

Quality health plans & benefits
Healthier living
Financial well-being
Intelligent solutions

aetnaSM

My path to wellness workbook

Healthy Lifestyle Coaching

This workbook belongs to:



This workbook will help you identify the areas of your personal wellness most important to you. By making one small change at a time you can live a healthier, happier life.

Table of contents

Welcome	3	Smoking journal.....	30
Personal wellness	4, 6	Nicotine Replacement Therapy (NRT) journal	31
Mindfulness	7	Hunger and fullness experiments.....	32
Self-care	8, 9	Eating meditation.....	33
Commitment to self	10	Beverages journal.....	34
Values clarification	11	Eating journal.....	35
Physical wellness	12	Stressors and copers.....	36
Intellectual wellness	14	Sleep journal	38
Emotional wellness	16	My relaxing bedtime routine.....	39
Social wellness.....	18	Communications journal	40
Spiritual wellness.....	20	“I-statements”	41
Environmental wellness.....	22	Creating your own home exercise plan.....	42
Financial wellness.....	24	What is mindful exercise?	43
Professional wellness	26	Exercise journal.....	44
Tobacco habits reflection.....	28	My Plan for Sustaining Change	45
Quitting tobacco journal.....	29		

Dear Member:

Welcome to the Healthy Lifestyle Coaching program!

We hope you will take a moment to congratulate yourself for taking this step along your path to wellness. We're here to guide you to live your healthiest life and to help provide you with the skills you'll need to do this.

The My Path to Wellness Workbook has been designed to help you explore what's important to you and to describe what wellness means to you. The activities in this workbook are thoughtful in nature and will help you to better understand yourself and how your choices play a role in your health and well-being.

You can complete any activity you would like, in any order. You may work at a pace that works for you. There is no correct experience. You can discuss what you learn from these activities with your coach.

Along your path to wellness, you will experience times when you are making progress and enjoying the benefits of your healthy choices. There will also be road blocks and setbacks. This is natural. The point is that you will be able to use what you have learned from this program and from your own experience to get back on your path.



Only your doctor can diagnose, prescribe or give medical advice. The Aetna Healthy Lifestyle Coaching program only provides information and certain support services. Contact your doctor first with any questions or concerns regarding your health care needs.



Personal wellness

How would you describe wellness?

- Not being sick
- Feel in control of my life
- Make good choices about what I eat
- Be at peace with myself
- Be financially responsible
- Have good friends

All of these elements are part of what we now think of as the big picture of wellness: holistic health.

The idea that health involves all aspects of wellness – physical, intellectual, emotional, social, spiritual, environmental, professional and financial is new. When these pieces are in balance, we feel a heightened sense of vitality and, as a result, we send that energy out into the world. Bottom line: The better we take care of ourselves, the bigger the positive impact we have on those around us.

If we look at wellness as a journey, then moving toward our goal means we take one small step at a time. What makes us take that first step? For some, it's feeling tired or lacking energy. For others, the trigger may be a significant loss or a health crisis. Regardless of how we get to this point, a balanced lifestyle is a desire we all share. We all want to reduce our stress, have more energy and just slow down.

Wellness includes all aspects of life. It's much more than diet and exercise. So, take some time to reflect on the following areas. When you're finished, you can choose to make changes in the area of your wellness that's most important to you now. Eventually, you will address all of these areas, but it will be when you feel ready.

Within this workbook, you'll find worksheets for each dimension of wellness. Completing these wellness worksheets will help you to understand yourself better so that you can make the changes you want to make.

Physical:

- How can I move more during my day?
- How can I eat healthier?
- What could I do to get more sleep?

Intellectual:

- What kinds of reading materials feed my mind in a healthy way?
- What TV programs or movies have a positive effect on me?

Emotional:

- How tuned in am I to what I'm feeling?
- How could I communicate my needs to others more effectively?

Social:

- What conversations do I engage in that inspire me or leave me feeling drained?
- How do certain people affect me, and what effect might I have on them?

Spiritual:

- What gives my life meaning and purpose?
- What energizes me?
- What do I care about most?

Environmental:

- What products do I use on my body or in my home that might potentially harm me?
- How does having an organized or cluttered space affect me?

Financial:

- How can I spend less and save more?
- What am I doing to get or stay out of debt?
- How does money help me enjoy my life?

Professional:

- In what ways does my job fulfill me?
- How does my role enable me to utilize my strengths and talents?

Where do we start to get this balance – what's the first step in this journey?

Know which aspect of our wellness needs some care and attention.

What's next?

Gently begin to manage change within ourselves and within our lives:

- Eat healthy foods
- Communicate consciously
- Be careful about what we watch on TV
- Move the body
- Sleep soundly
- Schedule free time

These are choices that move us closer to or further away from a state of well-being. Achieving and maintaining this sense of balance requires skillful awareness, which we call mindfulness.



What does wellness mean to you?

Wellness is personal. Only you can determine what wellness means to you. To help you think about what wellness means to you, try creating a Wellness Collage. This will help you:

- Connect with your own personal values and what's important to you
- See yourself functioning at your best and living a fully engaged life
- Create a visual reminder of how you want to live

How do I create a wellness collage?

- Include photos or pictures of specific things that hold meaning for you, such as hiking on a trail or eating fresh veggies. These kinds of images are included because they involve a level of wellness that is attractive and possible for you personally.
- Go through magazines and cut out words and phrases.
- Use drawings, glitter, ribbon, stamp art, markers or whatever art supplies you have.
- Keep it simple or get as fancy as you like.

How do I get started?

Relax in a quiet space and pay attention to your breathing for a few minutes, ask yourself:

- What do you value most in your life?
- What would your life look like at your ideal level of wellness?
- What would you be doing more of?
- What would you be doing less of?

