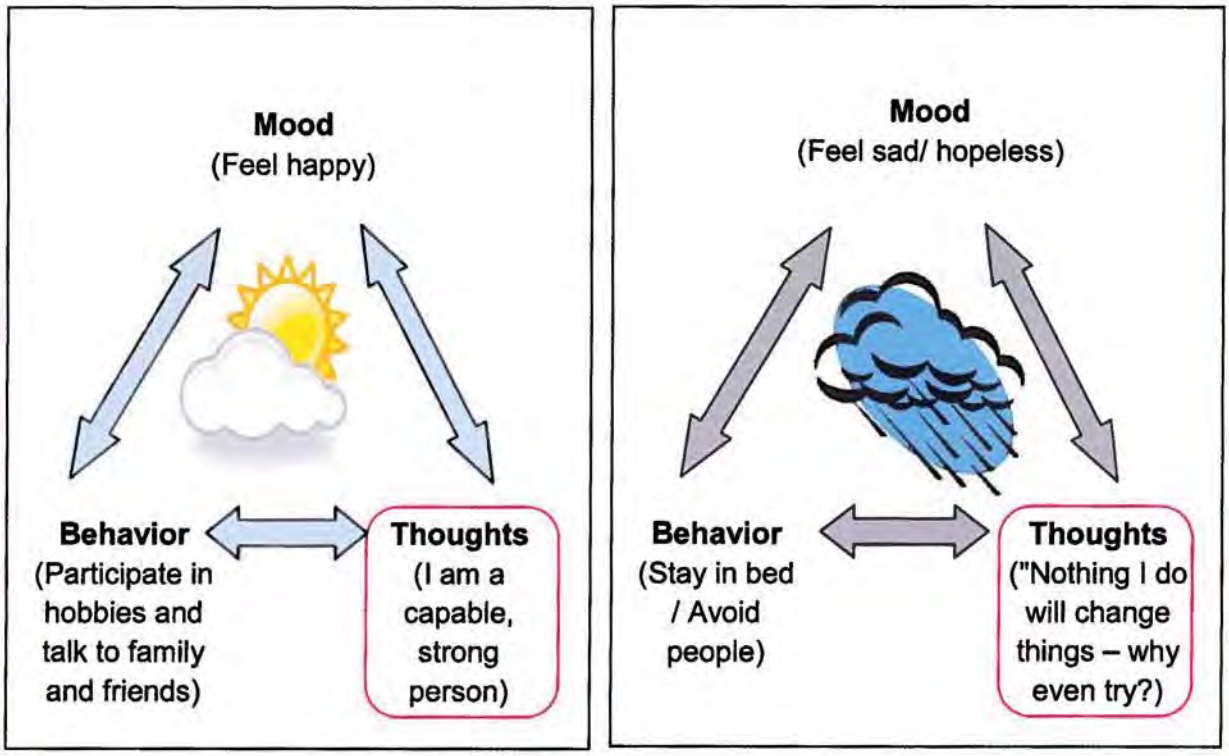
EMOTIONAL HEALTH OUTCOMES

- ☐ Improve mood.
- ☐ Increase feelings of control.
- ☐ Improve relationships.

Thoughts, Behavior, Mood – A Model to Guide our Work

It is important to remember that how you think about things (and the meaning you assign) relates to the way you feel and behave.

This diagram shows the cycle and influence of thoughts, behaviors and feelings.



*Types of Unhelpful Thinking Patterns**

Some of the most common types of unhelpful thinking patterns are described below to assist you in identifying when you have unhelpful thoughts.

1. All-or-nothing thinking: Viewing situations on one extreme or another instead of on a continuum.
   Ex. "If my child does bad things, it's because I am a bad parent."

2. Catastrophizing: Predicting only negative outcomes for the future.
   Ex. "If I don't qualify for disability, my life will be over."

3. "Should" and "must" statements: Having a concrete idea of how people should behave.
   Ex. "I should be able to walk down the street without feeling tired."

*Adapted, with permission, from Cully, J.A., & Teten, A.L. 2008. A Therapist's Guide to Brief Cognitive Behavioral Therapy. Department of Veterans Affairs South Central MIRECC, Houston.

Identifying Negative Thoughts

In order to improve mood and functioning it is important to be able to identify when you are having negative thoughts. This page lists 3 columns – situations, thoughts, and feelings. This workbook exercise will hopefully provide you with some insight into how certain situations and thoughts impact your mood. A couple of examples are given and space is provided for your own experiences.

