

CURRICULUM

Session 1

Session focus: Introduction, illustrated concepts, energy balance and rationale, regular planned meals, self-monitoring, set initial activity goal.

At the end of this session, the participants will:

1. Feel comfortable in the group and know the names of staff and other participants.
2. Describe the group activities and general focus of the program.
3. Begin daily planned exercise.
4. Begin to establish a pattern of regular eating.
5. Begin self-monitoring.

1. Introduction (30 min)

Welcome (3 min): Introduce the group leaders, their qualifications and related experiences. The program is based on the involvement of an expert collaborative team with experience in behavior change and in helping people make change.

Acknowledge anxiety: "I find that starting a new group is really exciting for me, but I am also anxious as well." Acknowledge similarities: "Everyone here has some commonalities."

Introduction of participants (20-30 min): Go around the room and let each participant introduce herself (limit each participant to 1-2 min). State: "We will have lots of opportunities to share more about ourselves throughout the group sessions ahead."

2. Program overview (5 min)

Refer to Welcome to the ENERGY Trial in the participant book and study contact information. Explain: it is important to keep positive thinking and remember why you joined this study to keep you motivated. Please devote a couple of minutes at home to complete the "Positive thinking" section in the participant book (page 9).

Refer to the participant book "program overview" (page 3 and page 7). Briefly introduce the group focus and purpose (expectations for group sessions participant book page 8): This is **not** a diet program or a support group. This is a working group program that teaches healthy weight management for breast cancer survivors. Behaviors and attitudes that are encountered in weight management by women in the general population and those specific to breast cancer survivors are addressed. A major focus of this program is adopting and maintaining increased physical activity; this is a key component of healthy long-term weight management. Another topic addressed is healthy eating patterns. Many breast cancer survivors, and women in general, who are concerned about body weight have many misconceptions about what they should eat, and weight control myths are common. We will be discussing strategies for making food choices that will promote a long-term healthy eating pattern that may make it easier to keep your weight under control, while still feeling satisfied with meals. We will also focus on

developing good attitudes about food and body shape and weight, as compared with negative self-image or bad feelings about eating and weight, which may also help to promote better weight management. Issues related to body image that are specific to survivors of breast cancer will be given particular attention in this program. Overall, this program aims to promote healthy attitudes about body weight and shape by exploring the source of these attitudes and feelings and by challenging them with facts and alternative thinking patterns.

The core strategies that are applied in this program to promote the adoption and maintenance of healthy eating and exercise behaviors and attitudes focus on both behavior and thinking patterns that affect behavior. This approach was originally developed and tested with people – who were overweight women and/or chronic dieters – who had an established pattern of behavior that is very resistant to change. This is an approach that involves planning, monitoring, and problem-solving difficult attitudes and behaviors. The first five weeks of the program will focus on behaviors, and then work to address thinking patterns will become an additional focus in the remaining sessions.

Review Sessions Topics (page 3). Distribute specific group schedule.

Group norms: Refer to “expectation for group sessions” of the participant book and specific group schedule (pages 3 and 8). Explain group norms and expectations (5 min).

Group dates and times: Participants will meet weekly at the same time for 16 weeks, biweekly for 4 weeks, and once every month until the end of the first year of the study (6 monthly sessions). Direct participants to their schedule/calendar. Sessions will last up to 90 minutes, including time to weigh in. The meeting will start on time and end on time. We expect punctuality and attendance (although we expect that nearly everyone will have to miss a session now and then).

Session structure: Each session will consist of several components:

- * Review of past week’s activity and homework
- * New topic introduction and discussion
- * Activities
- * Homework assignments (Skill Builders).

During the last few minutes of each session, we will have a wrap-up of the discussion and the group session that day.

Indicate that sometimes the group will need to move on after time is spent on a single individual’s problem. Explain the rationale for this (i.e. limited time, number of members in the group, allowing everyone to get a chance to be heard) and how you will indicate this (e.g., “ we have to move on now”). We will focus on skill development, support, education, and problem-solving as it pertains to health and weight control. Emotional factors may serve as triggers to unhealthy behaviors but the focus will be on healthy alternatives rather than resolving emotional difficulties.

Participants are expected to attend each week or inform the group leaders that they are not

coming. Attendance is very important; it correlates with success in previous studies using this approach. The more effort put into the program, the greater are the benefits. Participants are expected to be on time, complete their assignments and bring their notebook to meetings.

Participation is important. One helpful aspect of group treatment is that participants can learn from one another in addition to learning from the curriculum and the group leaders. Ask questions when any information is not clear. We ask that you raise your hand when you want to contribute to the discussion.

Refer to “guidelines for how to act during group sessions” (page 8). Confidentiality: All information shared is confidential and will not be discussed outside of the group. Some of the topics we will discuss might be sensitive, so it is important to know that the group and staff expect mutual trust and respect and that the environment is safe for these discussions. Contact with one another outside of the group during the program is permissible. However, you will take the responsibility of deciding on that contact and sharing your contact information.

For questions and issues that cannot be immediately managed by the teaching team on that day, we will collect “ask the expert” questions that may arise (those beyond the knowledge level of the group leaders) for the appropriate project investigators or other resources.

An important basic concept in a program of this type is that we are all working together on a common goal. Rather than being passively prescribed exercise or a strict diet, you will choose the specific goals and behaviors in your life, based on your own situation, preferences, and challenges. **Try it/apply it:** Try to be open to options, even ideas and approaches to exercise, activities, and behavior that may at first seem inappropriate or unachievable. In general, the major program topics will be introduced and then followed and enriched throughout the sessions.

4. Expectations (10 min)

What are their expectations? (Discussion) For most women, both dreams (“I want to lose weight!”) and nightmares (“Not another diet program!”) arise when addressing weight management. Also, lapses are expected to occur. It is okay to have them and okay to talk about them. This is the arena in which trouble-shooting and problem-solving can take place.