Sit quietly and see what emerges. You might begin by writing down your ideas or thoughts. Some people create their collages in an hour, while others work on them over a few days.

See what works for you. There is no “due date.” The point is to play, be creative and have fun with this activity.

What mindfulness is and how it helps

Mindfulness can very simply be described in three words; present moment awareness. You can practice mindfulness simply by paying attention. Notice your breathing. Notice the thoughts going through the mind. Notice any feelings that are present. Notice sensations you feel in the body. The greatest benefit of mindfulness is that it reduces stress.

Here's how it works. Your body goes into 'fight or flight' and stress hormones start pumping through your body. All kinds of scary thoughts usually about the past or the future start going through your head. Your mind comes up with scenarios that will probably never happen. Your breathing is shallow. It's from the top of your lungs. Your body is not getting the oxygen it needs. Your muscles become tense, usually where there is a weakness. You become even more stressed. You may notice other sensations like your heart racing, or your face getting flushed, or a lump in your throat. You feel all kinds of negative emotions; fear, frustration, anger, resentment, anxiety.

When this happens, pay attention to the breath moving in and out of your body. That helps immediately. Focus on your body and take a quick mental inventory of what's happening. You might walk outside and feel how cool or warm the air is on your skin. You might look around and really see your surroundings. Or listen for birds and other noises. You might pick up a stick and feel its texture. You can do all this in about five minutes. You will feel calmer and now have a more positive mindset to tackle the challenges of your day.

Practice mindfulness throughout your day

Here are some easy ways to practice mindfulness as you go throughout your day.

- Notice how you feel when you wake up.
- When you awaken, take a few minutes to lie in bed and stretch your body. Notice any sensations.
- When you sit up place your feet on the floor and take a breath.
- Walk (not race) to the coffee pot and notice what it feels like to be moving.
- Notice the smell of the coffee. See if you can take a few sips while sitting down.
- Pay attention to your hunger signals. Breakfast is the most important meal of the day so make sure you have something healthy to eat. If you're in a hurry, take a breath and sit down even if it's just the first few bites.
- Drive to work with the radio off. Notice your thoughts and feelings as you drive. If someone cuts you off, or if you are sitting in traffic take a breath.
- As you walk to the office, pay attention to your feet connecting with the ground, even for just a few steps.
- Take a breath between phone calls and meetings.

- Notice what it feels like to be sitting. Notice when you need to move, eat, drink, and empty your bladder.
- Try to sit down and relax when you eat your lunch, even if it's just for 5 minutes. Avoid eating while driving or working. Take a breath. Notice the color, the texture, and the smell of your food. When you think you're done chewing, chew it 5 more times.
- Take short walking or movement breaks. Notice how your body feels after. Notice your energy level.
- As you talk to people, notice the impact they have on you. Be aware of how your words and attitudes are impacting others, too.
- Instead of grazing on food all day without even tasting it, pick a time to have your snack, and stop to enjoy it.
- As you drive home from work, turn the radio off and allow yourself some transition time from work to home.
- When you walk into your home, notice how you feel.
- As you sit down to dinner, take a breath and notice what's on your plate. As you eat, notice how your stomach feels and how your clothes feel. And after you're finished eating, notice what your energy level is.
- Be aware of what you are watching on TV and how it impacts your feelings and mood.
- Notice if your bedtime routine is relaxing or busy and what your state of mind is when you get into bed.

The essential question

Ask yourself on a regular basis, "In this moment, what is the most self-caring choice I can make?"

What is self-care?

Self-care is broad and can include many pieces of wellness. Wellness is more than just physical well-being. It includes eight specific dimensions that, in addition to the body, include:

- Intellect, or knowledge and beliefs
- Emotions and feelings
- Social, or relationships with others
- Spiritual, or that which gives life meaning and purpose
- Environment or physical surroundings
- Professional and financial, or career and economic well-being

By considering and addressing all aspects of wellness, our Healthy Lifestyle Coaching program will help to guide lasting change and enhance your potential for growth.

Why is self-care important?

Your greatest asset is your health. Practicing basic self-care in today's fast-paced culture is very important to your success in all areas of your life. Achieving and maintaining a healthy lifestyle will enable you to have the energy and focus to pursue both short-term and long-term health and wellness goals. Right here, right now, you can begin again!

Take a moment to reflect and consider this:

If you practiced a higher level of self-care, how would this impact your life?

Specifically, how would you be better able to manage and enjoy better health?

How would this impact your personal relationships?

.....

.....

.....

.....

.....

.....

.....

How would practicing a higher level of self-care affect your ability to achieve your personal life goals and dreams?

.....

.....

.....

.....

.....

.....

.....

.....

What are some other benefits you would enjoy if you took better care of yourself?

.....

.....

.....

.....

.....

.....

.....

.....



Create your self-care bag

Dig into your self-care bag whenever you're "waiting!" Fill your bag with whatever you consider very important to your day-to-day state of well-being. Make it easier to reach your health goals.

For example:

- If you're trying to incorporate more movement into your day, put a pair of walking shoes into your bag.
- If you want to focus on your intellectual wellness, put an inspirational book into your bag.
- If you're trying to stay hydrated, put a water bottle into your bag.
- If you're trying to avoid fast food, put a healthy snack into your bag.

What will you place in your self-care bag?

1.
2.
3.
4.
5.
6.
7.

Making a S.M.M.A.R.T.R. commitment to self

To be successful with making lifestyle changes, you must be able to break down your wellness vision into smaller chunks. The goal is to identify behaviors or actions that you will do on a constant basis. Even if you're feeling highly motivated, it's important not to overshoot on the change you will make. Recognize that it's with one breath, one moment, one choice at a time that you become healthier. This will encourage you to build on your success.