	Situation	***Thought***	***Feeling***
Example #1	Doctor visit. "I just received some negative information about my medical condition (my condition got worse)."	"Now I have more bad news. Nothing good is happening to me lately."	**Down in the dumps, blue, depressed**.
Example #2	Out of breath when at the park with my granddaughter	"I can't do what I used to do."	"I feel **sad** and somewhat **worthless**."
Situation #1			
Situation #2			

Identify and Changing Negative Thoughts - Continued

The previous exercise is one way to help you identify negative thoughts that may require flexible thinking to improve your functioning. The next exercise asks you to use the same columns but adds a 4th column where you are encouraged to think about more flexible or adaptive thoughts. Additional blank copies of this worksheet are found on pages 83 and 84.

	Situation	***Thought***	***Feeling***	***Alternative Thought?***
Example #1	Doctor Visit. "I just received some negative information about my medical condition (my condition got worse)."	"Now I have more bad news. Nothing good is happening to me lately."	Down in the dumps, blue, depressed.	"Although this is not good news, I have faced similar challenges in the past. I am sure that I am up to the task. I need to think about what I need to do to get better."
Example #2	Out of breath when at the park with my granddaughter	"I can't do what I used to do."	"I feel sad and somewhat worthless."	"Because of my shortness of breath and because I am getting older, I have more physical limitations than I use to, and I do need my family's help from time to time, but I am able to offer them many valuable things and contribute to my grandkids' lives."
Situation #1				
Situation #2				

Coping Self-Statements

A coping statement is a statement that you make to yourself that helps to decrease stress, worry, and depression-related feelings.

It is a strategy for providing “instructions” to yourself about how to think positively in order to manage stress and depression and reduce how much negative thoughts get in the way.

This type of self-talk can help you perceive that some situations aren’t as bad as you expect them to be – and help you realize that you can manage your worry and anxiety better than you thought.

Coping self-statements are often general statements that can serve as "alternative thoughts" when your thinking is not as positive as it should be.

Remember, coping self-statements are not "pie in the sky" statements but rather should be statements that you actually believe to be true.

COPING SELF-STATEMENTS WORKSHEET

- "I can continue with my day."
- "I can handle it."
- "I can take control of my stress by getting up and doing things."
- "I am not going to let my disease define me."
- "I choose to think positively and to remember the things I can still do."

PROBLEM SITUATIONS OR CONCERNS	COPING STATEMENTS

Tips for Use of Self-Statements

- Don't be afraid to talk to yourself! Say coping statements aloud to yourself instead of just reading them.
- It can sometimes be helpful to record the statements on tape and listen to the tape when necessary.
- Write your favorite on a note card and carry it in your wallet or put it somewhere you will see it often.

Action Plan
Using Thoughts to Improve Wellness

The specific goal or activity you plan to attain:

_____

_____

_____

Timeline for obtaining goal:

_____

_____

_____

Steps to help me accomplish my goal:

_____

_____

_____

Potential obstacles or barriers, and ways to overcome them:

_____

_____

_____

How important is this goal to you?

Not very important 1 2 3 4 5 6 7 8 9 10 Very important

How likely are you to follow through with these steps in the next week?

Not likely 1 2 3 4 5 6 7 8 9 10 Very likely

Carrying Out & Monitoring Action Plan

Goal: _____

_____

Day 1	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**
Day 2	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**
Day 3	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**
Day 4	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**
Day 5	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**
Day 6	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**
Day 7	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**

Elective Module C
Increasing Pleasant Activities

Session Overview (Goals & Possible Outcomes):

Goals:

- ☐ I. Review previous session's assignment.
- ☐ II. Introduce "Increasing Pleasant Activities and Behavior Activation."
- ☐ III. Monitor behavior and mood.
- ☐ IV. Identify activities to improve quality of life.
- ☐ V. Use action plans.
- ☐ VI. Assignment: Apply and monitor skills.

PHYSICAL HEALTH OUTCOMES

- ☐ Further develop physical health skills and plans.
- ☐ Decrease fatigue.
- ☐ Decrease pain through activity and distraction.