This program is scientific and evidence-based. Studies have shown that this type of approach causes an average weight loss of 5-10% during the initial period, with maintenance or continued weight loss thereafter. Successful (maintained) weight loss is a step-wise process. The level of weight loss that you can achieve in the initial period has been shown to significantly improve metabolic factors and may reduce risk of chronic diseases and cancer recurrence. However, you will get out of the treatment what you put into it – just coming to the group sessions is not the treatment. Behavior change is hard, and it requires real effort on your part. You should expect success – the strategies used in this program have been shown to be remarkably successful in other women and in other settings. Keep in mind that a key aspect of any weight management program is relapse prevention. Even the most successful of you will experience slips, or set goals that are not achieved, from time to time. We will work with you to identify

situations that are more likely to trigger lapses and help you develop strategies to keep them from causing you to fall back into previous behavior patterns.

An important concept that we will address as the weeks progress is that the skills and process for weight loss are different from those for weight maintenance. As time goes on, we will be moving toward learning skills for weight maintenance, and this process will be facilitated by the issues and ideas that are raised throughout the program. Although most weight loss interventions can promote weight loss, they often fail to teach much about weight maintenance, while that is a rather unique feature of this program.

5. Introduce primary group topics and focus (10 min)

Overweight and obesity: What are the key biological facts?

For breast cancer survivors, being overweight appears to have a significant adverse effect on risk for recurrence and overall survival in the long term. Numerous studies have followed breast cancer survivors after diagnosis, and the majority of those studies found that women who were overweight had an increased risk of death during the years under examination compared to women who were not overweight. Further, it appears that one of the major reasons why many women gain weight after diagnosis and treatment, and perhaps why breast cancer survivors can have a difficult time losing weight, is because of loss of lean body mass. Lean body mass (muscle tissue) is the part of your body that burns the most calories, even when sleeping, so your total energy expenditure is lower in association with less lean mass. Thus, exercise is particularly important for the breast cancer survivor, because it will enable you to eat a reasonable amount of food and still lose weight. Exercise has been shown to restore muscle tissue in women at any age. You can restore or increase lean body mass through regular exercise that involves the major muscle groups (cardiovascular or aerobic exercise), combined with strength training (exercising with weights or resistance). Increased activity has both short-term (daily energy expenditure) and long-term (increased lean muscle mass, which is the major factor accounting for basal metabolic energy expenditure) effects on weight loss and weight loss maintenance. Also, regular, moderate exercise independently has been observed to reduce the risk for recurrence in women who have been diagnosed with breast cancer.

Refer to participant book “aim for a healthy weight” (pages 10-11). Ask participants to find where they are on the table. In order to be eligible for the study your weight would have to be in the “risky” or “dangerous” zone. We will work with you to help you lose weight towards a “healthy weight.”

How can we lose weight? Refer to “what is a calorie” in the participant notebook (page 12). Discuss the energy balance, indicating how the exercise and dietary intake components in this program relate to the big picture.

Causing an energy imbalance is the goal for promoting weight loss. In general, eating 500-1000 kcal/day less than what you are expending will promote a healthy rate of weight loss. For most women, this translates into a total intake of 1200-1800 kcal/day, although many active women can readily lose weight when eating more than that. How you choose to assemble your calories

is best determined individually, based on your daily patterns and preferences. For many women, the immediate goal is to establish a regular pattern of eating. There is a relationship between dieting and overeating, so overly strict dieting behavior is discouraged. With planning and other strategies we will be discussing, it is feasible to eat a satisfying combination of foods and still lose weight. At this point, the goal is to establish a pattern and specific plan. Planning alone is a key feature of getting control of eating and developing a satisfying long-term pattern. If you propose a pattern and it does not seem to work, based on your behavioral response, then the plan needs to be reconsidered and refined.

Having a plan (before you start your day), and planning ahead, is essential. In future meetings, we will discuss other specific strategies with food choices that can help you eat in a way that optimizes your satisfaction with food while also controlling the calories consumed.

Starting on this first day of the program, a key goal is to exercise (i.e., a planned, specific physical activity) every day for a specific time period that is individualized based on your capabilities. This can be for as little as 10 minutes, or if you are already somewhat active, for a longer time period (30 minutes or more). It is crucial at this stage to habituate and to internalize the concept of daily set-aside time for activity. There will certainly be some days (now and then) that this goal will not be met, but setting the goal for a daily activity allows the habit to become incorporated as a maintained (or habituated) pattern. During the program, the daily exercise time and the intensity of the activity will be increased. The importance of this behavior cannot be overstressed.

In addition to convenience, enjoyment is another important factor related to sustaining an exercise regimen. What activities are appealing to you? What are the key environmental factors that may influence your exercise goals and progress? Complete the worksheets on exercise convenience that will help you find the activity that is right for you (pages 16-18). Please complete those at home and come up with a goal for physical activity every day for the upcoming week.

We will be happy to help you with questions about exercise equipment and exercise facilities in our area. Convenience is a major factor in whether or not people keep exercising so think of something that will be comfortable when you set your goal. Work on developing your goal today so you will get a chance to implement it in the coming week. Record your goal.

A long-term goal is to aim for an average of at least one hour per day of moderate exercise, because this has been shown to be associated with better weight loss and weight maintenance. Note that this is an average, and it is where we aim for you to be in the future. Setting short-term goals and achieving success will take you toward that long-term goal. Exercise may provide special benefits for the mental and physical health of cancer survivors in particular.

Any activity will also contribute to weight loss, for example, walking 1 mile will burn about 100 calories. Today we will distribute pedometers for your use. We will set it for your stride and show you how to use it - the pedometer provides a way to monitor your walking throughout the day (see pages 14-15).

6. Introduce self-monitoring (10 min)

In order to develop an individualized plan that works for you, you must know yourself and your own challenges and patterns extremely well. Self-monitoring will help you (and the group leaders) examine eating and activity patterns, and over time, the circumstances, thoughts and feelings surrounding these patterns. At this stage, the goal is to begin the process of getting to know yourself, by recording what truly happens in your life on a daily basis. This also is the way you can monitor your progress. The first focus during this program is on monitoring behavior, and then the focus will be modified to include monitoring thinking patterns so that attitudes and these thinking patterns can be addressed.