This goal-setting model will help you to progress forward. Everyone changes at their own pace and in the ways that are important to them. As we've said, wellness is a personal journey. If the term "goal setting" doesn't work for you, think about what small change you will make or what small step you will take to improve your health and sense of well-being. And once you learn this model, you can apply it to making changes in any part of your life.

Let's break it down ...

Specific:

- Be specific about "how" and "when" you will do a particular action or behavior. For instance, let's say you want to increase your physical activity — "I will walk 3 days at lunchtime for 15 minutes."

Measureable:

- You'll want to be able to determine how you will know when you've reached your goal. For instance, you might use one of the journals in this workbook to track behaviors. Or you can write down on your calendar the days you walked. You might even use a phone app or wear a pedometer.

Mindful:

- Notice how your choices are impacting your health and well-being, whether positive or negative without any self-judgment. Just notice. You can use what you've learned to help you make healthy changes, one breath, one choice at a time.

Accountable:

- It's important to find someone that will help you be accountable to yourself. It's especially helpful if this person has made the changes you want to make. This could be your coach at the beginning, but it's critical that you ask your spouse, friend or family member if he/she will be your "check-in" buddy. It might also be an online health/lifestyle community.

Realistic:

- Make your goal a slight stretch. It needs to be within reach. Think about what seems reasonable and what will really work for you. Again, it's important to not overshoot.

Time-bound:

- Set a time frame for the goal or step. Decide "when" and "how often" you will do this specific behavior.

Reinforcement:

- It's important to provide reinforcements for when you make healthy choices. When you acknowledge yourself in some way, you will be more likely to continue with that behavior.
- Make your reinforcement health enhancing like treating yourself to a special tea or some bath salts. You might schedule downtime to do something fun or just relax. Your reinforcement can be as simple as making a positive statement to yourself like, "Great job, self! I did what I said I would do!" Take a moment to notice any positive emotions you feel. And celebrate yourself.

Values clarification journal

It can be a challenge to continue with healthy behaviors, especially when they are new. When you begin to notice yourself not doing the healthy things that make you feel good, complete this Values Clarification Journal. Take a few minutes to sit quietly and reflect on what’s most important/dear to you. Taking time to reflect and then write down your values will help you to feel calmer and less stressed. Complete this Values Clarification Journal daily/weekly/monthly, whatever works for you. This will help you live according to your values. And make the healthy changes you desire.

In my life, what’s most important to me is:

.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....

This is important because:

.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....

Today (this week/this month) I lived my life according to these values in the following way(s):

.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....

Sample values:

- Responsibility — do what I said I would do
- Purpose — have meaning and direction in my life
- Helpfulness — to reach out to others
- Inner peace — find a sense of quiet/calmness
- Hope — see what happens in life in a positive way
- Independence — be able to meet my own needs
- God’s will — to follow God’s plan for me
- Loving — give and receive love
- Family — have a happy, loving family
- Forgiveness — be forgiving of others
- Strength — be physically fit and capable
- Mental strength — to be mentally alert
- Humor — to see the funny side of life
- Friendship — have close, supportive friends
- Growth — keep changing and growing
- Health — be physically well

Goal-setting worksheet — physical wellness

Feel free to write down your responses to these questions now or reflect upon and journal about them later.

1. During a typical day, describe the foods you eat. Do you eat whole foods (raw fruits and vegetables, fresh chicken or fish, whole grains)? Or do you eat processed foods (potatoes in a box, shredded cheese, packaged cookies)?
2. Describe the ways you typically move your body every day.
3. What type of physical activity or exercise do you engage in daily?
4. How many hours of sleep do you normally get each night?
5. How do you rest and relax?
6. What types of beverages (in amounts) do you drink in a typical day?

Use the below chart to identify those behaviors, and then rate your readiness to change using a scale of 1 to 5.

-
- 1= Haven't even thought of changing
 - 2= Have given it some thought
 - 3= Have started preparing to change (have looked up information about it, talked with others about it, etc.)
 - 4= Am already taking some action to change in this area
 - 5= Have already made the change and want to help maintain my progress

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

What behaviors, if any, related to your physical wellness do you want to change?	Rate your readiness to change: 1-5	Comments
.....
.....
.....
.....
.....

Now, let's set a S.M.M.A.R.T.R. goal!

Specific. Define what you will do.

.....
.....
.....

Measurable. How will you know that you've reached your goal?

.....
.....
.....

Mindful. How did making this change affect you?

.....
.....
.....

Accountable. Do you want to check in with your coach or make notes on your own?

.....
.....
.....

Realistic. Make your goal a slight stretch. It must be within reach.

.....
.....
.....

Time-bound. Set a timeframe for the goal. When and how often?

.....
.....
.....

Reinforcement. How will you acknowledge your change or celebrate yourself?

.....
.....
.....

Who will support you with this? (Remember, different people can be supportive with different changes.)

Name:

E-mail:

Phone:

Reinforcement ideas

Try to make your reward something health enhancing like:

- Massage or reflexology
- Inspirational book/CD
- Special tea or juice
- Motivational movie/play
- Bath salts or an aromatherapy candle
- Yoga or meditation class
- Schedule downtime

Goal-setting worksheet — intellectual wellness

Feel free to write down your responses to these questions now or reflect upon and journal about them later.

1. What do you read (newspapers, magazines, books, etc.)?
2. What, if any, television shows or movies do you watch?
3. How many hours per day do you spend on the phone or in front of a computer?
4. What type of music do you listen to most often?
5. How does what you read, watch or listen to improve the quality of your life?
6. How does what you read, watch or listen to affect your patience and tolerance of others?

