

FIGURE 4.1. Deep Breathing

What Is Deep Breathing?

Deep breathing involves using your diaphragm muscle to help bring about a state of physiological relaxation. The diaphragm is a large muscle that rests across the bottom of your rib cage. When you inhale, the diaphragm muscle drops, opening up space so air can come in. When watching someone do this, it looks like their stomach is filling with air. This type of breathing helps activate the part of your nervous system that controls relaxation. It can lead to decreased heart rate, blood pressure, decreased muscle tension, and overall feelings of relaxation.

Why Be Concerned With How I'm Breathing?

- To increase your awareness of the role that breathing plays in stress
- To lower your level of stress
- To give you a method of taking calm, relaxing breaths in order to break the cycle of stress

What Is the Best Way to Use Deep Breathing Exercises?

- Use deep breathing frequently.
- Take deep breaths at the first signs of stress, anxiety, physical tension, or symptoms.
- Schedule time for relaxation. My scheduled time for deep breathing will be: _____

FIGURE 4.2. Cue-Controlled Relaxation

Cue-controlled relaxation is a quick and easy relaxation technique.

- There are two different types of cues:
 - **External cues:** Things you hear, see, or do. Examples might include looking at your watch, ending a phone call, going to the bathroom, checking your email, hearing a tone or alarm from your cell phone or fitness device, or seeing something in your home or office.
 - **Internal cues:** Thoughts, emotions, or physical sensations. Examples might include feeling stressed, frustrated, anxious, or panicky or having thoughts about negative events.
- It is important that once you set your cue, you do the relaxed breathing every time the cue occurs so that being relaxed becomes more of an automatic habit.
- When the cue occurs, relax by
 - Taking a slow deep breath
 - Exhaling comfortably and easily
 - Saying a word to yourself as you exhale (e.g., “relax” or “calm”)
- External cue: _____
- Internal cue: _____

FIGURE 4.3. How to Question Stressful, Angry, Anxious, and Depressed Thinking

1. Am I upsetting myself unnecessarily? How can I see this another way?
2. Is my thinking working for or against me? How could I view this in a less upsetting way?
3. What am I demanding must happen? What do I want or prefer, rather than need?
4. Am I making something too terrible? Is that awful? What would be so terrible about that?
5. Am I labeling a person? What is the action that I don't like?
6. What's untrue about my thoughts? How can I stick to the facts?
7. Am I using extreme language? What words might be more accurate?
8. Am I fortune telling or mind reading in a way that gets me upset or unhappy? What are the odds or chance that it will really turn out the way I'm thinking or imagining?
9. What are my options in this situation? How would I like to respond?
10. What are more moderate, helpful, or realistic statements to replace the upsetting ones?
11. Have I had any experiences that show that this thought might not be completely true?
12. If my best friend or someone I loved had this thought, what would I tell them?
13. If someone I cared about knew I was thinking this thought, what would they say to me?
14. Are there strengths in me or positives in the situation that I am ignoring?
15. When I am not feeling this way, do I think about this situation any differently? How?
16. Have I been in this type of situation before? What happened? What have I learned from prior experiences that could help me now?
17. Five years from now, if I look back on this situation, will I look at it any differently? Will I focus on any different part of my experience?
18. Am I blaming myself for something over which I do not have complete control?

FIGURE 4.4. Thinking Mistakes That Increase Stress, Anger, Depression, Anxiety, and Worry

All-or-Nothing Thinking: You see things as either all one thing or all another, with no room for anything in between. *"I'm 100% healthy or I must have a fatal disease."*

Jumping to Conclusions: You make a negative interpretation even though there are no definite facts that convincingly support your conclusion. *"My husband is late because he is in a car accident injured on the side of the road."*

Fortune Telling: You anticipate things will turn out badly and are convinced the prediction is a fact. *"Not getting this job will cause us to lose the house."*

Should Statements: "Musts" and "oughts" are also offenders. Emotional consequences can include anxiety and anger. *"I should be able to handle this."*

Overgeneralization: Assuming one event is actually a pattern. *"My hand is a little shaky today; I must have Parkinson's disease."*

Disqualifying the Positive: Filtering out or rejecting positive experiences to maintain negative beliefs. Upon hearing that your spouse has checked all the doors and windows and they are all locked, you think, *"But someone could cut out a piece of glass and open the window."*