EMOTIONAL HEALTH OUTCOMES

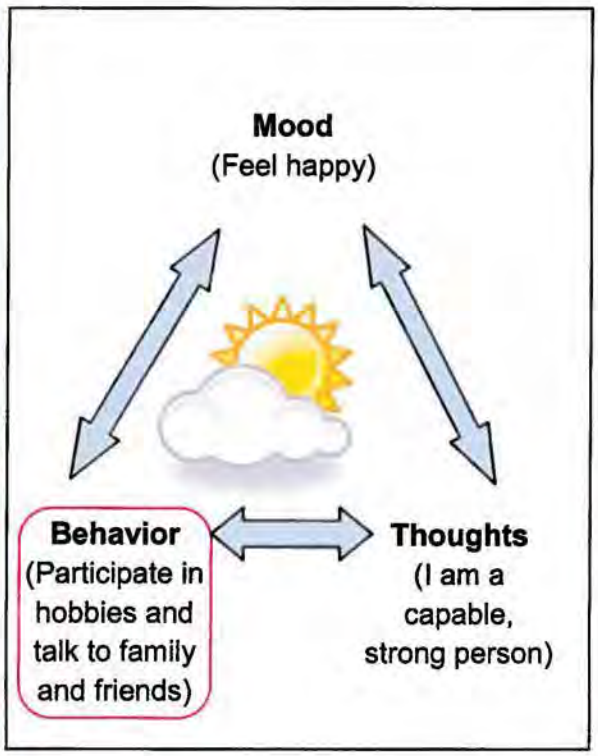
- ☐ Improve mood.
- ☐ Increase sense of accomplishment.
- ☐ Increase sense of control.
- ☐ Increase pleasurable activities.

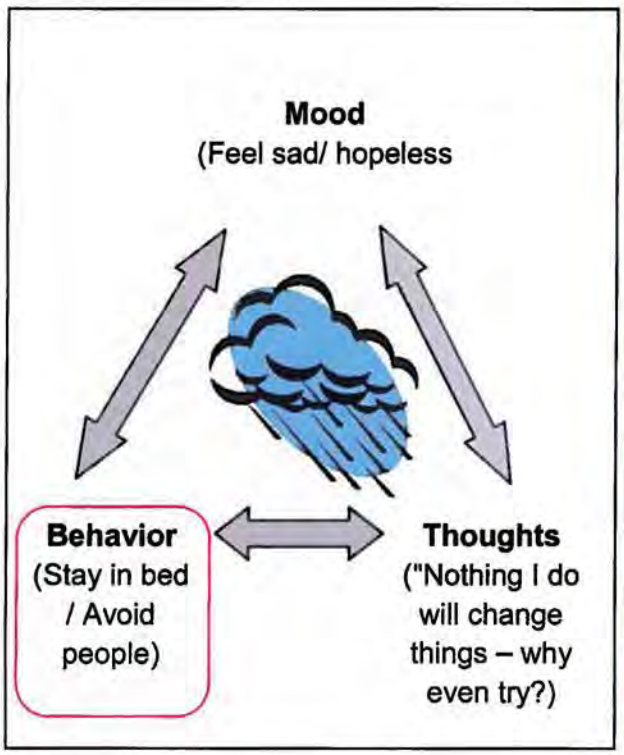
Thoughts, Behavior, Mood: A Model to Guide our Work

As depression or a negative mood sets in, you may not feel like being around others. You may be less likely to spend time with friends and family. If the cycle continues, you may stop pleasant activities. As you decrease pleasant activities you may find yourself more and more depressed or that your negative mood has become worse.

Activities like hobbies or talking to friends or family can lead to improved mood and more adaptive thinking. The behavior can change or reverse a negative mood state.

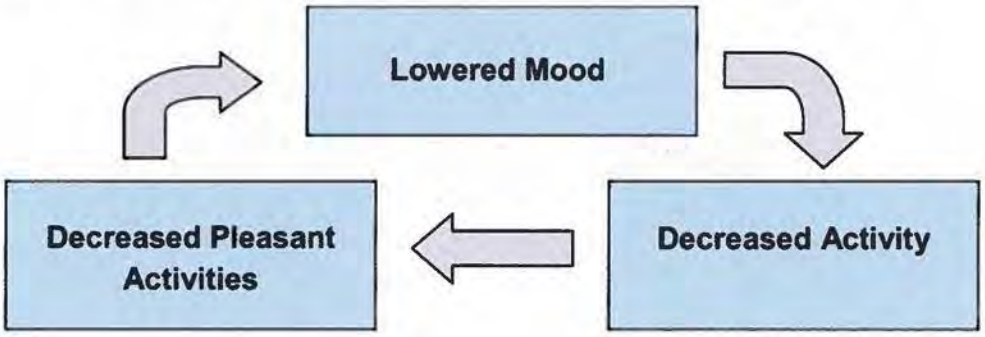
The diagram showing the relationship between thoughts, mood, and behavior applies here. In addition to changing your thoughts, you can increase your pleasant activities to improve your mood.