Use the below chart to identify those behaviors, and then rate your readiness to change using a scale of 1 to 5.

- 1= Haven't even thought of changing
- 2= Have given it some thought
- 3= Have started preparing to change (have looked up information about it, talked with others about it, etc.)
- 4= Am already taking some action to change in this area
- 5= Have already made the change and want to help maintain my progress

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

What behaviors, if any, related to your intellectual wellness do you want to change?	Rate your readiness to change: 1-5	Comments
.....
.....
.....
.....
.....
.....

Now, let's set a S.M.M.A.R.T.R. goal!

Specific. Define what you will do.

.....
.....
.....

Measurable. How will you know that you've reached your goal?

.....
.....
.....

Mindful. How did making this change affect you?

.....
.....
.....

Accountable. Do you want to check in with your coach or make notes on your own?

.....
.....
.....

Realistic. Make your goal a slight stretch. It must be within reach.

.....
.....
.....

Time-bound. Set a timeframe for the goal. When and how often?

.....
.....
.....

Reinforcement. How will you acknowledge your change or celebrate yourself?

.....
.....
.....

Who will support you with this? (Remember, different people can be supportive with different changes.)

Name:

E-mail:

Phone:

Reinforcement ideas

Try to make your reward something health enhancing like:

- Massage or reflexology
- Inspirational book/CD
- Special tea or juice
- Motivational movie/play
- Bath salts or an aromatherapy candle
- Yoga or meditation class
- Schedule downtime

Goal-setting worksheet — emotional wellness

Feel free to write down your responses to these questions now or reflect upon and journal about them later.

- 1. When do you notice your feelings the most?
- 2. What feelings are you most aware of?
- 3. If you feel strong emotions, what do you usually do?
- 4. How comfortable are you with letting others know your thoughts and feelings?
Describe those circumstances.
- 5. What beliefs or judgments do you have about having feelings or expressing them?
- 6. In the following situations _____ (describe a circumstance)
 - a. I manage my feelings well:
 - b. I don't manage my feelings well:

Use the below chart to identify those behaviors, and then rate your readiness to change using a scale of 1 to 5.

- 1= Haven't even thought of changing
- 2= Have given it some thought
- 3= Have started preparing to change (have looked up information about it, talked with others about it, etc.)
- 4= Am already taking some action to change in this area
- 5= Have already made the change and want to help maintain my progress

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

What behaviors, if any, related to your emotional wellness do you want to change?	Rate your readiness to change: 1-5	Comments
.....
.....
.....
.....

Now, let's set a S.M.M.A.R.T.R. goal!

Specific. Define what you will do.

.....
.....
.....

Measurable. How will you know that you've reached your goal?

.....
.....
.....

Mindful. How did making this change affect you?

.....
.....
.....

Accountable. Do you want to check in with your coach or make notes on your own?

.....
.....
.....

Realistic. Make your goal a slight stretch. It must be within reach.

.....
.....
.....

Time-bound. Set a timeframe for the goal. When and how often?

.....
.....
.....

Reinforcement. How will you acknowledge your change or celebrate yourself?

.....
.....
.....

Who will support you with this? (Remember, different people can be supportive with different changes.)

Name:

E-mail:

Phone:

Reinforcement ideas

Try to make your reward something health enhancing like:

- Massage or reflexology
- Inspirational book/CD
- Special tea or juice
- Motivational movie/play
- Bath salts or an aromatherapy candle
- Yoga or meditation class
- Schedule downtime

Goal-setting worksheet — social wellness

Feel free to write down your responses to these questions now or reflect upon and journal about them later.

1. How do the people around you affect you (relationships at home/work)?
2. What effect do you have on others in your life (list some specific relationships)?
3. Describe the attitude and energy that you most often bring to a conversation.
4. Which behaviors, if any, may be helping or harming yourself and/or others?
5. Where do you get your sense of belonging from?
6. How many people in your life share the same values as you do?

-
- 1 = Haven't even thought of changing
- 2 = Have given it some thought
- 3 = Have started preparing to change (have looked up information about it, talked with others about it, etc.)
- 4 = Am already taking some action to change in this area
- 5 = Have already made the change and want to help maintain my progress

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

Use the below chart to identify those behaviors, and then rate your readiness to change using a scale of 1 to 5.

What behaviors, if any, related to your social wellness do you want to change?	Rate your readiness to change: 1-5	Comments
.....
.....
.....
.....
.....
.....
.....

Now, let's set a S.M.M.A.R.T.R. goal!

Specific. Define what you will do.

.....
.....
.....

Measurable. How will you know that you've reached your goal?

.....
.....
.....

Mindful. How did making this change affect you?

.....
.....
.....

Accountable. Do you want to check in with your coach or make notes on your own?

.....
.....
.....

Realistic. Make your goal a slight stretch. It must be within reach.

.....
.....
.....

Time-bound. Set a timeframe for the goal. When and how often?

.....
.....
.....

Reinforcement. How will you acknowledge your change or celebrate yourself?

.....
.....
.....

Who will support you with this? (Remember, different people can be supportive with different changes.)

Name:

E-mail:

Phone:

Reinforcement ideas

Try to make your reward something health enhancing like:

- Massage or reflexology
- Inspirational book/CD
- Special tea or juice
- Motivational movie/play
- Bath salts or an aromatherapy candle
- Yoga or meditation class
- Schedule downtime

Goal-setting worksheet — spiritual wellness

Feel free to write down your responses to these questions now or reflect upon and journal about them later.

- 1. What energizes you and gives you a sense of aliveness?

- 2. What do you care about most?

- 3. What gives your life meaning and purpose?