Catastrophizing: Predicting the worst possible outcome imaginable. "Terrible," "awful," "horrible," and "worst ever" might be key words. *"If I can't get my heart to stop pounding, I'm going to die."*

Superstitious Thinking: The thought that something you do prevents something awful from happening. *"Telling my spouse to be careful before going to work will prevent her from getting in a wreck. I do it every morning and she hasn't gotten in a wreck yet."*

Emotional Reasoning: The belief that because you feel a certain way means that the assumptions and associations you have with that feeling are true. *"The fear, doom, and constant anxiety must mean something is seriously wrong with me."*

FIGURE 4.5. Disputing/Challenging Thoughts and Beliefs

Activating event (What happened?)	Consequences (How did I get myself to respond?)	Thoughts/beliefs (What am I telling myself? What thinking mistake am I making?)	Evidence for thoughts/beliefs/ self-talk	Evidence against thoughts/beliefs/ self-talk	What different thoughts can I have based on the evidence for and against my original way of thinking?	How did or might my responses change with my new way of thinking?
	Physically (What are my body responses?)					Physically (What are my new body responses?)
	Emotionally (How do I feel?)					Emotionally (How do I feel?)
	Behaviorally (What did I do?)					Behaviorally (What did I do?)

FIGURE 4.6. Strategies to Improve Motivation to Change

Readiness-to-Change Ruler

At this moment what number best reflects how ready you are to _____?

0	1	2	3	4	5	6	7	8	9	10
---	---	---	---	---	---	---	---	---	---	----

Not Ready

Unsure

Ready

Importance and Confidence in Change

How important is it that you _____?

0	1	2	3	4	5	6	7	8	9	10
---	---	---	---	---	---	---	---	---	---	----

Not at all

Most important

How confident are you that you can _____?

0	1	2	3	4	5	6	7	8	9	10
---	---	---	---	---	---	---	---	---	---	----

Not at all

Most confident

Decisional Balance

Benefits of Changing	Costs of Changing

FIGURE 4.7. Problem-Solving Worksheet

1. Write out the problem: _____
2. Brainstorm all possible solutions. Write down anything you can think of. The goal is to get your mind flowing with ideas: _____

3. Evaluate your ideas:
 - a) Cross out any that are clearly unrealistic, outside your control, or impossible.
 - b) Of those that remain, circle the top three. Write the top three below in any order:

 - c) For each one, list all the possible pros and cons:
Pros: _____ Pros: _____ Pros: _____

Cons: _____ Cons: _____ Cons: _____

4. Based on your pros and cons, select one that you feel has the best chances of working.
5. Implement the chosen solution. Define how you will know if the solution is working: _____

6. Assess the outcome on the following scale:

_____	_____	_____	_____	_____
No	Little	Some	A lot of	Total
Improvement	Improvement	Improvement	Improvement	Improvement

7. If the outcome is positive, fine-tune the solution as needed and continue to monitor; if the outcome is not positive, return to Step 4.

FIGURE 4.9. Stimulus Control Plan

<i>Trigger</i>	<i>Level of control</i>			<i>Plan</i>
	<i>Lots</i>	<i>Some</i>	<i>None</i>	

Stimulus Control Plan (Sample)

<i>Trigger</i>	<i>Level of control</i>			<i>Plan</i>
	<i>Lots</i>	<i>Some</i>	<i>None</i>	
Watching TV	X			Not willing to give up watching TV. Make a commitment to only eat while sitting at the kitchen table.
Anger		X		Avoid the kitchen when feeling angry. Take an anger management class or read a book on the topic.
Thinking “I’m hungry”		X		Rethink with realistic thinking: “I’m not hungry. I just ate dinner an hour ago. I have an urge to eat but it is not physiological hunger.”
Family not home			X	Can’t avoid being home alone; however, access to snack foods can be controlled. Avoid going in the kitchen when family is not home. Don’t buy unhealthy food.
Sitting at my desk at work			X	Avoid access to snack foods at work. Don’t carry small change so vending machines and snack cupboards are not convenient.

FIGURE 4.10. Assertive Communication

Assertiveness Is Simple but HARD

Nonassertive (Passive)	Assertive (Tactful)	Aggressive (Rude)
⊗ H onest	✓ H onest	✓ H onest
✓ A ppropriate	✓ A ppropriate	⊗ A ppropriate
✓ R espectful	✓ R espectful	⊗ R espectful
⊗ D irect	✓ D irect	✓ D irect

Assertiveness involves respecting your rights and the rights of others.