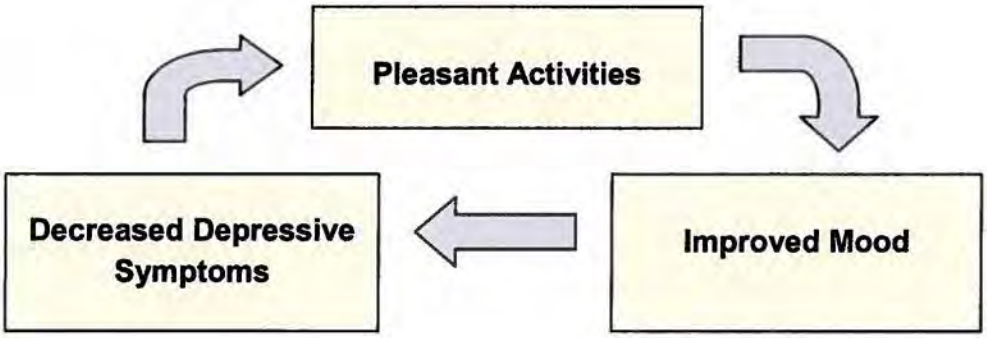


Behavior and Mood in Depression

This picture shows how mood and behavior are connected. Not engaging in activities that are pleasurable tends to lower mood even further, which, in turn, continues to decrease activity level.



If depressed persons increase their activities on a daily basis, mood is improved and symptoms of depression decrease.



Record of Daily Activities and Mood Ratings

In order to understand your current mood and activity level, complete the following form for a recent "typical day" (possibly yesterday). This will help you to understand what activities may fit into your day and help your mood.

In the table below:

1. List what you did during each time period of the day.
2. Rate your mood for each time period (estimate how good or bad you felt) using the five-point scale. If you felt good, use 4; if you felt very happy, use 5. If you felt low or blue, mark 2 (poor) or 1 (very bad).
3. Give any reason you felt that way.

Mood Rating:

☹	Very Bad 1	Bad 2	So-So 3	Good 4	Very Good 5	☺

Date:_____

Time of Day/Activities	Mood Score	Reasons for my Mood Score
Morning Activities		
1.		
2.		
Afternoon Activities		
3.		
4.		
Evening Activities		
5.		
6.		

Identifying Pleasant Activities

Each person has his or her own ideas about activities that are enjoyable or satisfying. Some activities involve social interaction with friends or family. Some activities are experiences that provide a sense of accomplishment.

1. Are there some things you *currently* do that you find pleasure in doing or that give you a feeling of satisfaction? If so, please identify and list these in the table below. Examples include reading, taking walks, listening to music, visiting with a friend, playing cards / games, doing a favor for someone, cleaning the house, or cooking a meal.

Current Pleasant Activities		

2. What other things or activities would you like to do that you are not doing now? What would be enjoyable to do right now? What would give you some satisfaction to do? This could be something you have enjoyed or valued in the past or something new you want to try. List these ideas in the table below.

Pleasant Activities Currently Not Doing	What Interferes With Doing This?

Activities Checklist

EXCURSIONS/COMMUNITY	√	SOCIAL ACTIVITIES AND INTERACTIONS WITH OTHERS	√
1. Going to the park or beach		1. Getting together with friends	
2. Going out to dinner		2. Visiting a neighbor	
3. Going to the library or a book store		3. Having family visit or visiting family	
4. Going to the movies		4. Eating out with friends or associates	
5. Going shopping		5. Going to a local community center	
6. Going fishing		6. Playing bingo, cards, dominos with others	
HEALTH AND WELLNESS	**√**	**PHYSICAL ACTIVITY**	**√**
1. Putting on makeup or perfume		1. Walking for exercise or pleasure	
2. Eating healthier		2. Light housekeeping, such as sweeping	
3. Relaxing, meditating, or doing yoga		3. Swimming or doing water exercise	
4. Improving one's health		4. Gardening or planting	
SPIRITUAL, RELIGIOUS, AND KIND ACTS	**√**	**RECREATIONAL AND OTHER LEISURE ACTIVITIES**	**√**
1. Going to a place of worship		1. Knitting, sewing, or needlework	
2. Attending a wedding, baptism, bar mitzvah, religious ceremony, or function		2. Writing in a journal or diary or keeping a scrapbook or photo album	
3. Reading the bible		3. Playing with or having a pet	
4. Attending a bible study group		4. Drawing, painting, or crafts	
5. Doing favors for others or volunteering		5. Singing or listening to music	
6. Volunteering for a special cause		6. Reading the newspaper or magazines	
		7. Watching TV or listening to the radio	
		8. Doing word puzzles or playing cards	