It is not uncommon to be reluctant to monitor, and to face challenges in monitoring. There is no need to be ashamed of behavior. Everything recorded will be evaluated non-judgmentally in this program. Self-monitoring is a cornerstone strategy and is essential for progress. The records you keep are for you to use in the development of a plan and in monitoring your response to strategies and behavioral techniques.

Let's discuss when you will do the self-monitoring. (Brainstorm when and where the participants will monitor.) When are you going to take time to do this important activity? (Provide food and activity record booklets). Distribute diaries and review instructions to self-monitoring (page 13).

Distribute pedometers.

7. Wrap-up and summary. (What are you planning and thinking about as the session ends today?)

8. Skill Builder (page 15)

- Complete the "Positive Thinking" worksheet (page 9).
- Complete the worksheet on exercise convenience, preferences and environmental factors (pages 16-18. Assess your physical activity tools; do you have the appropriate equipment?
- List your initial exercise goals.
- Start incorporating physical activity EVERY DAY!
- Begin food and activity records.

Session 2

Session focus: Goal setting, aerobic exercise, alternatives to overeating, stimulus control relevant to diet, regular planned meals.

At the end of this session, the participants will:

1. Use the food/activity log as a baseline for goal-setting and monitoring progress.
 2. Refine and update the specific, realistic goal for daily exercise.
 3. Evaluate meal pattern and come up with a meal plan.
 4. Use stimulus control techniques to make it easier to avoid overeating.
1. Review of past week's activity and homework (15 min)

Review a couple of examples from the "Positive Thinking" worksheet.

What problems were encountered with self-monitoring? What did you learn about your activity and dietary patterns this week? (Discussion.)

How did your start-up exercise activity work out? Did the time of day, specific activity, and time frame fit with your capabilities and daily pattern? What guidance did your exercise environment worksheet provide about planning this activity? How did the worksheet on exercise convenience and physical activity tools helped?

Having a plan (before you start your day), and planning ahead, is essential. Based on your food record this week plan for the coming week; look for similarities within meals; for example: what is the first thing you eat/drink every day? What are the options for the different meals? In future sessions, we will discuss other specific strategies with food choices that can help you eat in a way that optimizes your satisfaction with food while also controlling the calories consumed.

2. Physical activity: what is it and what are the benefits? (15 min)

Physical activity is any form of movement that expends energy. Exercise usually means purposeful activity usually done to improve fitness and burn calories. Lifestyle activity usually refers to activity that is more unstructured and is incorporated into the day. Both of these types of physical activity are encouraged, because both of these types of activity are associated with physical and psychological health benefits. Studies have shown that both purposeful exercise and increased lifestyle activity can promote weight loss. However, specific purposeful exercise is the major focus of goal-setting and self-monitoring in this program, because we know that it can also restore and increase muscle mass and can substantially increase energy expenditure. However, it is not uncommon for breast cancer survivors who have experience changes in their bodies due to surgery or radiation treatment (e.g., scarring, asymmetry, lymphedema) to feel self-conscious when engaging in physical activity. In future sessions, we will discuss body image in greater detail. Nonetheless, physical activity can have added importance for breast cancer survivors, including those who have lymphedema.

When you start exercising, it is important to keep some safety rules (see page 21). Injury

prevention involves a few basic strategies: Plan to exercise at the level that is appropriate for you, and do some warm-up movement (a few minutes of the activity at a low level of intensity) before the planned activity. Some muscle soreness is normal after starting a new exercise or activity. Some simple stretching after the activity also is recommended.

How much activity is necessary to achieve the health benefits, to promote weight loss, and to maintain weight loss? (Discussion.) Studies have shown that the time spent on exercise correlates directly with the amount of weight loss that results (also, increased time does not increasingly tax the heart or respiratory system).

There is a range of specific intensities and amounts of exercise that participants will do, due to differing capabilities and entry-level fitness. Also, sufficient physical activity can be accumulated in many ways. However, a continuous goal throughout this program for all participants is daily planned, purposeful exercise. Similar to brushing your teeth, exercise can become a habit, something to which one looks forward and to which one returns as soon as possible after an interruption. There are several forms of exercise. All have health benefits that we will discuss in future sessions. Aerobic exercises are what you want to focus on at this stage of the program as it will help you burn fat and calories (see page 23). In order to maximize the benefits of the aerobic activity it is important to work at the right intensity. Introduce the Perceived Exertion scale; vigorous, moderate, and light activity (page 24). The level of intensity that is the goal is a 4 on the scale of perceived exertion (see scale) – you can talk, but you would rather not talk, when you are at that level. Another indicator that you are exercising at a good level is sweating: along with even breathing, that is how your body shows it is putting forth effort.

Sweating is a good thing, because it tells you that you are meeting your goals, changing your body composition, and losing weight. However, it has historically been considered an unpleasant thing for many women, and it affects how you plan to exercise. For example, knowing that you will sweat means you may want to plan your exercise for the morning (before you normally shower) or plan to exercise in the late afternoon or evening when you can conveniently shower or bathe again. What about hair and make-up? Sometimes, these little things can be barriers to regular exercise for women, so the more detailed your planning (and sometimes challenging these activities), the more likely you will meet your goals.

You can check out the energy cost of different activities and other tips at the end of this session (page 25).

3. Self-management and behavior change (15 min)

Changing one's behavior is very challenging, but definitely possible. Based on what has been learned from many studies, we know that a crucial element to enable behavior change is to provide specific tools and techniques, rather than simply to provide facts and encouragement. The application of behavior change techniques as provided in this program encourages self-management. The goal is to make you the boss of your own behavior, designing, monitoring and maintaining the behavior that is the focus. As we discussed last week, self-monitoring is the most important first step. Another important step is goal-setting and evaluation. Other elements we will address in the program are stimulus control (controlling the characteristics of

the environment), developing social support, and restructuring thinking patterns. When the target behaviors are physical activity and healthy food choices, there are many specific factors that can be analyzed and addressed to make behavior change more likely to occur. These include time management, enjoyment, and self-talk (negative and positive thoughts). These elements will be presented and discussed over the next several weeks.