Important Facts About Assertiveness

- “I statements” such as “When _____ happens, I feel _____” are more effective than blaming or accusing statement such as “You make me so angry when you _____.”
- Your voice tone, eye contact, and body posture are important parts of assertiveness.
- Use a steady calm voice, stand or sit up straight, look the other person in the eyes.
- Feelings are usually only one word (e.g., angry, anxious, happy, sad, hurt, frustrated, joyful).
- Remember, assertiveness doesn’t guarantee that you will get what you want or that the other person will understand your concerns or be happy with what you said. It does improve the chances that the other person will understand what you want or how you feel and thus improve your chances of communicating effectively.

Four Essential Steps to Assertive Communication

1. Tell the other person how you feel.
2. Tell them the specific situations in which you feel that way (again, don’t blame or accuse the person; just describe the situation).
3. Tell them how their behavior affects you and your relationship with them.
4. Tell them what you would prefer them to do instead.

XYZ* Formula for Effective Communication

Goal: To express the way you feel (internal world) in response to others’ behavior (external world) in specific situations.

You are the only person who has access to your feelings. Others have no access to your internal world. The only way they will know what you are feeling is if you tell them.

Similarly, you only have access to other people’s external world. It is very easy to make a mistake when trying to guess what others are feeling or intending.

Examples of the XYZ* model:

I feel X	when Y occurs	because of Z,	and I would like *
I feel angry	when socks and underwear are on the bedroom floor	because we just talked about keeping your room neater,	and I would like you to put them in the hamper.
I felt annoyed	when I saw an empty gas tank this morning	because I had to stop on my way to work and I was late,	and I would like you to leave the car with at least a quarter tank of gas.
I feel scared	when I don’t hear from you if you are staying late at work	because I don’t know if something happened to you,	and I would like you to call as soon as you know you will be late.
I feel loved	when you kiss me when you get home	because it says to me you are glad to see me,	and I would like you to do that every day.

FIGURE 4.11. Recommended Mobile Applications to Support Common Cognitive Behavior Interventions

Intervention	Mobile application
Relaxation skills	Breathe2Relax
Mindfulness exercises	Mindfulness Coach
Cognitive disputation	CPT Legacy, Self CBT
Acceptance and commitment techniques	ACT Coach
Self-monitoring	Mood Tracker
Assertive communication	Self CBT

Note. CPT = cognitive processing therapy; CBT = cognitive behavior therapy; ACT = acceptance and commitment therapy.

Script Introducing Relaxation Training—Chapter 4

It sounds like your difficulties relaxing are similar to someone with no musical training trying to play the piano. They may sit down at a piano and try to pound out tunes although it may never sound very good. And why would it? They have never had lessons or practiced proper techniques to develop good skills. They may even feel frustrated that others have more natural musical talent and are self-taught. It's true that some people are natural musicians but that doesn't mean the rest of us can't try to learn to play the old-fashioned way: with training and practice. I have worked with a lot of people who, like you, don't feel very skilled at relaxation. My experience is that most people can learn to improve their ability to relax if they work at it and consistently practice the right skills. Do you think you may be expecting relaxation to come more naturally than it does and, therefore, feel you can't do it? Are you interested in developing a plan to practice and improve your relaxation skills?

Script for Guided Deep (Diaphragmatic) Breathing—Chapter 4

Let me explain to you what deep breathing is and how it might be useful. Deep breathing is using the muscles below your lungs to take in more oxygen than you normally would. This helps turn on relaxation in your nervous system and can lead to lower heart rate, blood pressure, and increased muscle relaxation. Let me show you what deep breathing looks like. [Demonstrate by putting one hand on your chest and one hand on your stomach and take two deep breaths by pushing your stomach out as you breathe in and letting it fall as you breathe out.] Did you notice how my bottom hand went up and down and my top hand was still? This is what it might look like if you are doing it correctly. For some people both hands will go up at the same time and this can work as well. You can breathe through your mouth or nose, whatever is most comfortable for you. Many people find this difficult when they first try but it usually starts to feel more natural with practice. As you start to relax, you might notice a sense of heaviness, warmth, or floating. As we're going through this exercise, you may notice sounds inside and outside of the room you haven't noticed before or thoughts popping into your mind that distract you from the relaxation. This is normal. As a way to help you focus, you can repeat the word "calm" or "relax" to yourself silently each time you breathe out. You might also notice your heart beating or muscles twitching, which is nothing to be concerned about. Some people get dizzy when they first try this because their body gets used to running on a higher level of carbon dioxide, and suddenly providing more oxygen can temporarily disrupt the body and cause dizziness. Don't be alarmed if that happens; usually that dizziness goes away. If you're getting dizzy and feel like you are going to fall out of your chair, I want you to stop and practice at another time. When that happens, it is best to start with only a few deep breaths and work your way up to more as your body adapts. Do you have questions about what deep breathing is or how it might help?