- 4. What do you do that is unique to you?

- 5. Do you give back to your community? If so, describe how.

- 6. I allow myself to accept help from others in the following ways:

Use the below chart to identify those behaviors, and then rate your readiness to change using a scale of 1 to 5.

.....
1 = Haven't even thought of changing
2 = Have given it some thought
3 = Have started preparing to change (have looked up information about it, talked with others about it, etc.)
4 = Am already taking some action to change in this area
5 = Have already made the change and want to help maintain my progress

.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....

What behaviors, if any, related to your spiritual wellness do you want to change?	Rate your readiness to change: 1-5	Comments
.....		
.....		
.....		
.....		
.....		
.....		

Now, let's set a S.M.M.A.R.T.R. goal!

Specific. Define what you will do.

.....
.....
.....

Measurable. How will you know that you've reached your goal?

.....
.....
.....

Mindful. How did making this change affect you?

.....
.....
.....

Accountable. Do you want to check in with your coach or make notes on your own?

.....
.....
.....

Realistic. Make your goal a slight stretch. It must be within reach.

.....
.....
.....

Time-bound. Set a timeframe for the goal. When and how often?

.....
.....
.....

Reinforcement. How will you acknowledge your change or celebrate yourself?

.....
.....
.....

Who will support you with this? (Remember, different people can be supportive with different changes.)

Name:

E-mail:

Phone:

Reinforcement ideas

Try to make your reward something health enhancing like:

- Massage or reflexology
- Inspirational book/CD
- Special tea or juice
- Motivational movie/play
- Bath salts or an aromatherapy candle
- Yoga or meditation class
- Schedule downtime

Goal-setting worksheet — environmental wellness

Feel free to write down your responses to these questions now or reflect upon and journal about them later.

- 1. How does your physical space affect you?
- 2. How do you feel when you walk into your office/home?
- 3. Describe the ease with which you can find things when you look for them.
- 4. What, if any, places are there that you would like to de-clutter (drawers, counters, shelves, closets, etc.)?
- 5. Do you use any products that may be toxic to your environment? Do you use any products that are friendly to the environment?
- 6. Describe what gives you a sense of peace about your physical surroundings.

Use the below chart to identify those behaviors, and then rate your readiness to change using a scale of 1 to 5.

.....

- 1 = Haven't even thought of changing
- 2 = Have given it some thought
- 3 = Have started preparing to change (have looked up information about it, talked with others about it, etc.)
- 4 = Am already taking some action to change in this area
- 5 = Have already made the change and want to help maintain my progress

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

What behaviors, if any, related to your environmental wellness do you want to change?	Rate your readiness to change: 1-5	Comments
.....		
.....		
.....		
.....		
.....		

Now, let's set a S.M.M.A.R.T.R. goal!

Specific. Define what you will do.

.....
.....
.....

Measurable. How will you know that you've reached your goal?

.....
.....
.....

Mindful. How did making this change affect you?

.....
.....
.....

Accountable. Do you want to check in with your coach or make notes on your own?

.....
.....
.....

Realistic. Make your goal a slight stretch. It must be within reach.

.....
.....
.....

Time-bound. Set a timeframe for the goal. When and how often?

.....
.....
.....

Reinforcement. How will you acknowledge your change or celebrate yourself?

.....
.....
.....

Who will support you with this? (Remember, different people can be supportive with different changes.)

Name:

E-mail:

Phone:

Reinforcement ideas

Try to make your reward something health enhancing like:

- Massage or reflexology
- Inspirational book/CD
- Special tea or juice
- Motivational movie/play
- Bath salts or an aromatherapy candle
- Yoga or meditation class
- Schedule downtime

Goal-setting worksheet — financial wellness

Feel free to write down your responses to these questions now or reflect upon and journal about them later.

1. Describe how you can spend less money.
2. Describe how you can save more money.
3. What, if any, thing are you doing to get or remain debt-free?
4. Money helps me enjoy my life in the following ways:

Rate the top 3 in order of importance:
5. What strategies, if any, are you using to manage your money so you can reduce your stress?

Use the below chart to identify those behaviors, and then rate your readiness to change using a scale of 1 to 5.

.....
1 = Haven't even thought of changing
2 = Have given it some thought
3 = Have started preparing to change (have looked up information about it, talked with others about it, etc.)
4 = Am already taking some action to change in this area
5 = Have already made the change and want to help maintain my progress

.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....

What behaviors, if any, related to your financial wellness do you want to change?	Rate your readiness to change: 1-5	Comments
.....		
.....		
.....		
.....		
.....		
.....		

Now, let's set a S.M.M.A.R.T.R. Goal!

Specific. Define what you will do.

.....
.....
.....

Measurable. How will you know that you've reached your goal?

.....
.....
.....

Mindful. How did making this change affect you?

.....
.....
.....

Accountable. Do you want to check in with your coach or make notes on your own?

.....
.....
.....

Realistic. Make your goal a slight stretch. It must be within reach.

.....
.....
.....

Time-bound. Set a timeframe for the goal. When and how often?

.....
.....
.....

Reinforcement. How will you acknowledge your change or celebrate yourself?

.....
.....
.....

Who will support you with this? (Remember, different people can be supportive with different changes.)

Name:

E-mail:

Phone:

Reinforcement ideas

Try to make your reward something health enhancing like:

- Massage or reflexology
- Inspirational book/CD
- Special tea or juice
- Motivational movie/play
- Bath salts or an aromatherapy candle
- Yoga or meditation class
- Schedule downtime

Goal-setting worksheet — professional wellness

Feel free to write down your responses to these questions now or reflect upon and journal about them later.