Goal setting: When most people talk about health behaviors, they are often very vague. The statements that people typically describe as goals may express a desire to make a change but they are not helpful in getting you to change. A good goal helps you to make a change. Instead of being big and long-term, a good goal is very specific and short-term (daily or weekly), breaking down the change into smaller, more manageable components. A good goal identifies what you need to do (see page 26). (Discuss examples.) The aim is to set a goal at which you are likely to be successful, because we tend to continue and enjoy things when we are successful. A good goal is one that you are 95% sure that you can achieve. More characteristics of an effective goal: Measurable, specific, realistic. Now that you know how to set a goal for success, take a couple of minutes to think and write a new activity goal for the coming week.

Review a couple of examples from participants. Ask participants to evaluate their progress on a daily and weekly basis to assure goal accomplishment. Share examples.

4. Alternatives to overeating and emotional eating (5 min)

In chronic dieters, a cycle of excessive restraint and episodes of overeating, often triggered by intense feelings or emotional responses, is a behavioral pattern that also must be addressed to promote healthy long-term weight control (see page 27).

A lot of overeating is linked to a desire to take care of ourselves, because food is a way of self-nurturing. At this point, it is very helpful to start to generate a list of activities that are self-nurturing and that you can do as alternatives to overeating and emotional eating. Examples of these activities are telephoning friends, getting out of the house or office, taking a bath or shower, or meditating (see page 28). During this program, more alternatives and tools to tolerate distress will be addressed.

5. Stimulus control and food intake (10 min)

The basic concept behind using stimulus control to avoid maladaptive eating is that even if you feel that you cannot always control yourself around food (or particular foods), you can at least control your environment. You can make your environment one in which you are more likely to be able to control yourself and eat fewer calories or smaller amounts of food (page 29).

Stimulus control strategies include restricting eating to one place in the house, limiting the amount of food available when eating, and limiting the quantity of foods in the house that are easily overeaten. Again, planning is the key, because how you shop for food and stock the pantry and refrigerator, and thinking about your choices before you look at a menu, will all help to head off problems before you are in the eating situation itself.

At this stage in the program, take a look at what is in your kitchen: Foods that are difficult for you to eat in controlled amounts, or foods that are easy to overeat when you have negative emotions, should not be in your home. Although there are no “forbidden” foods with this program, regulating the environment in which you eat foods that are difficult to avoid overeating can help to reduce the likelihood that you will overeat or binge eat when you are exposed to that food. For example, you could choose to eat a dessert when you are in a restaurant, where the amount of that food to which you are exposed is limited, rather than having desserts at home, because this results in less pressure to control yourself with amounts at home. Also, sometimes an alternative new food that does not trigger the old pattern of overeating can be identified and introduced to meet the taste preference needs. (Discuss examples.)

The type of foods you include in your meal plan can be selected on the basis of having a “built-in” cue for when to stop eating, and thus, contentment or satiety. The choices you plan for meals can be exploited to make it easier to feel full after eating. For example, pre-portioned frozen dinners, a small single-portion pizza, an English muffin (rather than equal-calorie slices of bread) all are clearly identifiable units, so when you eat it all, your brain will tell you that you are done and you will feel more full. Choosing foods that have a natural or “built-in” indicator of end-point can help you feel more content with what you are eating, as these foods send visual signals to the brain that one has eaten.

Research suggests that too much focus on “variety,” creating and reading recipes, and numerous food exposure events throughout the day can be very counterproductive for weight control. Snacking is generally not recommended, especially unplanned snacks. There is evidence to suggest that when one experiences more food exposures, more calories will be eaten. A common dieting myth is that eating several small meals and snacks each day is helpful for weight control, but this is not a helpful pattern for many people. While avoiding severe hunger is highly recommended, because that condition predisposes to overeating, an individual plan does not require the imposition of one-size-fits-all meal pattern (i.e., your own pattern of planned meals should be individualized).

Thus, the best meal plan is one that is convenient, works into your daily pattern without elaborate shopping and cooking, and consists of foods that taste good to you (they are palatable but not overly tempting for overeating). Minimal planned snacks are sometimes helpful to avoid hunger, but otherwise, snacking can interfere with weight control. When you have fewer times of exposure to food during the day, you will have fewer temptations to overeat, reminders of food, and opportunities to eat.

6. Wrap-up and summary.

7. Skill Builder (page 30)

- Set the specific goal for regular exercise this week.
- Continue to use the food/activity log for goal-setting and tracking progress.
- Make a list of things you can do instead of eating when you are upset or stressed.
- Remove or reduce the number of tempting foods from your home and/or work place and stock up on healthy low-calorie foods (i.e., vegetables, fruits, low-fat dairy products).

Session 3

Session focus: Estimating calories from the food label and using the exchange system for calorie-counting, self-nurturing behaviors.

At the end of this session, the participants will:

1. Continue to use the food/activity log for goal-setting and monitoring progress.
 2. Evaluate and revise the meal pattern and plan.
 3. Refine and update the specific goal for daily exercise.
 4. Use the food label to estimate calories in the food consumed.
 5. Use an exchange/unit system to estimate calories in the food consumed.
 6. Understand the need for self-nurturing and plan a self-nurturing activity.
1. Review of past week's activity and homework (10 min)

What problems were encountered with self-monitoring? What did you learn about your activity and dietary patterns this week? (Discussion)

Review a couple of goals and evaluate based on SMART.

What alternative behaviors did you implement this week instead of eating in response to emotional distress?

What tempting foods did you remove and what healthy foods did you stock up on?

2. Estimating calories (30 min)

Today we will talk about how to accurately estimate how much we eat. There are many strategies and ways to estimate calories. (Discussion)

Reading food labels: Understanding the food label can help you choose healthier low calorie options. The first thing to check on the label is what one serving is and how many servings are in a package. Review the label reading examples in the notebook (pages 32-33).