Source: Adapted, with permission, from Lejuez, C.W., Hopko, D. R., & Hopko, S. D. (2001). A brief behavioral activation treatment for depression. *Behavior Modification 25:*255–286.Worksheet – Identifying pleasant events and meaningful activities

Tips for managing barriers to doing activities

- ✓ Break down more difficult activities into smaller steps.
- ✓ Look for **alternative behaviors** that can be done to accomplish a goal that is prohibited by a chronic illness.
- ✓ Look for ways that others can help.

Summary

Changing behavior is hard work.

- **Adding** some pleasurable or satisfying **activities** back into your life will take some **time and effort at first** because when you **get used to not doing** these activities it is sometimes **hard to start them again**.
- It also is a **challenge to find new ways to do things that you used to enjoy** if physical problems prohibit you from doing them the way you have done them in the past.
- These **changes** will often cause you to **feel awkward or unsure** at first.

Practice is key.

- **Change takes practice before it feels normal.**
- **If you are uncomfortable** doing this, that's okay, just continue anyway. Know that in time **it will become easier as it becomes more of a part of your normal routine.**
- You may need to **remind yourself** that as you add **rewarding activities back into your life, mood and quality of life (and sometimes even physical symptoms) will get better.**
- Hopefully, knowing that new activities will feel more normal with practice and knowing how important activities are to your well being will give you the **motivation to work hard to start making them part of your routine.**

Action Plan
Increasing Pleasant Activities

The specific goal or activity you plan to attain:

_____

_____

_____

Timeline for obtaining goal:

_____

_____

_____

Steps to help me accomplish my goal:

_____

_____

_____

Potential obstacles or barriers, and ways to overcome them:

_____

_____

_____

How important is this goal to you?

Not very important 1 2 3 4 5 6 7 8 9 10 Very important

How likely are you to follow through with these steps in the next week?

Not likely 1 2 3 4 5 6 7 8 9 10 Very likely

Action Plan
Increasing Pleasant Activities

The specific goal or activity you plan to attain:

_____

_____

_____

Timeline for obtaining goal:

_____

_____

_____

Steps to help me accomplish my goal:

_____

_____

_____

Potential obstacles or barriers, and ways to overcome them:

_____

_____

_____

How important is this goal to you?

Not very important 1 2 3 4 5 6 7 8 9 10 Very important

How likely are you to follow through with these steps in the next week?

Not likely 1 2 3 4 5 6 7 8 9 10 Very likely

Carrying Out & Monitoring Action Plan

Goal: _____

_____

Day 1	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**
Day 2	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**
Day 3	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**
Day 4	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**
Day 5	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**
Day 6	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**
Day 7	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**

Elective Module D
Learning How to Relax

Session Overview (Goals & Possible Outcomes):

GOALS:

- ☐ I. Review home practice from prior session.
- ☐ II. Discuss worry, stress, and anxiety.
- ☐ III. Explain the purpose of relaxation exercises.
- ☐ IV. Learn how to relax, using diaphragmatic deep breathing and relaxed posture.
- ☐ V. Learn how to relax, using imagery.
- ☐ VI. Use techniques to help control emotional and physical sensations of tension.
- ☐ VII. Set action plan.
- ☐ VIII. Assignment- Apply and monitor skills.

PHYSICAL HEALTH OUTCOMES

- ☐ Obtain skills to reduce tension and help you to relax.
- ☐ Strengthen your stomach and chest muscles.
- ☐ Reduce pain associated with tension or self-focus.

EMOTIONAL HEALTH OUTCOMES

- ☐ Relieve stress.
- ☐ Learn how to visualize positive outcomes.
- ☐ Improve your mood.
- ☐ Feel better about yourself.
- ☐ Learn how to relax during times of stress.

Learning How to Relax

Signs of worry and anxiety

Physical signs of anxiety such as muscle tension, sweating and trembling can be reduced by relaxation exercises. Relaxation exercises not only target the physical signs of anxiety but can ease racing thoughts and decrease feelings of fear and anxiety.