1. Does your job satisfy you? Describe.
2. Does your role enable you to use your strengths and talents? Describe.
3. What inhibits your growth and satisfaction at work?
4. Describe your positive working relationships.
5. Describe your negative working relationships.
6. Does your job help you to feel valued and respected? Describe.

Use the below chart to identify those behaviors, and then rate your readiness to change using a scale of 1 to 5.

.....
1 = Haven't even thought of changing
2 = Have given it some thought
3 = Have started preparing to change (have looked up information about it, talked with others about it, etc.)
4 = Am already taking some action to change in this area
5 = Have already made the change and want to help maintain my progress

.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....

What behaviors, if any, related to your professional wellness do you want to change?	Rate your readiness to change: 1-5	Comments
.....		
.....		
.....		
.....		
.....		
.....		

Now, let's set a S.M.M.A.R.T.R. Goal!

Specific. Define what you will do.

.....
.....
.....

Measurable. How will you know that you've reached your goal?

.....
.....
.....

Mindful. How did making this change affect you?

.....
.....
.....

Accountable. Do you want to check in with your coach or make notes on your own?

.....
.....
.....

Realistic. Make your goal a slight stretch. It must be within reach.

.....
.....
.....

Time-bound. Set a timeframe for the goal. When and how often?

.....
.....
.....

Reinforcement. How will you acknowledge your change or celebrate yourself?

.....
.....
.....

Who will support you with this? (Remember, different people can be supportive with different changes.)

Name:

E-mail:

Phone:

Reinforcement ideas

Try to make your reward something health enhancing like:

- Massage or reflexology
- Inspirational book/CD
- Special tea or juice
- Motivational movie/play
- Bath salts or an aromatherapy candle
- Yoga or meditation class
- Schedule downtime

Tobacco habits reflection

1. What are some of the benefits of smoking or using tobacco?

.....
.....
.....
.....

2. What are some of the negatives of smoking or using tobacco?

.....
.....
.....
.....

3. What healthier habits can you see yourself substituting for cigarettes?

.....
.....
.....
.....

Potential strategies to manage triggers:

- Take a walk
- Call a friend
- Organize a drawer
- Eat a healthy snack
- Write a thank you note
- Breathe in and out
- Drink a glass of water
- Read a few pages from your favorite book
- Journal your thoughts and feelings
- Add up how much \$ you saved this week by not smoking/chewing

Below are some situations that cause some people to smoke. Do any apply to you? If so, circle them and then identify the top three.

- Getting up the morning
- Negative emotions/bad mood
- Drinking coffee
- Need to concentrate
- Socializing
- Around others who smoke
- Talking on the phone
- Driving the car
- Boredom
- Drinking alcohol
- Need to relax
- Celebrating
- Taking breaks at work
- Feeling more energized

1. What, if any, strategy will you use to help or manage these triggers?

2. What will you do to get past the urge to smoke (about 5 minutes)?

.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....

Quitting tobacco journal

What time did you have a craving/urge?	What triggered the craving/urge?	What feelings/thoughts/sensations did you notice while this was happening?	What did you do to manage through the craving/urge?	How did you feel about yourself after you used this strategy?
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				
Saturday				
Sunday				

What insight did you gain as a result of observing these behaviors this week?
 What did you learn about yourself? How did you congratulate yourself for taking time to do this?

Smoking journal

Day	What time did you smoke?	How many cigarettes did you smoke?	What was your stress level before and after smoking?	What moods, feelings or thoughts did you notice before, while and after you smoked?	What situation triggered the urge to smoke?
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Saturday					
Sunday					

What insight did you gain as a result of observing these behaviors this week?
 What did you learn about yourself?

Nicotine replacement therapy (NRT) journal

Time of craving or bad feeling:	What was your stressor?	What was your coping strategy?	What sensations/thoughts/feelings did you notice?	How did you congratulate yourself?
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				
Saturday				
Sunday				

**What insight did you gain as a result of observing these behaviors this week?
What did you learn about yourself?**

Only your doctor can diagnose, prescribe or give medical advice. The Aetna Healthy Lifestyle Coaching program only provides information and certain support services. Contact your doctor first with any questions or concerns regarding your health care needs.



Hunger and fullness experiments

Hunger:

1. How do you know when you are hungry? What are your hunger cues?
 - Physical
 - Emotional
2. Before eating, use the breath to relax.
3. Focus on your body and how you experience hunger.
4. Rate your hunger on a scale of 1-10, with 1 being not hungry at all and 10 being ravenous.
5. Rate your hunger 5 and 10 minutes into your meal. Become aware of sensations in your stomach.

Fullness:

Asking yourself these questions will help you tune into how full you are:

- How does my stomach feel?
- Can I feel the food? Is there any discomfort or pain?
- Does my stomach feel stretched, bloated or full?
- How does my body feel?
- Do I feel content and comfortable?
- Do my clothes feel tight?
- Is there nausea or heartburn?
- Do I feel short of breath?
- How is my energy level?
- Do I feel energetic and ready for the next activity?
- Am I sleepy, lethargic, tired or sluggish?
- What do I feel like doing right now?

Eating meditation

An introduction to mindfulness

This activity will provide an introduction to mindfulness meditation. Mindfulness is a skill that will enable you to be successful in living your healthiest life. For this activity, you will need to choose a food.

What do you see? Describe the shape and color of the food.

Touch it. What does it feel like?

Bring it to your ear. What do you hear?

Smell it. What do you smell?

What's happening in your mouth?

Now, put the food into your mouth, but don't bite it. Just move it around in your mouth.

Now take one bite. Notice what's happening.

Take another. And another.

Slowly chew the food but don't swallow it.

When you think you're done chewing, chew it 10 more times.

Then swallow it.