I'd like to walk you through about a 3-minute deep-breathing exercise. I'm going to look away from you as we do this so you don't feel like you're under a big magnifying glass. This usually makes it a little easier for people to do.

So go ahead and place one hand on your chest and one hand on your stomach and I will just walk you through this exercise. If you would like, you can lightly close your eyes as we go through the deep breathing. First, just notice your breathing. Don't try to change it just yet, but notice the sound and feel of the air as you breathe in and the sound and the feel of the air as you breathe out. You might notice that the air is dry and cool as you inhale and a little warmer as you exhale. Remember to repeat silently to yourself the word you chose ("calm" or "relax") each time you breathe out as a way to help you focus. Continue to breathe slowly and easily at your own pace. You can start to shift the focus of your breathing so that, as you breathe in, it feels as if the air is going past your chest and filling your stomach. As your stomach moves out, hold it there for just a moment then let all the air leave your body at once. As you let the air out, you can allow yourself to feel more comfortable and more at ease. It might be helpful to imagine, as the air is leaving your body that you're sinking deeper into the chair, getting more comfortable, and feeling more at ease. As you continue to breathe at your own pace, you can take three more comfortable, easy breaths, and as you exhale on the last breath, you can open your eyes and get adjusted to the light in the room.

Script Introducing Cue-Controlled Relaxation—Chapter 4

We can take the deep breathing you just learned and start to make it a habit so you are relaxing throughout the day. We can do that with something called cue-controlled relaxation. A cue is a kind of reminder. Cue-controlled relaxation involves using that reminder to help you remember to take two to three slow deep breaths.

There are two kinds of cues, external and internal. External cues are things you hear, see, or do. Examples of external cues might be looking at your watch, ending a phone call, going to the bathroom, checking e-mail, hearing a tone or alarm on your cell phone or fitness device, or seeing something in your home or office. A good external cue is something that occurs at least once or twice an hour. Internal cues are thoughts, emotions, or physical sensations. These don't necessarily happen once or twice an hour. In fact, they may not happen with regularity at all; however, they should occur in situations in which you would benefit from relaxation. Examples might include feeling angry, feeling your heart beating rapidly, or having thoughts about a specific problem. You might pick the first thing you're aware of when you are more distressed than you would like to be.

The idea is to take something that is already happening in your daily life that occurs frequently and use it as reminder to take two to three slow deep breaths. By doing this, you help turn down the "volume" on any stress response that might have been building up and of which you were not aware. If you use external cues throughout the day, you will help keep yourself as physically relaxed as possible. Likewise, if you regularly relax as soon as you are aware of specific internal cues, you will be actively working to manage some of your high-risk situations. People commonly report that doing this can help them to feel less stressed or anxious, have better concentration, have more energy, and sleep better at night. I recommend that you identify and use both external and internal cues. What can you think of that you hear, see, or do that happens once or twice an hour? You could also set an alarm on your phone to prompt you. Additionally, what would be good internal cues for you: a thought, emotion, or physical sensation?

Script for Guided Progressive Muscle Relaxation—Chapter 4

The technique I am going to help you learn is called progressive muscle relaxation. It involves tensing and relaxing muscle groups throughout your body to bring about a state of relaxation. As I ask you to tense your muscles, only tighten them enough to feel some tension—maybe a third to a half of their fully tense state. Make sure you don't strain yourself or hold your breath when you tense your muscles. The goal is to notice what the muscles feel like when they are tense so you can more fully relax them. I'll have you hold the tension for about 4 to 5 seconds and then ask you to relax. Focus on the sensations of letting go of the tension and study the feelings of the muscle being completely relaxed. We'll have you do that for about a minute before moving on to the next muscle group.