Purpose of relaxation exercises

The purpose of relaxation exercises is to teach your body to be in a physically relaxed state that is incompatible with feelings of worry, anxiety, or fear. For example, can your heart beat fast and slow at the same time? Can you be anxious and relaxed at the same time? No, relaxation and anxiety are incompatible states that cannot occur together.

Deep breathing technique

One way to make your entire body more relaxed is deep breathing. Often when you're anxious, your breathing gets rapid and shallow. Rapid and shallow breaths can lead you to hyperventilate or feel dizzy and lightheaded. Experiencing these physical signs is stressful and causes you to feel anxious, which in turn can increase the physical signs of stress

By attending to your breathing and changing the rate and way you breathe, you can actually make your entire body more relaxed and function more effectively.

This is beneficial for both your body and your mind. It can also strengthen the muscles in your chest and stomach, which can make it easier to breathe on a daily basis.

Steps to deep breathing

- ✓ **First**, put one hand on your abdomen, with your little finger about 1 inch above your navel, and place one hand on your chest.
- ✓ **Next,** begin to notice your breathing – which hand is doing more of the moving? The goal is to move the stomach and not the upper chest area.
- ✓ **Then,** breathe in slow and deep so your stomach goes in and out when you breathe while your other hand on your chest stays as still as possible.
- ✓ **Finally,** continue to take slow, even, deep breaths.

2 key features of effective deep breathing

Take slow, even, deep breaths. Breathe in to the count of 5 and out to the count of 5 (it is okay to start breathing to the count of 2 or 3 if that is more comfortable). Do not pause at the top of each breath.

Breathe through your diaphragm, not your chest. Place your hand on your stomach with your little finger about 1 inch from your navel to make sure that your stomach goes in and out when you breathe with your other hand on your chest to make sure it stays as still as possible.

Health benefits of regular practice

Practicing deep breathing exercises can help relieve and even prevent worsening of your breathing difficulties.
Practice deep breathing if you are having a flare-up of your symptoms (only if the symptoms are known to you). Seek medical advice first if you symptoms are unfamiliar or severe.

Relaxed posture

Another strategy for relaxation is to adopt a relaxed posture by lowering one's shoulders and letting them slouch forward slightly rather than remaining rigidly straight.

- ✓ Lean back into the chair and let your shoulders slouch slightly.
- ✓ Round shoulders and relax your chest and abdomen muscles.

INSTRUCTIONS FOR PRACTICE EXERCISES

Changing your experience of anxiety is like learning a new skill - it gets easier with practice!

- ✓ **Practice Times:** Choose a regular practice time for 10-15 minutes once a day for practice.
- ✓ **Continue Awareness Training:** Continue to identify anxiety situations and write down feelings, physical signs, thoughts, and behaviors associated with those situations.
- ✓ **Relaxation Training:** Practice deep breathing to help you relax at a scheduled time. Then try to use deep breathing in anxiety producing situations throughout the week. Practice relaxation posture while breathing or at other times. Make sure to record on your form whether your new skills helped.

Imagery

Why is imagery used?

It is a relaxation technique that you can use to ease stress and promote an overall sense of wellbeing.

- We all have daydreamed about pleasant things that have distracted us and made us feel better. Of course, thinking of negative images can have the opposite effect and actually make us feel worse. Imagery, therefore, can be a powerful tool when used correctly.

Imagery can also improve confidence / self-esteem.

- For example, think about a time when you successfully managed a difficult situation or a time when you felt very much in control of your life.

How does it work?

Imagery uses your imagination and pleasant experiences to promote wellness and health and to help with stress, tension and anxiety. Research has shown that the mind can actually affect how the body functions. It seems the body may not know the difference between an actual event and a thought.

Develop a positive image or scene utilizing all of your senses.

The first step in developing a positive image is to create a scene that you find appealing and peaceful. This place can be somewhere you have actually been before or even one you have only imagined visiting. Make sure to include all of your senses when constructing this special place. When imagining a glass of lemonade, for example, imagine holding a glass that feels icy and cold, visualize the color of the lemonade, think of the fresh citrus smell, and finally think of how the lemonade tastes. You probably are salivating thinking of this juice, aren't you? This is an example of an imagery which uses all of your senses and of your body reacting to that imagery or thought. Try creating a similar scene that you can actually place yourself in. Practice relaxing as you use all of your senses and imagine being in this special place.

What to expect?

You will find that, after practice, imagery will become a powerful tool to help you feel better.