Sit. Breathe. Notice.

So how was that experience for you? What did you notice?

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

Try

So this week, try eating a snack or a meal mindfully. Sit at a table without watching TV or texting. Just eat and be aware of the experience of eating. You may notice how this changes your experience with eating as well as your relationship with food.

Beverages journal

Weekday	What did you drink?	Time?	How was your energy level before and after drinking?	What moods, feelings or thoughts did you notice before, while and after drinking?	What were the circumstances for drinking: alone or with others?
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Saturday					
Sunday					

What insight did you gain as a result of observing these behaviors this week?
What did you learn about yourself?

Eating journal

Weekday	What did you eat?	Time?	What was your energy level before and after eating?	What moods, feelings or thoughts did you notice before, while and after you ate?	What were the circumstances for eating – alone or with others?
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Saturday					
Sunday					

What insight did you gain as a result of observing these behaviors this week?
What did you learn about yourself?

Stressors and copers

In column A, list all the stressors in your life. In column B, list all the ways you cope with stress (positive and negative).

Stressors	Copers
<p>.....</p>	<p>.....</p>

Take a look at your “stressors.” Put a “C” next to each of these stressors you have control of. Put an “NC” next to those stressors you have no control of.

How much of your time do you spend thinking or worrying about stressors you have no control of?

Please note any behaviors you want to change, and then rate your readiness to make changes for each of these identified behaviors.

What behaviors, if any, would you like to change related to your social wellness?

Use the below chart to identify those behaviors, and then rate your readiness to change using a scale of 1 to 5.

-
- 1 = Haven't even thought of changing
 - 2 = Have given it some thought
 - 3 = Have started preparing to change (have looked up information about it, talked with others about it, etc.)
 - 4 = Am already taking some action to change in this area
 - 5 = Have already made the change and want to help maintain my progress

What behaviors, if any, related to reducing your stress level do you want to change?	Rate your readiness to change: 1-5	Comments
<p>.....</p>	<p>.....</p>	<p>.....</p>

Now, let's set a S.M.M.A.R.T.R. goal!

Specific. Define what you will do.

.....
.....
.....

Measurable. How will you know that you've reached your goal?

.....
.....
.....

Mindful. How did making this change affect you?

.....
.....
.....

Accountable. Do you want to check in with your coach or make notes on your own?

.....
.....
.....

Realistic. Make your goal a slight stretch. It must be within reach.

.....
.....
.....

Time-bound. Set a timeframe for the goal. When and how often?

.....
.....
.....

Reinforcement. How will you acknowledge your change or celebrate yourself?

.....
.....
.....

Who will support you with this? (Remember, different people can be supportive with different changes.)

Name:

E-mail:

Phone:

Reinforcement ideas

Try to make your reward something health enhancing like:

- Massage or reflexology
- Inspirational book/CD
- Special tea or juice
- Motivational movie/play
- Bath salts or an aromatherapy candle
- Vitamins or herbal supplements
- Yoga or meditation class
- Schedule downtime

Sleep journal

Weekday	What time did you go to bed?	How long did you sleep?	What were you doing two hours before going to bed?	What kept you from sleeping?	What helped you to sleep?
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Saturday					
Sunday					

What insight did you gain as a result of observing these behaviors this week?
What did you learn about yourself?

My relaxing bedtime routine

Currently I get about __ hours of sleep each night. My goal is to get __ hours of sleep. I am aware of the following things that might be keeping me from sleeping soundly. Check all that apply:

- I drink liquids after 6 p.m. and wake up and have to go to the bathroom
- I don't get enough fresh air and sunshine during the day
- I drink caffeinated beverages
- I smoke or use tobacco, especially in the evening
- I nap during the day, often close to bedtime
- I drink alcohol before bedtime
- I eat big meals before bedtime
- I don't have a regular bedtime or waking time

My current bedtime routine is as follows: I go to bed at : __

Check all that apply:

- I watch TV program
- I surf the internet
- I read
- I talk on the phone
- I exercise or do house chores

My current bedtime routine affects me in the following way:

- I feel agitated and worried
- I feel relaxed and calm

Create your ideal bedtime routine:

You'll want to experiment to learn what works for you. Here are some ideas for things you can do to relax at night; take a bath, have a cup of decaffeinated tea, eat a healthy snack, read a book for pleasure, meditate or pray, do yoga or stretch, watch a calming program, journal.

I will go to bed at ____ (time)

I will start winding down by ____ (time)

During this time I will:

.....
.....
.....

In addition, I will create a bedroom that helps me sleep better. Check what you are willing to do now:

- Using my bedroom only for sleeping and sex
- Moving the TV, radio, and computer out of my bedroom
- Keeping my bedroom quiet, dark, and cool

Communications journal

Weekday	Describe the communication: With whom? Content?	What did the other person want? What did they actually get?	What were you hoping for? What did you actually get?	How did you feel before, during and after this event?	Has the issue been resolved? If so, how?
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Saturday					
Sunday					

What insight did you gain as a result of observing these behaviors this week?
What did you learn about yourself?



“I-statements”

What are they?

- Use to reduce stress and resolve conflict
- Use when you want to improve your social and/or emotional wellness

Here’s an example:

1. I feel frustrated when you keep the television on until midnight because it keeps me from getting enough sleep and I wake up too exhausted to go for my morning walk.
2. I feel angry when you ask me to cook dinners that are high in fat because I’m trying to lose weight and I need your support.
3. I feel sad when you work late every night because we end up having so little family time.

Is there anyone you would like to practice “I statements” with this week?

.....

.....

.....

.....

How, if at all, did using this skill improve the situation?

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....



Creating your own home exercise plan

When you think about exercise, you might consider these activities:

- Walking the dog
- Dancing
- Playing tennis
- Yoga
- Gardening
- Swimming
- Strength training
- Hiking
- Running
- Snowshoeing
- Yard work
- Martial arts

What else do you think of?

.....
.....

You realize that you don't need to be a fitness buff to do exercise at home, you just need to:

.....
.....

Doing exercise at home will help you feel:

.....
.....

As you take another step along your path to wellness, you can design a home exercise plan that fits into your life. You get to choose what, when, where, how often and for how long you exercise/move. And you can adjust your plan based on whatever is happening in your life that week.

.....
.....

My plan is to exercise:

- 1) To exercise ___ X per week at home and ___ X with a friend or in a class.
- 2) A good time of day is _____ or _____.
- 3) A good place to set up my exercise space is _____.
- 4) I need to get (depends on what type):
- 5) On an average day, I can spend from ___ to ___ minutes doing exercise.
- 6) I like the idea of using an exercise/music CD or DVD. Yes __ No __
- 7) Better days are:
Mon: a.m./p.m. Tues: a.m./p.m. Wed: a.m./p.m. Thurs: a.m./p.m.
Fri: a.m./p.m. Sat: a.m./p.m. Sun: a.m./p.m.

What is mindful exercise?

We have learned to exercise in distraction, doing anything possible to get through a workout. The more you pay attention to your body, the better you will be able to tend to your needs and exercise injury free. You will know when to increase or decrease the intensity so that you're pushing according to what the body wants to do rather than what the mind thinks the body should be doing during a workout.

Mindfulness can be part of any exercise experience. It doesn't matter whether you are in a yoga class, on a bench press or cycling down the road. It's not "what" you do, but "how" you do it. Awareness of the breath, thoughts, feelings, sensations and surroundings are foundational to a mindfulness practice. There is no particular way you should breathe; rather it's about noticing that you are breathing.

Once you remove the headphones or turn off the TV, you'll notice thoughts going through the mind. You'll become aware of feelings that are present. Bringing mindfulness into the exercise experience will give you an opportunity to create a space to stop, notice what's happening within and around you, and then move into the next moment with more consciousness.

Here are a few ways you can practice mindfulness:

1. Try a mindful workout once per week, or practice mindfulness during some portion of your workouts regularly.
2. When your mind gets busy, notice whatever the thought is, let it go and then bring your attention back to the breath and the muscles being used.
3. When you notice a strong feeling (anger, sadness, frustration) acknowledge it, be with it for a few breaths and then bring your attention back to the movement.
4. Honor the capabilities of the body as they are in the present moment. If you're tired or not well, go easy on the body. When you have the energy, go for it.
5. Rather than judging your body, appreciate it.
6. Avoid striving. Progress with your workouts slowly and respectfully.
7. Work towards a higher level of fitness with patience.
8. Accept the state of your body as it is now. It's impermanent.

Write down your experience

.....
.....
.....
.....



Exercise journal

Weekday	What type of movement, physical activity or exercise did you do?	How long?	At what intensity? Light, Moderate, or Heavy	How did your body feel before, during and after?	What moods, feelings or thoughts did you notice before, during and after?
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Saturday					
Sunday					

What insight did you gain as a result of observing these behaviors this week?
What did you learn about yourself?

My plan for sustaining change

It's important to remember that most people need more than one attempt to make any kind of lifestyle change. To be successful, we often need to budget more time, money, and energy. We must be prepared for complications since we all know how "life happens." It's important to remember that by making small changes over time we can live a happier, healthier life. So think cumulatively! Be aware of what caused you to stray from your path to wellness. Often times it's a stressor. During this time the priority will be on reducing your stress level. Once you feel stabilized, you will be able to get back to some of your other healthy behaviors.

You can set up a relapse prevention plan. Here are some examples. Write your own in the space provided below.

When I work late, I do not prepare healthy food for dinner.	I can be successful with healthy eating if I go grocery shopping on a regular basis.
When I do not go grocery shopping on a regular basis, I eat fast foods.	I can eat a healthy dinner even when I work late if I keep it simple.
Skipping meals makes me overeat at dinnertime.	I bring a snack bag with me to work so that I'm not starving at dinnertime.
When I do not assert myself, I become angry and engage in emotional eating.	I communicate my needs and feelings to others and no longer gain satisfaction from emotional eating.
When I do not use stress management skills, I tend to engage in stress eating.	I manage my stress skillfully and find healthy ways to relax instead of engaging in stress eating.

Autobiography in Five Chapters by Portia Nelson

Chapter One:

I walk down the street. There is a deep hole in the sidewalk. I fall in. I am lost ... I am hopeless. It isn't my fault. It takes forever to find a way out.

Chapter Two:

I walk down the same street. There is a deep hole in the sidewalk. I pretend I don't see it. I fall in again. I can't believe I'm in the same place. But it isn't my fault. It still takes a long time to get out.

Chapter Three:

I walk down the same street. There is a deep hole in the sidewalk. I see it there. I still fall in ... it's a habit. My eyes are wide open. I know where I am. It is my fault. I get out immediately.

Chapter Four:

I walk down the same street. There is a deep hole in the sidewalk. I walk around it.

Chapter Five:

I walk down another street.

Notes:

A series of horizontal dotted lines for note-taking on the left side of the page.

A series of horizontal dotted lines for note-taking on the right side of the page.

Health information programs provide general health information and are not a substitute for diagnosis or treatment by a physician or other health care professional. Information is believed to be accurate as of the production date; however, it is subject to change. For more information about Aetna plans, refer to www.aetna.com.

www.aetna.com

©2012 Aetna Inc.
45.05.302.1 (10/12)

aetnaSM