Class #2: The ABC Model

Class #2: The ABC Model and Identification of Unhelpful Thoughts

What We Will Cover in Class #2:

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<td>1. Review Homework From Class #1</td>
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<td>A. Relaxation Diary</td>
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<td>2. Mini-Lecture: Coping with and Unchangeable Situation</td>
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<td>3. Mini-Lecture and Discussion: An Explanation of the ABC Approach to Coping: Actions-Beliefs-Consequences</td>
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<td>4. Steps for Managing Frustration: Begin by Identifying Unhelpful Thoughts</td>
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<td>5. Refreshment Break</td>
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<td>6. Mini-Lecture and Discussion: Six Unhelpful Ways to Thinking Common Among Caregivers</td>
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<td>7. Relaxation Rating and Practice</td>
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<td>8. Homework for the Next Class</td>
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<td>9. Summary of Class #2</td>
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Total Time=120 min.
1. REVIEW HOMEWORK

A. Relaxation Diary: Please be prepared to share both your actual homework and your experiences completing the assignment from last week. We will go around the group and ask each person to talk about their homework.

STOP!

Leaders: As participants relate their experiences be alert for obstacles like not setting aside time for the exercise, being unable to locate the form, resentful at having to do the exercise and the rating every day, “too stressed” to bother, etc. Try to problem solve with each person, so that they understand the importance of practicing between classes, and have concrete suggestions for how to work this into their busy daily life.

* Be sure to praise all homework attempts and be sure to ask each person about their experiences.

* Attempt to clarify any questions regarding the homework because this will be an ongoing exercise.
2. MINI-LECTURE: COPING WITH AN UNCHANGEABLE SITUATION

There are three possible responses to a stress provoking situation:

1. assertively change the situation.

2. leave the situation.

3. adapt yourself so that you can live with the situation and not feel so frustrated.

All of these options are appropriate and useful in many caregiving situations. In later sessions, we will discuss techniques for increasing assertiveness (#1) and talk about when being assertive can be helpful.

Leaving a situation (#2) and taking time out for yourself is an option that many people choose. The option we will be focusing on today, however, will be to look at ways to adapt to situations and reduce feelings of frustration and anger (#3). In order to do this, we need to teach you a model or way of looking at frustrating situations that we have found helpful with other caregivers in our past work.

3. THE “ABC” ACTION-BELIEF-CONSEQUENCES MODEL

To begin to be able to adapt to a frustrating situation, we must first understand some basic ideas about our feelings and what influences how we feel. There is evidence that shows that our feelings are linked to our thoughts. The way we think about a situation often directly affects the way we feel about it. Often when people get angry, their emotional state is so overwhelming that they do not notice the thoughts they are having. These thoughts are typically very extreme and negatively biased; they tend to perpetuate the state of anger.

The Action-Belief-Consequences Model or the A-B-C Model describes the relationship between an event, our thoughts or interpretation of the event, and the way we feel
about it. When an event occurs, we evaluate it in a particular way. We may take the event personally, or we may see it as failing to meet our expectations. This particular way of interpreting the event may lead to certain consequences or feelings such as disappointment or anger. We may also evaluate an event with a positive perspective, see it as rising far beyond our expectations. This interpretation of the event is likely to lead to feelings of pleasure or success. Let us take a few moments to fully illustrate the A-B-C Model by reviewing the following example:

Lydia is providing care for her husband David, who has Alzheimer’s disease. Although David can still take care of his own basic needs, he can’t follow any of Lydia’s instructions on how to become better at helping himself. Lydia’s thoughts are:

“David refuses to listen to me, even though he is able to. David is working against me and is purposely not following my suggestions.” “David doesn’t appreciate me as his caregiver. He doesn’t appreciate all that I’m doing for him.”

STOP!

Leaders: Encourage participation now by asking the following questions.

In this example:

What is the situation (or action) that causes Lydia’s frustration?:

What are the thoughts (or beliefs) Lydia is having about this action?

What are the emotional feelings (or consequences) that Lydia is experiencing?

Leaders: Encourage caregivers to speak up and share their ideas. Also, use this opportunity to gently “correct” any wrong answers and clarify what the situation is, what are the thoughts, and what are the feelings being described in the example given.
4. THREE STEPS FOR MANAGING FRUSTRATION AND ANGER

The first step to managing anger is to recognize the thoughts that fuel it.

The second step to managing anger is to evaluate our thoughts and attempt to see an event from different angles.

The third step is to change the thoughts: develop more helpful or adaptive thoughts that promote coping rather than anger.

We will focus on Steps 2 and 3 later in the class; for now, we just want you to become familiar with your particular unhelpful thinking patterns that fuel your frustration and anger toward the relative you are caring for. In your homework, you will learn more about this for next time.