Practice makes perfect. Make sure you find several times a day to apply this technique. Some people find using imagery before going to bed and first thing in the morning to be helpful. When ready to practice, choose a comfortable position, close your eyes, and give yourself permission to relax. Remember to use your own scene that incorporates all of your senses when using imagery and make it as elaborate and realistic as you can.

Example Scripts

The following is a generic example:

Find a comfortable position, either sitting comfortably in a chair or laying down. Close your eyes and take several long deep breaths.

Once your whole body feels relaxed, travel to your favorite place... it can be any time period or any place. This place is calm and safe... there are no worries here... Look around this place. What do you see? Do you hear the sounds around you? What are some of the sounds you hear in this place you are imagining? How does this special place smell? Walk around a little and take in all of the wonderful sights... Feel the air around you and relax.... The air is fresh and it's easy to breathe here. Pay attention to how your body feels..... Say to yourself "I am totally relaxed... without worries... all of the tension has drained away from my body." Take a moment to fully experience your favorite place... Notice the sounds, sights, smells, and how it feels to be in this very special place. Remember that you can visit this place as often as you want and that it is wonderful. Say to yourself, "I am relaxed here... this place is special and makes me feel at peace."

When you are done with your visit to this special place, open your eyes and stay in your comfortable position. Continue to breathe smoothly, in a relaxed and rhythmic fashion. Take as long as you want to enjoy and relax. You feel at ease knowing your special place is always available to you, and you find that you feel relaxed even after you leave.

Beach Example

Imagine yourself walking down a sandy beach. The sand is white and warm between your toes. You are looking out over the calm, blue water. The waves are gently lapping at the shore. You feel the pleasant warmth of the sun on your skin... it's a perfectly comfortable temperature outside. Breathe in deeply. There is a gentle breeze and the sun is shining. Big, cotton-like clouds drift by as you hear sea gulls in the distance. You taste traces of salt on your lips. You are completely relaxed... there are no worries on this beach. There is nothing to distract you from feeling tranquil. Worries drift away. Notice the sounds, the sights, smells, and how it feels to be in this very special place.

Feel the sand under your feet... you decide to stretch out on the warm, fine white sand... breathe deeply... feel the warm air. Your body is completely relaxed and you have an overall feeling of warmth and comfort. You look up at the clouds passing by slowly across the beautiful blue sky. You are feeling rejuvenated and completely at peace. Remember that you can visit this place as often as you want and that it is wonderful. Say to yourself, "I am relaxed here... this place is special and makes me feel peaceful and content."

When you are done with your visit, open your eyes and stay in your comfortable position. Continue to breathe smoothly, in a relaxed and rhythmic fashion, and take as long as you want to enjoy and relax. You feel at ease knowing your special place is always available to you, and you find that you feel relaxed even after you leave.

Meadows Example

Imagine yourself walking through a lovely meadow. The breeze feels pleasant against your skin. You are looking out over the calm, beautiful green grass. The blades of grass are gently swaying in the breeze. You feel the pleasant warmth of the sun on your skin... it's a perfectly comfortable temperature outside. Breathe in deeply. There is a gentle breeze and the sun is shining. Big, cotton-like clouds drift by as you hear birds in the distance. You hear the wind blow gently through the trees. You taste the sweet summer air on your lips. You are completely relaxed... there are no worries in this meadow. There is nothing to distract you from feeling tranquil. Worries drift away. Notice the sounds, sights, smells, and how it feels to be in this very special place.

Feel the cool grass under your feet... you decide to stretch out on the soft, cushiony grass... breathe deeply... feel the air enter your lungs slowly and deeply. Your body is completely relaxed and you have an overall feeling of warmth and comfort. You look up at the clouds passing by slowly across the beautiful blue sky. You are feeling rejuvenated and completely at peace. Remember that you can visit this place as often as you want and that it is wonderful. Say to yourself, "I am relaxed here... this place is special and makes me feel peaceful and content."

When you are done with your visit, open your eyes and stay in your comfortable position. Continue to breathe smoothly, in a relaxed and rhythmic fashion, take as long as you want to enjoy and relax. You feel at ease knowing your special place is always available to you, and you find that you feel relaxed even after you leave.

Other Guided Imagery Suggestions

- Think about a garden where you watch big beautiful clouds in a blue sky, while you inhale the scent of flowers and feel a gentle breeze on your skin as the sunshine warms you.
- Consider a mountain scene where you feel calm and relaxed as you look out over the valley. You dip your feet into a cool mountain stream and let your foot rest on a big, slippery stone as the sunshine warms you and you listen to the wind blowing through the trees.
- For other ideas, consider past experiences in your life, or use the help of a family member to think of a calm and relaxing time or place.