Before we begin, get into a comfortable relaxation posture: feet on the floor, legs apart, neck straight, back against your chair, teeth slightly apart, eyes gently closed, and head upright. Take a few slow, deep, comfortable breaths. Breathe in deeply, hold for a moment, and exhale. As you breathe in, concentrate on the sound and feel of the air. As you exhale completely, notice the warmth of the air and silently say the word "calm" to yourself with each breath you let out. Take a few more slow, deep breaths. Be sure to exhale slowly and completely each time. Imagine your body becoming more relaxed and feeling heavier in your chair each time you exhale. [Pause.]

Now we'll begin the progressive muscle relaxation. First, we'll start with your legs. Lift your legs slightly off the ground, tense your thighs, and point your toes toward your head. Hold that position and feel the tension. Now let your legs drop to the ground and release all the tension at once. Notice the difference between the way your legs feel now when relaxed and how they felt when they were tense.

Now we will move to your arms. With your palms facing the ceiling, make a fist and raise your forearm bringing your fist as close to your shoulder as you can while at the same time pressing your arms to your sides. Feel the tension in your fingers, hands, and arms. And now relax. As you relax you may notice your arms feel warm and heavy. Notice the difference between the relaxation and tension in your arms. Continue to breathe slowly and deeply.

While your legs and arms remain relaxed, we will now move to your shoulders and stomach. Lift both shoulders as if you were trying to touch your ears with them and at the same time suck your stomach in as if someone were pushing on it. Feel the tightness and tension across both shoulders and in your stomach muscles and hold it. And now relax. Let your shoulders fall back down and enjoy the heaviness, warmth, and relaxation in your shoulders.

Continue to breathe slowly and deeply, and scan your legs, arms, and shoulders, releasing any excess tension you notice. Focus on the sensation of relaxation in these areas. We'll now move to your face and neck. To tense your neck, press your chin to your chest or the back of your head to the back of your chair. While doing this, squint your eyes and slightly bring your back teeth together, tensing just enough to feel the muscles in your jaw. Notice the tension in your face and neck: hold it. And now relax. Let all the tension go from your face and neck.

Continue to breathe slowly and enjoy the relaxed feelings throughout your entire body. Scan your body from your head to your toes and notice what your muscles feel like. As you are doing this, take five more slow deep breaths at your own pace. After you exhale on the last breath, open your eyes.

Script for Guided Imagery Relaxation—Chapter 4

Close your eyes and begin to relax. Breathe deeply and slowly and let your entire body feel relaxed and at ease. Now, imagine yourself at the back of a movie theatre. Picture a scene or a place that you associate with feeling relaxed and calm and imagine it on the screen at the front of the theatre. It can be a real place that you have been to or an imaginary place. Do you have a scene in your mind? Now imagine yourself moving closer and closer to the screen and as you get closer, the picture becomes more clear and vivid, almost as if you're in the image. Imagine that there are three steps right in front of the screen. Walk up the first, then the second, and now the third step. You are right in front of the screen and can see the image with perfect clarity. Now walk through the screen and put yourself in that image, not as if you were outside looking in, but actually in that place. [Pause.] Now look around you. Be aware of all the details of what you see. Notice the colors of everything around you, notice how vivid those colors are and areas of light and darkness. You might notice the various shades or textures and the intensity, softness, or brightness of the light. [Pause.] Be aware of the sounds you hear or don't hear in this place. Are the sounds close or far, loud or soft? [Pause.] Become aware of the smells. [Pause.] Notice the things that you can feel and the temperature of the air. [Pause.] Enjoy the sensation of being in this place where you can feel very, very relaxed. You can use any distracting, stressful, or anxious thoughts as reminders to easily travel back to this image and relax yourself. This can be your relaxation place and you can come here whenever you wish.

Script for Mindfulness Exercise #1—Chapter 4

Close your eyes and let whatever comes into your mind be there. Pay attention to whatever is in your awareness and observe it with curiosity and without judgment. Let things come and go as it happens. In your mind, label what you are experiencing: Are they thoughts? Are they feelings? Are they physical sensations? Are they smells? Maintain this observation of your experience for a couple of minutes.

Script for Mindfulness Exercise #2—Chapter 4

Close your eyes and focus on your breathing. Take slow, deep breaths and feel the sensation of air coming into your lungs and back out. Notice the feeling of your lungs being full, and then the feeling of them being empty. Take a few deep breaths and focus on those sensations. Now shift your attention of the sensations within your body as you sit in your chair. Notice your legs and your back against your chair. Feel the sensation of your arms resting in your lap. Feel the weight of your arms and your legs. Focus on those sensations for a few moments. Now shift your focus to the sounds you hear in the room. Pay attention to noises in the background that you might now ordinarily hear. Carefully study the details of those sounds as you focus on them for a few moments. Now return your attention to your breathing.

Script Introducing Cognitive Disputation—Chapter 4

Often when people get stressed, anxious, or depressed, their minds will tell them all kinds of things that can make them more distressed than they would like to be. You can't stop your mind from talking to you, that's its job; however, you can improve your skills for recognizing what your mind is telling you and step back from those thoughts to ask yourself how useful they are. The idea here is to increase your ability to choose how you want to respond to situations instead of just reacting automatically. Questioning your thoughts gives you the opportunity to respond in a manner consistent with your values and with how you want to represent yourself to others. This can allow you to turn the volume down on any distressing responses you might be having. This does not mean you will think happy or positive thoughts that will make everything better. It is beneficial, however, to be able to look at your initial thinking and determine if it is helpful, useful, and/or accurate and ask yourself how you would need to think differently to change how you feel.

Questioning your thoughts is a skill that you can learn and get better at with practice. Look at this list of 18 groups of questions [see Figure 4.3] and when you come to one that really jumps off the page as something that would be good to ask or tell yourself, tell me what it is.

[Once the patient finds a question or statement they think might work, say the following:] *If you were to ask or tell yourself that, how do you think it would be helpful? What would it allow you to do? [Typically, patients say it would allow them to look at the situation in a different less extreme way.]*

So, by asking or telling yourself that, it can interrupt how you typically think and react to situations, help you look at the big picture, decide how you want to respond instead of react, and you can start to change your thinking so it works for you instead of against you.

Script Introducing Acceptance and Commitment Therapy (ACT)—Chapter 4

It sounds like you are struggling with how these challenges are interfering with how you want to live your life, and at the same time, you feel they are part of your life now, and can't be changed. Often people believe they need to eliminate certain difficulties before they can take concrete steps to move forward toward doing the things they value most, but that is not always the best approach. Would you be interested in working on moving toward some of the goals you have despite the difficulties you are having? [If the patient answers yes, continue with the following:] The thoughts, emotions, memories, and discomfort you have are often appropriate reactions. When you learn to be less judgmental about these reactions, you won't dwell on them so much and you can allow yourself to do the things you value, even though those internal experiences are still there. Essentially, you can come to accept them so they don't have so much control over you. Some people find this approach to be very helpful, especially when life has given some challenges that they cannot control. This doesn't mean being passive about every bad circumstance, but it can help you to deal with some of your challenges and focus on living your life consistent with your values. Would you be interested learning more about this approach?

Script Introducing Behavioral Self-Analysis—Chapter 4

I would like to introduce you to a helpful strategy that can assist you in changing health-related behavior. We call it the ABC model. The A stands for antecedents. These are events or activities come before the behavior. B stands for the behavior itself. C stands for consequences, which includes thing that can happen after the behavior and either increase or decrease the likelihood that you will engage in that behavior again.

The concept is one I'm sure you are familiar with, as we use it in a lot of everyday events.

For example, if you wanted to learn a new skill, such as driving a car for the first time, we can apply the ABC model. First let's consider A, which again are Antecedents, or things you would want to do before getting behind the wheel. What are some things you would want to do before you just start driving on your own for the first time?

- *Instruction. Learning how to turn the car on, how to work the controls, what the rules of the road are, what strategies help others to be successful, and what pitfalls to be cautious of.*
- *Practice. Driving around an empty parking lot, then moving to residential streets, then busier streets. Having an advanced driver or instructor in the car with you to coach you. Repeatedly practice the more difficult aspects, such as parallel parking, until you develop the skill.*
- *Define the goal and determine the best route. Decide where you are going and map out the route.*
- *Identify potential problems. What are some of the hazards that could interfere with success? How is the weather? What are the road conditions? Is the car well maintained?*

Okay, good. Now let's think about B, which is the actual behaviors while you are driving. What are some important behaviors while driving? (ideas might include: stay focused; avoid distractions, such as eating, listening to music, or talking; don't get discouraged if you make a mistake; apply the skills you have learned and practiced; assess how you are doing and make adjustments when necessary; take safety precautions, such as wearing a seatbelt).

Finally, let's identify the C's in our driving examples, which are the consequences. What are some of the consequences that will make it likely that you will drive again (e.g., arriving safely at your destination, pride in learning a new skill, freedom to get around easier)?

By analyzing the ABCs of any new skill, you can increase your chances of success.

Now that you have the idea, let's apply this ABC model to learning to manage your diabetes.

What are some of the antecedents (events or activities) you may want to pay attention to for developing the skill of managing diabetes?

- *Instruction. What is diabetes? How can medical science help control the disease and optimize quality of life? What skills do you need to learn? What lifestyle behaviors do you need to change? How can your family help? What equipment is available? What books or education programs are available? How often do you need to visit the doctor?*
- *Practice. Practice testing blood sugars, giving insulin injections, checking feet, and*

investigating new diets and exercise plans. Use a diabetes educator to help coach you. Keep working at those aspects that are difficult for you until you become good at it.

- *Define the goal and determine the best route. Set behavioral goals for diet, exercise, weight loss, medication use, and doctor visits. Establish reasonable sub-goals and target dates, taking small, achievable steps.*
- *Identify potential problems. What are some of the hazards that could interfere with success? Is there anyone in your life who will work against you achieving success, even unintentionally? How is your motivation and attitude; are they working for you or against you? Do you believe you can make healthy changes in your life? Are you getting depressed?*

Next is the B or Behaviors...what are some of the important factors in making lifestyle changes? Many are the same as when talking about driving: (a) stay mentally focused; (b) avoid distractions; (c) don't get discouraged if you make a mistake; (d) apply the skills you have learned; (e) assess how you are doing and make adjustments when necessary; and (f) take safety precautions, such as not keeping sugary desserts readily available at home.

Finally, let talk about the Cs or consequences...when you do well, what are some of the consequences that will increase the likelihood that you will continue to make those changes? Again, there are parallels to our driving example: (a) arriving safely at your destination is the same as achieving better health and quality of life, (b) pride in learning a new skill is similar to gaining a sense that you are in control of your diabetes, and (c) freedom to get around more easily is like maintaining high levels of functioning and not letting diabetes limit your potential.

Now that we have identified some of the ABCs related to managing your diabetes, would you be willing to come back to work on some of these things together with me with the goal of helping you to be more successful?

Script Introducing Stimulus Control for Behavior Change—Chapter 4

When you eat an unhealthy snack food, a variety of things happen before you actually start eating it. Over time, these factors become associated with eating. In other words, they start to become triggers for eating. Triggers can be things you see, hear, smell, feel, or do. What triggers for eating junk food have you recognized in yourself? [Have the patient list factors. Categorize them as follows: (a) behaviors (e.g., watching television), (b) emotions (e.g., anger), (c) thoughts (e.g., "I'm hungry"), (d) other people (e.g., family not home), and (e) environmental (e.g., sitting at my desk at work).]

This is a good start. It's good that you are aware of many of the factors that are triggering your eating. As you can see, I've organized your triggers into the different categories you listed.

There may also be some of which you are not aware. The more triggers of which you are aware, the greater are the chances of being successful at managing your eating.

I would like to suggest that, over the next week, you monitor your eating outside of meals.

For this week, don't try to make any changes, just monitor your eating. This form (see Monitoring Behavioral Triggers handout in Figure 4.8) can be used to help you recognize additional triggers. Every time you eat something or get the urge to eat something, apart from mealtime, log it on the form. Let's meet in one week and we'll review what you've observed.

[At the next appointment you could say:] *Let's look at your eating log. What did you observe were the most important or most frequently occurring triggers for you? Were there any that you hadn't recognized before?*

It looks like you have done a good job recognizing some of the triggers related to your consumption of snack foods. I suggest we work together on trying to control these. Is that something you would be willing to do? Let's list the factors you identified on this worksheet (see Figure 4.8). Now, which of these triggers are within your ability to control and which do you feel are outside your control?