STOP!

Leaders: Ask for an example from a volunteer to illustrate how the ABC model works in their daily life. The goal is to complete at least one example for the whole group to see. Take about 10 minutes for this exercise. Next, ask each person to take a few moments to fill out the form on the next page, and go around the group to provide assistance as needed. Encourage them to think of a specific example and fill in the A-B-C columns. Allow 10 minutes for this exercise.
# ABC: DIARY OF THOUGHTS
(in class use)

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6. MINI-LECTURE AND DISCUSSION: SIX UNHELPFUL WAYS OF THINKING COMMON AMONG CAREGIVERS

Now we will focus on a few types of thought patterns that seem to keep us “stuck”, or lead us to feel more distressed and upset. These thought patterns are not always wrong or right, but when in a particular caregiving situation they may not be helpful to us in pursuing what we seek to accomplish.

Let us review and discuss the following six helpful thought patterns to see how common they are in your daily life. Remember, this is the first step to beginning to change your way of thinking, so that you feel less distressed in your caregiving role.

1. Thinking in “All or Nothing” Terms

This thought pattern refers to the tendency to perceive things as either all good or all bad. When we judge ourselves or others according to perfectionist standards, we are thinking in terms of “all or nothing.” An example would be a person who makes a mistake and then concludes that he/she cannot do anything right.

Examples:
“I can’t do anything right.”
“I can’t satisfy anyone.”

2. Mental Filtering

Mental filtering is when a person filters out all the positive things in his/her life to the extent that he/she focuses on the negative things. A caregiver may be using a mental filter when he/she becomes preoccupied with one problem behavior and ignores any positive aspects of caregiving.

A. Over generalizing-

When people generalize too much, they conclude that one event reflects the way things will always be. For example, a caregiver may have a relative who is critical of the care the caregiver is providing. The caregiver may then conclude that “no one will ever understand how difficult the situation is.”
Examples:
“My mom’s accusing me of stealing from her. She’s never trusted me, or anyone else.”

B. Exaggerating or Reducing the Significance of Events.

This mental error can go in two directions: either you exaggerate your negative qualities, or you minimize your positive qualities.

Examples:
“Well, sure, I’m good with plants, but anyone can take care of plants.”
“How can I ever take care of the household finances when I can’t even balance my own checkbook?”

C. Discounting the Positive

We tend to minimize compliments we receive from others. Instead of accepting and affirming a compliment from someone, caregivers may say to themselves, “Well I could be doing more,” or “I don’t like what I’m doing so I don’t deserve compliments.”

Example:
“We had a great morning, but it’ll never happen again.”

3. Jumping to Conclusions

This thought pattern is when you reach a negative conclusion without having all the facts about a situation. There are two common situations in which this occurs:

A. Mind Reading:
Someone makes an assumption about what the other person is thinking.

Example:
“David said he would care for Dad today, I think he just said that to get me off the phone.”

B. Predicting the Future
A person makes assumptions that negative things are going to happen to him/ or her, or that people will respond to him/ or her in a negative way. A person may imagine that a future doctor visit will not go well. He/ or She will worry about this future possibility, taking him/ or her attention away from enjoying the present time.

Example:
“If I give him a bath, he’ll just fall down and hurt himself.”
4. Thinking “I Should”

The problem with saying “I should” is that the statement has more to do with opinions than with the reality of a situation. We usually say “you should” to others when we think we know what is best for them. This can often make us feel frustrated when the other person disagrees with us. By saying “I should” to ourselves, we can end up feeling depressed and angry, because what we are saying we “should do” is not what we really want in our hearts. Instead, it tends to be something that a critic in our life, such as a spouse, a parent, or a child in our life wants.

Example:
“I should not even consider putting Mom in a nursing home. I must carry on.”

5. Labeling

This is an extreme form of generalization. Instead of seeing our faults as only one part of our otherwise good features, we single them out as a reflection of our entire selves. For example, you may act impatient in caring for your sick family member, and then conclude that you are an impatient person, or “stupid” or “no good.”

Example:
“I’m a bad daughter because I’m selfish. I want to go out and have a good time but I have to stay at home.”

6. Personalizing

Personalizing is when a person may assume responsibility for a negative event when she is not to blame. A caregiver may feel embarrassed by something her frail relative says to someone, as if the sick person’s behavior were a reflection of her abilities as a caregiver and not just a symptom of the illness.

Example:
“If I hadn’t left town for two days, my father would not have fallen down and broken his lap.”

STOP!

Leaders: Go around the room and ask the members of the group: “Can you think of examples of when these thought patterns affect your everyday life?” Allow about 10-15 minutes for this exercise and try to get everyone to participate. Encourage caregivers to mark up the book or take notes so that they can personalize this information.
Please Use This Space for Taking Notes About Your Unhelpful Thinking Patterns
7. RELAXATION EXERCISE

Make yourself as comfortable as possible. First, I’d like you to remove any objects from your lap and place your feet on the floor. Place your hands on your thighs. Don’t cross your legs or your arms. Close your eyes so you can’t see the light or other people and so you won’t be distracted by what’s going on around you.

Now breathe deeply, and imagine that you are in an empty vase that you have to fill up to the rim with air. Inhale deeply again, and exhale ... while you’re exhaling say the word “Amen” or “calm” silently to yourself ... continue breathing as deeply as possible ... always filling up the bottom of your lungs and then exhaling ...

Right now, notice where your body is most tense. Make yourself as comfortable as possible. Relax the tension in your neck, shoulders, arms, back, legs and feet ... Keep breathing deeply and exhale, saying to yourself the work that you’ve chosen.

Now imagine that you’re searching for the most safe and peaceful place that you know ... Are you searching for it indoors or outdoors? When you find it, look at it closely. What is it like? Use all of your senses to enjoy it as much as possible.

What’s around you? What colors do you see? What smells do you notice? What sounds do you hear? Do you hear the chirping of birds? Or are you on the beach and hear the calls of the seagulls and the crashing of the waves? Or maybe you’re listening to the pleasant sound of a river’s current.

Can you make out the breeze moving through the branches of the trees? ... Perhaps you’re listening to the silence of a mountain peak. Pay attention to the colors. Are they bright? ... The sounds, are they loud or soft? ... What sensations do you feel? Is it warm out or do you feel cold? ... Do you like being here alone? Look closely at your place, enjoy it, you are in peace.

Enjoy for a few moments the experience of being in your peaceful place.

Soon I am going to ask you to come back from your peaceful place, knowing that you can always go back to this place just by closing your eyes ... and by breathing deeply three times ...

Slowly leave your place and focus all of you attention on your breathing.

Little by little you will leave your place, and tell yourself that you can always return to this place just by closing your eyes and breathing deeply three times. I’m, going to count from 5 to 1, and when I reach 1, I’ll ask you to come back to the classroom ....

5 ... 4 ... 3 ... 2 ... and 1. Open your eyes and come back to the classroom.
RELAXATION DIARY: TENSION EVALUATION

In-Class Practice Rating:

1. First, write the number that represents your current tension level.

   Before the relaxation exercise, I feel
   ___________ (rate your tension from 1 to 5)

2. Now, we will conduct a brief relaxation technique that will last about 5 minutes.

3. Finally, evaluate your tension level after you have practiced the relaxation technique.

   After the relaxation exercise, I feel
   ___________ (rate your tension from 1 to 5)

Use This Scale to Rate Your Level of Tension

1 = Not at all tense
2 = Slightly tense
3 = Moderately tense
4 = Really tense
5 = Terribly tense
8. HOMEWORK TO DO BEFORE CLASS # 3

1. **Relaxation Diary.** Please complete the daily relaxation practice and evaluation.

2. **ABC: Diary of Thoughts.** Select a particular situation that during this week has caused you as a caregiver to feel frustrated and angry. Write down all the negative thoughts that have occurred to you as a result of what has happened. Be prepared to share these thoughts at the next meeting. Use the ABC: Diary of Thoughts and complete it, writing down the situation, your thoughts and your feelings. Please try to identify the particular unhelpful thinking pattern(s), that were reflected in your thoughts. We want you to do at least one example, and we’d encourage you to do more then that if you have time. **An additional copy of the ABC: Diary of Thoughts is located in the Appendix B for more practice.**
# RELAXATION DIARY: TENSION EVALUATION

Use This Scale to Rate Your Level of Tension

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IDENTIFY THE UNHELPFUL THINKING PATTERNS
9. SUMMARY OF CLASS #2

In this class we were introduced to a model, or way of thinking, for managing feelings of anger and frustration. The Actions/ Beliefs/ Consequences Model (ABC Model) helps us to adapt ourselves to a situation that cannot change. In this manner, we can learn to prevent feeling frustrated and angry by responding differently when confronted with situations that will not change.

The steps of ABC Model are:

1. Identify the Action or situation that is creating or fueling feelings of anger and frustration.

2. Identify your Beliefs or thoughts about the situation.

3. Identify the Consequences or feelings that result from the situation and your beliefs about it.

A “Thought Diary” was introduced as a form for completing the ABC Model when we are confronted with situations that produce feelings of anger or frustration.