Action Plan
Relaxation

The specific goal or activity you plan to attain:

_____

_____

_____

Timeline for obtaining goal:

_____

_____

_____

Steps to help me accomplish my goal:

_____

_____

_____

Potential obstacles or barriers, and ways to overcome them:

_____

_____

_____

How important is this goal to you?

Not very important 1 2 3 4 5 6 7 8 9 10 Very important

How likely are you to follow through with these steps in the next week?

Not likely 1 2 3 4 5 6 7 8 9 10 Very likely

Carrying Out & Monitoring Action Plan

Goal: _____

_____

Day 1	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**
Day 2	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**
Day 3	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**
Day 4	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**
Day 5	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**
Day 6	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**
Day 7	☐ Exceeded goal ☐ Met goal ☐ Partially met goal ☐ Did not meet goal	**Notes/Comments:**

Session #6
Review

Session Overview:

Goals & Skills:

- ☐ I. Review previous session's home practice assignment.
- ☐ II. Review progress in treatment:
  - Preferred Skills
  - Use of Skills
  - Impact of Skills on Quality of Life / Functioning / Well-being
- ☐ III. Discuss how to maintain changes / incorporate skills into everyday life.
  - Addressing Barriers
  - Accessing Motivators for Change
- ☐ IV. Clarify when it would be good to seek additional help.
- ☐ V. Wrap-up / Close.

Progress Review

Please rate your overall success in reaching your stated goals (check one box only):

- ☐ Complete Success
- ☐ Moderately Successful
- ☐ Neutral
- ☐ Moderately Unsuccessful
- ☐ Completely Unsuccessful

What areas of your life have changed? (check all boxes that apply)

- ☐ Your overall quality of life
- ☐ Your physical health
- ☐ Your emotional or mental health (e.g. mood)
- ☐ Your ability to cope with your chronic illness
- ☐ Your feelings of confidence

What factors contributed to any changes you've experienced?

_____

_____

_____

From the intervention, what skill(s) did you most prefer?

_____

_____

From the intervention, what skill(s) did you least prefer?

_____

_____

Maintaining Changes

Planning for Difficulties / Addressing Barriers

In order to maximally benefit from the tools learned through our meetings, let's try to determine when the tools are most helpful for you to use.

- Are there particular situations in which you think the tools will be most helpful?
- Are there particular feelings you have in which the tools will be most helpful?
- Are there particular physical symptoms that indicate you should use the tools?
- Are there certain behaviors you may do that indicate the tools would be helpful?
- Are there particular things others may say to you that indicate you should use the tools?

Notes:

_____

_____

_____

_____

_____

ACCESSing Motivators that increase change

Often, it is important to include people, images, or thoughts that can increase your motivation for maintaining the positive changes you are working to keep.

- Telling a spouse or friend about your commitment and updating them about your progress often serves as a way for you to be accountable to more than just yourself.
- Thinking about the positive outcomes you hope to obtain is also motivating. For example, thinking about a healthy heart or healthy lungs can increase your desire to avoid smoking or eat healthy.
- Positive thinking can also increase your drive to retain positive change. Positive thoughts such as "I can do this" or "although at first it is difficult to change, I know that in the long-run I will be much better off"
- One final strategy might be to enlist small challenges through short-term goals that are reachable. For example, I want to exercise 3 times next week – this will motivate you to accomplish the specific goal and can also provide you with a good feeling or reinforcement when you reach your goal.

Notes:

_____

_____

_____

_____

_____

When to Seek Additional Help

Sometimes, despite our attempts to use the skills learned through this session, more outside help is needed to help you feel better.

What are some signs you should seek outside help in order to feel better?

_____

_____

_____

_____

Who to contact if you should need additional help

Physical Symptoms / If your medical condition gets worse:

1) _____

2) _____

3) _____

Emotional Symptoms / If you feel depressed or anxious and need help:

1) _____

2) _____

3) _____

Additional Practice Worksheets (see page 51)

Identifying Negative Thoughts

	Situation	***Thought***	***Feeling***	***Alternative Thought?***
1				
2				
3				
4				
5				

Identifying Negative Thoughts

	Situation	*Thought*	*Feeling*	*Alternative Thought?*
1				
2				
3				
4				
5				

Notes:

Notes:

Notes:

Notes: