Changing Behavior

Purpose
This section is intended to provide information on the process of changing behavior.

Objectives
At the end of this section, you will be able to:
• Identify your current stage of behavior change.
• Complete the worksheet titled “Behavior Change Planning”.
• Identify two ways you can work towards your behavior change goal.

Outline
Successful behavior change .................................................. L-2
Stages of behavior change .................................................. L-3
Steps to changing behavior .................................................. L-4
Behavior change planning worksheet .................................. L-6

*The American Diabetes Association Recognizes this education service as meeting the National Standards for Diabetes Self-Management Education and Support.
Successful behavior change

Successful diabetes management will require some lifestyle changes. Some of these changes will be made easily. Other changes will be difficult to make. Some changes you will be reluctant to make. Everyone makes changes at different rates, however the stages of change are the same for everyone.

Successful behavior change is a blend of 3 things

1. Knowledge
   a. What is considered good diabetes management?
   b. How do I benefit from good diabetes management?
   c. What behaviors need to be changed to achieve this?
   d. What additional knowledge do I need?

2. Desire
   a. What is my diabetes management goal?
   b. How much change am I willing to make?
   c. Are there changes I am reluctant or unwilling to make?

3. Practice skill development
   a. Try the change
   b. Evaluate
   c. Fine-tune
   d. Re-assess
   e. Become comfortable with the change
Stages of behavior change

- **Pre-contemplation**: (Has not crossed your mind) A new idea.
  This means that you have not considered making any changes in a behavior or habit.

- **Contemplation**: (Thinking about it) it is a possibility.
  This means that you are thinking about making changes.
  - Be realistic about what you can change.
  - Consider which changes may be easiest, or the most beneficial to you, or the most motivational.

- **Preparation**: (Planning to do it) filling in the details.
  In this stage you are preparing to make a change.
  - Limit to one or two changes at a time.
  - Take time to plan.

- **Action**: (Doing it) trying it out.
  This is when you actually are making the change.
  - This is the “try it on for size” stage.
  - Process of assessing; the planned change is working.
  - Be flexible – the original plan may not work; evaluate what did and did not work; re-do the plan.

- **Maintenance**: (Keeping it up) becoming a routine.
  Your new behavior becomes a routine in your everyday lifestyle.
  - Re-assess your plan and action stages asking:
    - What worked?
    - What did not work?
    - Do you need to make some adjustments?
    - Did the situation change?
    - Did you have the resources to be successful?
    - Was your knowledge adequate?
    - Did you get the support you needed?

Change is difficult; try not to go back to the old behaviors.
Steps to changing behavior

Assessment: Ask yourself the following questions.

1. What is most difficult about having diabetes?

2. What tasks of diabetes management give me the most problems?

3. What changes could I make that would improve my diabetes management and/or make my diabetes less difficult for me?

4. What changes do I want to do?

To avoid feeling overwhelmed

1. Start by adding one new habit. It is always easier to start a new habit than to give up one that you already have.

2. Write down your plan of change. Be very specific about what you are going to do. For example, the statement “I am going to exercise more” lacks a plan and a measurement of success. The statement “I am going to walk to the corner and back 3 days this week” identifies a plan and a measurement for success.

3. Ask for help from your family or friends. It is much easier to have someone help you make changes than to do it alone.

4. Make it easy to remember your new habit. For example, if you find it hard to remember to take your medicine before breakfast, put a post-it-note next to the toaster or on the refrigerator so you will remember when you go to eat breakfast.
Setting goals

SMART goals

• **Specific** – This is the what, why and how of your goal.
• **Measurable** – Include measurements you will use to determine if you have met your goal.
• **Attainable** – A goal needs to be reasonable. Do not set yourself up for failure by setting a goal that is out of reach.
• **Realistic** – Be honest with yourself. Do you have the ability and commitment to make this happen?
• **Timely** – Have a set time. When you will achieve your goal.

Examples of SMART goals:

• I will walk 10 minutes Monday, Wednesday and Friday before supper.
• I will get my flu shot each November.
• By Tuesday, I will schedule my diabetes eye exam.
• I will increase my servings of vegetables by 2 servings a week until I average 3 servings of vegetables daily.
• Before I go for my walk, I will monitor my blood glucose.
• I will take my insulin every evening between 9:00 and 10:00 p.m.
• I will teach my two closest friends the signs and symptoms of hypoglycemia and how it is treated.
Behavior change planning worksheet

1. First, think about the changes you would like to make. List one or two specific changes.

2. What do you need to change to reach your goals or feel better about it?

3. Where would you like to be regarding these goals in a week from now?

   One month from now?

   Three months from now?

   Six months from now?

   In a year?
4. Every change we make affects us in some way. When planning a change it is important to consider the advantages (benefits of change) and disadvantages (cost of changing) to you and your family.

**Consider how this change could affect your:**
- Diabetes management
- Health status
- Time
- Finances
- Emotional state
- Family members
- Job/Hobbies

<table>
<thead>
<tr>
<th>Advantages</th>
<th>Disadvantages</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Motivators**

<table>
<thead>
<tr>
<th>Barriers</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

5. What are some steps you could take to bring you closer to your goal?

6. In what ways can you change your home or work areas to eliminate cues or routines supporting old negative habits?
7. What are ways your family and friends can help you? Get rid of reminders of habits you want to break. If you want to stop eating cookies, try not to buy any or throw out the cookies you already have. Changing your daily routine may help eliminate cues for certain behaviors or will help you add a new behavior.

<table>
<thead>
<tr>
<th>Person</th>
<th>Possible Way to Help</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

8. Write down 1 to 3 steps or behaviors that you will do when you leave here to change the situation or reach your goal.

9. What are the costs and benefits of taking action to improve this situation or reach your goals?

10. How often will you do this behavior? When is your deadline? Write a contract or agreement with your family or health care team about the changes you want to make.

11. Write down how you will keep track of your new behavior. Write down how you will reward yourself for achieving this behavior. If you reach your goal of walking 20 minutes a day, treat yourself to something you enjoy (i.e. a movie, a new book, or a flashy pair of walking shorts!).
12. Commitment to improving my health.

I, ____________________________________________________________ will,

_________________________________________________________________________________________________________

_________________________________________________________________________________________________________

_________________________________________________________________________________________________________

_________________________________________________________________________________________________________

_________________________________________________________________________________________________________

Signature________________________________________ Date _________________