Healthy food can be high in calories, too. Look at the almond box I have here (hold a 6 oz. almond package in your hand). One serving has 160 calories, how many servings do you think are in this container? (Take participant guesses). There are 6 servings of 160 calories in this container. I could finish this container and that would have been $160 \times 6 = 960$ calories! This example illustrates how important it is to check the serving size and calories before we eat.

Review the difference between a portion and a serving (page 34). Nutrition information is available today for many restaurants and fast food places, too. It is important to choose something you like that will be worth the calories. (Discuss examples.)

What do you do when the nutrition information is not available? An easy way to estimate calories is to learn calorie levels of food groups and standard units of common foods (pages 36-

37). We can divide foods to 6 main food groups according to the nutrients and calories we get from those foods:

1. Bread, rice and pasta group
2. Vegetable group
3. Fruit group
4. Meat and meat substitute
5. Milk and yogurt
6. Fats

For each group we can describe a serving size of each food that will contribute similar amount of calories. For example: 1 slice of bread will have similar nutrients and calories as $\frac{1}{2}$ cup of pasta. Review all food groups, sizes and calories.

Now let's test your eye, let's play "the size is right."

Show participant a plate (or a picture) with 1 cup of pasta and ask: "How much pasta is that?" Take guesses. It is one cup of pasta. One way to estimate one cup is to make a fist. Your fist is about the size of one cup. One cup of pasta is 2 servings from the grain group and thus will have how many calories? Take guesses. One cup of pasta contains about 180 calories. Now this is assuming nothing is added to the pasta. You need to count calories in sauces. If, for example, you just use olive oil with herb and spices (like basil and salt) you can count the calories of the oil – 1 teaspoon = 45 calories. Herbs and spices have negligible amount of calories.

Show participants 3 oz of fish/chicken on a plate (or a picture) and ask: "how many ounces of chicken/fish do you think I have on this plate?" Take guesses. It is 3 oz of chicken/fish. One way to estimate 3 oz of meat/chicken is to think of a deck of cards or a soap bar or the palm of your hand.

Show participants 2 tablespoon of peanut butter (or a picture) on a slice of bread, ask: "how much peanut butter do you think we used on this bread?" Take guesses. This is 2 tablespoons. A way to estimate 2 tablespoons is by thinking of the size of a ping-pong ball. One tablespoon of peanut butter is about the size of your thumb tip. Since nuts are rich in fat they contain a lot of calories. Two tablespoons of peanut butter contain about 190 calories.

Estimating the components of mixed foods and their corresponding calories enables you to estimate calories of these foods. How can we estimate calories in foods that contain several ingredients like lasagna? You need to break it down into the main ingredients. In a lasagna example, we have: pasta, cheese, marinara (tomato base) sauce and possibly vegetables and meat. In a serving of one cup, you will get about $\frac{1}{2}$ cup of pasta (100 calories), 1.5 oz of cheese (150 calories), and about 1 teaspoon of oil in the marinara sauce(45 calories); the rest is vegetables; that comes up to about 300 calories per 1 cup. Now you try, how many calories are in a serving of enchiladas? Let participants share their ideas and how they got to it. An enchilada will have one tortilla (about 100 calories), 1-2 oz of cheese and meat and a sauce that probably contain 1 teaspoon of oil (45 calories). That will be about 300 to 350 calories for one

enchilada.

When you make the food yourself or you know the recipe, you can calculate calories more accurately. Use a website or the Calorie King book for a faster calculation. It is an important skill to estimate and be aware of calories of recipes that you enjoy often.

Remember that the one of the main goals of recording and keeping track of calories in to help you plan to create a caloric deficit of 500-1000 calories per day. Try to sum up calories during the day and plan the next meal accordingly.

3. Self-nurturing (10 min)

People often use food to reward, comfort, or nurture themselves. Unfortunately, this strategy is very counterproductive for healthy weight management. For this reason, it is important to develop non-food alternatives to nurture one's self when bad feelings arise (see pages 39-41). These should be things focused on the participant (e.g., calling a friend, taking a warm shower, massage, reading a good book, going to movie that they have been wanting to see, pedicure, manicure, small "gift", being inaccessible to others for brief times, going home from work on time). What are some ways in which you can nurture yourself? Make a list with participants. Part of long-term weight loss success is taking time to take care of yourself, which includes being nice to yourself.

4. Skill Builder (page 42)

- Set the specific goal for regular exercise this week. Increase how often and how long you exercise. The goal is an average of an hour a day.
- Continue self-tracking of food and physical activity.
- Estimate calories in foods. Plan to eat fewer calories than what your body is spending.
- Make a list of positive activities to do instead of eating when you're upset.
- Reward yourself!

Session 4

Session focus: Continued refinement of meal plan, continued adjustment of exercise activity goals, relapse prevention, psychological effects of cultural influences on body image, flexibility exercises.

At the end of this session, the participants will:

1. Continue to use the food/activity log for goal-setting and monitoring progress.
 2. Evaluate and revise the meal pattern and plan.
 3. Refine and update the specific goal for daily exercise.
 4. Describe the types of situations that are high-risk for slips or lapses.
 5. Explain how “ideal” body shape or weight for women is culturally determined.
1. Review of past week’s activities and homework (15 min)

Review monitoring and records completed since the last session. Discuss barriers and solutions. How did they estimate calories? What were their challenges? Review the effectiveness of the exercise goal. Was the goal realistic and challenging? What are the things you need to do this week to reach this goal and anticipated new goals? Discuss different types of aerobic exercises that are being tried. Review the rate of perceived exertion (RPE) scale. (Have participants reassess their physical activity commitment if they are not achieving a 4 on the RPE scale.)

As discussed last week, an important aspect of goal-setting is that the goals are realistic and achievable. Your specific goal this week should be based in part on your progress this past week. The idea is to be successful and to enjoy meeting your goal, because success breeds success, which means enhancing self-efficacy (your confidence that you can do a particular behavior). If you have high confidence or self-efficacy, then you are motivated to keep meeting your goals. The best way to get high self-efficacy is to be successful in meeting your goals.

How did planning meals work out? What have you learned from your record-keeping? How are you using stimulus control strategies to reduce the pressure to control yourself?

What activities did you list as alternatives to emotional eating?

2. Relapse prevention (10 min)

Slips, also known as ‘lapses,’ are not uncommon when making changes in our habits. The key is to recognize situations in which lapses are more likely to occur, to develop strategies for dealing with them, with the goal of preventing a complete return to previous behavior patterns (see page 44). High-risk situations involve negative emotional states, interpersonal conflict, and social pressure. What are some of your high-risk situations? Increasing your self-monitoring becomes even more important when you feel that you are being challenged in meeting goals. One helpful strategy is to imagine in advance how to handle high-risk situations. Some situations are avoidable; however, you can learn to cope with those that are not. Ask

participants how they will plan for their high risk event. Review a couple of examples from participants.

3. Cultural influences on body image (10 min)

Body image is the mental picture we have of the appearance of our bodies. Body image contributes to self-esteem and has both emotional and perceptive components. For many women, the importance of body weight can get out of perspective, dominating over the other aspects of self, because the cultural messages (i.e., media, social interactions) so strongly reinforce concern with this physiologic characteristic.

Body image is often a concern for women in general and for breast cancer survivors in particular. Beauty and the “ideal” weight and shape are culturally determined, and recognizing the history of these idealized shapes (and variations across cultures) provides insight. As a result of the current cultural preferences, many women become “diet-obsessed” and unhappy with themselves because they cannot realistically achieve the cultural preference of thinness. Those who do not meet the standards of beauty are likely to experience stigmatization and low self-esteem, because self-esteem is affected by social identity. People who are overweight are often more critical about their appearance and weight than people who are not overweight! For breast cancer survivors, the issue of body image can be even more complicated because of physical changes that have resulted from treatments.

Most people who are unhappy with body weight attempt to lose weight by episodic or chronic dieting. Dieting affects eating patterns, mood, and physical symptoms, and promotes a heightened response to food cues and hunger (i.e., increased likelihood of overeating). Strict diets do not typically promote maintained weight loss because severe restriction is not sustainable. Dieting has metabolic and psychological effects that influence long-term outcome. Excessive caloric restriction reduces metabolic rate (a major component of caloric expenditure) and makes sustained weight loss less likely to occur.

What has been the group’s experience with body weight concerns? What are the physical and psychosocial consequences to holding the prevalent cultural attitude toward weight and shape? (Discussion.) How do the clothes in your own closet, and your choices of what to wear, reflect the cultural influences, your own feelings about your body, and thought patterns? How does exercise affect your body and the way your body feels to you?

Sometimes bad feelings about the body can have a negative effect on being able to exercise comfortably. For example, some might say, “I think everyone is looking at me and thinking about what I look like.” Discuss those thoughts and challenge whether others are actually paying as much attention to you as you think.

How many in this group avoid exercise because of body image concerns? How does the experience of breast cancer and breast cancer treatments interact with feelings about the body and body image?

Ask participants to make a list of three people that they admire most, based on their personal

involvement with them or because of the contributions they have made to society (page 45). Review a few examples. Ask participants: “Did you consider the body weight or shape of these individuals in your selection?” Discuss.

Ask participants to name at least three qualities about themselves that they consider to be good and admirable qualities (page 45). Review a couple of examples. Typically these are personality, caring, or intellectual characteristics, rather than physical attributes.

List the activities that are being postponed until weight is lost (page 46). (Group discussion and encouragement to do some of these things now.) If there are activities that you are postponing or avoiding because of weight and shape concerns, this is the time to challenge yourself. How can you push yourself to do things that might feel a little uncomfortable?

Participants are asked to identify a weight goal and describe why this particular weight was selected. Why is it important to be at that weight? When were you last at that weight, and how hard would it be to stay at that weight? What could you do at that weight that you cannot do now? How would you feel if you could not reach that weight, and what effect would it have on your life? What do you expect will be the consequences of weight loss?

Weighing yourself regularly has been shown to be a useful strategy for weight loss and weight loss maintenance. However, to make this strategy work for you, rather than being a source of stress and confusion, you need to learn how to interpret the numbers and also learn how to respond to the normal fluctuations that occur due to small changes in diet, changes in fluid balance, and other influencing factors. In the long run, changes in weight reflect diet and exercise. In the short-term (ups and downs on the scale over a day or a few days), changes in weight may reflect these other influencing factors. We will be providing scales for your home use in today’s session.

4. Body checking and avoidance (10 min)

The way you see yourself, your body image, may be causing you problems by interfering with your ability to achieve and maintain a healthier (although not culturally ideal) body weight. The long-term goal is to be less negative about your shape and size, and it takes effort to identify these types of thoughts and related behaviors, and to teach yourself a more positive acceptance.

One common thinking pattern is to define oneself dichotomously as either “fat” or “thin.” The reality is that body weight is a continuum, across populations groups and within a lifetime. Even a relatively small change in weight may markedly change metabolic factors that influence your health (and possibly) long-term survival. Beneficial metabolic changes that have been associated with a loss of 5-10% initial body weight include improvements in blood lipids, blood pressure and insulin resistance, in addition to reduced risk of diabetes.

Body checking is a behavioral and thinking pattern that serves to increase preoccupation with body weight and increasing dissatisfaction. Abnormal body checking maintains a negative body image, but once identified, this pattern of behavior can be changed. Body shape avoidance is

another behavior that reinforces poor body image. Shaping this behavioral pattern requires anticipating or predicting the consequences. Discuss examples from the participants' own experiences.

5. Stretching (10-15 min)

To be flexible requires stretching. Go over the instructions before stretching; explain and demonstrate how to perform each stretch (pages 47-52). Warm up with participants and review all stretches with participant performing the stretches. Check posture.

6. Wrap-up and summary.

7. Skill Builder (page 53)

- Think about when you might be at high risk for slips in reaching your eating and physical activity goals. Think of at least one way to avoid or cope with these times.
- For the next meeting, bring two photos from magazines or newspapers to share with the group: one picture showing false or unrealistic images about body weight and shape, and one picture that is realistic and makes you feel good about yourself!
- Do at least one activity you usually avoid because of the way you feel about your body.
- Continue to set a specific goal for regular exercise this week; increase how often and how long you exercise.
- Track your food and activity. Focus on calories in foods and plan to eat fewer calories than you spend.
- Add to your list of activities to do instead of eating when you are upset.
- Reward yourself!

Session 5

Session focus: Understanding the differences between internal and external hunger, rating hunger, slow eating, lifestyle activity.

At the end of this session, the participants will:

1. Continue to use the food/activity log for goal-setting and monitoring progress.
 2. Evaluate and revise the meal pattern and plan.
 3. Refine and update the specific goal for daily exercise.
 4. Know how to rate their hunger level and identify true (internal) hunger.
 5. List techniques that can help them eat slower.
 6. List ways to increase lifestyle activity.
1. Review of past week's activity, homework and stretching exercises (20 min).

Review of self-monitoring and records completed since the last session. Discuss barriers and solutions. Review the effectiveness of the exercise goal. Who successfully completed the goal? What helped them to reach their goals? Who did not successfully complete the goal and what things got in the way?

How is the meal plan working out? What have you learned from the food record? What alternative behaviors have you used to replace eating in response to negative emotions?

What situations did you identify that put you at high-risk for slips? What ways to avoid or cope with these situations did you think of?

What thoughts or feelings did you have about your body? Which of these seem to be unique to the diagnosis and treatment of breast cancer and which seem to be common to all women?

Share pictures from the media, illustrating unrealistic images and invigorating positive images. What thoughts and feelings did you notice about your body image as it relates to any body changes due to breast cancer treatment?

Have they incorporated stretching?

2. Internal and external hunger (10 min)

Ask participants to describe when they were hungry this week. Ask them to describe what they felt/experienced (e.g., weakness, craving, stomach growling, just wanted food). Describe the differences between internal and external hunger

1. Internal hunger:
 - a. Is usually associated with physical sensations (stomach pangs, headache, dizziness)
 - b. Is general not limited to a specific food (i.e., any food will satisfy hunger)
 - c. Usually occurs greater than 3-4 hours since last eating episode

2. “External hunger:”

- a. Is not associated with physical sensations
- b. Is specific for a particular food, possibly one that you have seen, smelled or thought about (i.e., you see a Pizza Hut commercial and want pizza)
- c. Often occurs less than 3 hours after the last eating episode

It is important to clearly understand what the difference is between internal and “external hunger” because different techniques will be used to deal with each type of “hunger.” For example, limiting places and activities associated with eating helps psychological (external) hunger or cravings, while eating regular, planned meals and snacks helps to manage true physical (internal) hunger.

This week we will focus on managing internal hunger. Internal hunger is addressed by eating on a regular basis. The goal this week is to eat regularly enough to avoid intense physical hunger.

3. Eating schedule (10 min)

Ask each participant to review their food records (a typical weekday and a weekend day) and determine the typical length of time between eating episodes. What are some factors that are getting in the way of eating more regularly? The overall goal is to prevent physical hunger by eating on a regular basis. If internal hunger is managed, it is easier to deal with “external hunger” or cravings.

4. Slow eating (15 min)

Ask participants to share how long it takes them to eat their lunch and dinner meals. Ask participants about the benefits of eating more slowly. Eating more slowly can:

1. Prevent indigestion (burping and other unpleasant events that accompany fast eating)
2. Decrease automatic eating and increase awareness of eating
3. Facilitate fullness. Eating quickly can out-race satiety signals. It takes about 20 minutes for signals from the stomach to reach the brain. If one is eating quickly, one may eat more than one needs to feel satisfied.
4. Increase the awareness of the taste of foods. There are different taste buds on different parts of the tongue. Once food is past the tongue, it has no taste, so taste is enhanced if it remains in the mouth.

Ask participants how they could slow their rate of eating (page 56). Some suggestions include:

- Pace oneself with the slowest eater in the group/family.
- Put utensils down between bites.
- Drink water between bites.

“Schedule” mini-breaks within the meal (e.g., swallow, drink water, and talk for 2-3 minutes before taking another bite). Don’t talk with your mouth full!

The goal is to eventually increase the length of a major meal to 20-30 minutes.

5. Lifestyle activity and exercise (10 min)

Throughout this program, we focus a lot on purposeful exercise activity, because this can be targeted and monitored on a regular basis. In addition to planned exercise, lifestyle activity is an additional and important way to expend calories and increase overall physical activity. Making lifestyle activity a habit today is one way to integrate increased physical activity into the regular daily activities.

Here are some ideas to sneak more activity into your day (see pages 57-59):

1. Transportation: Park further from the door, walk when possible, take stairs, take things up stairs in several trips.
2. Television: Limit television-viewing time, take a break during commercials to get up and move, stand and stretch while watching TV.
3. Combine functions: Stand while talking on the telephone and move around a room, read or go through the mail on a stationary bike, clean and conduct household tasks while watching television, walk when possible to socialize and communicate.

What are ways of including more lifestyle activity that would work for you?

6. Skill Builder (page 60)

- Note your hunger. Does it come from the inside or is it stimulated by external factors?
- Make a plan to eat at regular times.
- Record how long it takes you to eat your main meal this week. If it takes you less than 20 minutes, add 5 minutes to your meal time. Try using one of the strategies we talked about.
- Set a specific goal for regular exercise this week; increase how often and how long you exercise.
- Track your food and activity. Focus on calories in food and plan to eat fewer calories than you spend.
- Reward yourself!

Session 6

Session focus: Understanding triggers to eating and how to manage them, core training.

At the end of this session, the participants will:

1. Continue to use the food/activity log for goal-setting and monitoring progress.
 2. Evaluate and revise the meal pattern and plan.
 3. Refine and update the specific goal for daily exercise.
 4. Understand what triggers to eating are and how to manage them.
 5. Learn what core exercises are and specific exercises to implement.
1. Review of past week's activity, homework and exercises (20 min).

Review of self-monitoring and records completed since the last session. Discuss barriers and solutions. Review the effectiveness of the exercise goal. Who successfully completed the goal? What helped them to reach their goals? Who did not successfully complete the goal and what things got in the way?

How is the meal plan working out? What have you learned from the food record? What alternative behaviors have you used to replace eating in response to negative emotions?

Ask participants to describe their hunger ratings and whether they were true internal hunger. Ask participants about their experiences this week following an eating schedule. Did sticking to a schedule help reduce internal hunger? Troubleshoot problems.

Ask participants to report on how they did with increasing the length of their major meals. What strategies did they use? The goal is to eventually increase their meal length to 20-30 minutes. Review the rationale for slow eating.

Ask participants about increasing lifestyle activity and using their pedometer. How many steps are they achieving?

2. Ways to address triggers to eating: thoughts and images (20 min)

Unlike true internal hunger, physiological sensations resulting from a need for food and nutrients, "external hunger" or cravings arise when outside cues or triggers stimulate a desire to eat. These triggers are typically thoughts, emotions, times, places, activities, and people.

Explain conditioned learning (i.e., how one thing gets paired with another). When things get paired together often enough one can signal the occurrence of another (e.g., Pavlov's dog, hearing a song reminds you of an old friend, movies and popcorn, coffee and the Sunday paper). Ask participants for additional examples of conditioned learning.

Eating can also be conditioned. When eating is paired with a variety of factors these things can cue or trigger us to eat. The goal is to identify these triggers and disconnect them.

Since many thoughts or tempting images of food may occur each day, it is important to identify ways to disconnect the thought of food from actually eating. If we regularly eat in response to a thought or image of specific food (i.e., a craving), just the thought of that food will become a prompt to eat it. Ask participants to report thoughts and images that prompt the desire to eat (i.e., do they ever crave certain foods?). How are they handling this trigger right now?

Review strategies to handle thoughts and images (see page 62), including:

Confrontation. Confront the thought directly and draw on a “wise inner voice” to make a reasonable decision. Do you really have to have the food that’s popped into your mind? Statements such as, “I know I’m not hungry, I don’t have to eat a food every time I think of it” or “Each time I think about a food and do not eat it, it will become easier” or simply saying “No!” may be helpful. Have participants practice confronting a tempting thought.

Surf the urge. Like a wave in the ocean, the urge to eat will flow and rise and then diminish over time. The more often you surf over the urge and realize that it will diminish, the more confident you will be in not responding to the urge by eating. After awhile, the urges (if not rewarded) will disappear or occur only infrequently.

Thought substitution. Replace food images with other pleasant images (sunset, vacation, appearance after weight loss, compliments you recently received). Thinking of alternative images will work better than a strategy to stop thinking about a particular food (e.g., I’m going to stop thinking about brownies”).

Behavioral substitution. Distract yourself by doing something else that you enjoy. Activities that keep your hands busy are particularly helpful (writing a letter, filing your nails). Other activities include calling a friend, brushing your teeth, removing yourself from the image (e.g., change the channel or leave the room), taking a bath, or taking a walk.

Food thoughts or cravings usually are short-lived, so 15-20 minutes of distraction should be enough to extinguish the desire to eat. It is helpful to think in terms of short (5 minute) intervals. Ask participants to think of non food-related activities that they enjoy doing.

Ask participants to record on their worksheet thoughts and images that triggered their hunger this week (page 63). They should also record what they did in response to the trigger in the “how to break the chain” column and the result that followed (i.e., lost the desire to eat, got distracted for a few minutes but then continued to crave food).

3. Ways to address eating triggers: Places (10 min)

Ask participants where they eat their meals and snacks. Help participants be as specific as possible when recording the places they eat (i.e., desk at work, cafeteria, kitchen, living room, car). All these places can become associated with eating. Furthermore, if individuals eat in these places regularly, these places are likely to contain two additional triggers to eat, the sight and smell of food. For example, if you regularly eat in your den or bedroom, it is likely that these rooms will contain the sights and smells of foods.

Ask participants if there are any rooms that are not associated with eating (e.g., bathroom, attic). These are probably the rooms in which eating does not occur.

To reduce the triggers to eating, participants should limit their eating to one place at home and one place at work (see page 63). At home, the place should be one that is already associated with food (e.g., kitchen, dining room). At work, the place should be separate from your desk or work area (e.g., staff kitchenette, cafeteria).

4. Ways to address eating triggers: Activities (10 min)

Just as places become associated with eating, so do certain activities (e.g., watching TV, reading). Thus, the goal is to limit activities associated with eating to decrease triggers. Always sit down to eat, and if you eat while watching TV or reading, include foods that require you to pay attention to what you are eating. Avoid finger food, which encourages eating mindlessly. Focus on the experience of eating. Address potential barriers with participants.

5. Core training (10 min)

Review the core training page in the participant notebook (pages 65-67). Warm up with participants and review all core exercises with participants performing the exercises. Check posture.

6. Skill Builder (page 68)

- Complete the trigger chain table. Bring it to group next week.
- Limit your eating to one place at home and one place at work.
- Record your activity while eating.
- Include core training every day.
- Set a specific goal for regular exercise this week; increase how often and how long you exercise.
- Use your pedometer, count and record daily number of steps.
- Track food and activity. Focus on calories in foods and plan to eat fewer calories.
- Reward yourself!

Session 7

Session focus: Scheduling and time management, energy density

At the end of this session, the participants will:

1. Continue to use the food/activity log for goal-setting and monitoring progress.
 2. Evaluate and revise the meal pattern and plan.
 3. Refine and update the specific, realistic goal for daily exercise.
 4. Explain mixed and fixed commitments.
 5. Describe time management techniques that may increase the ability to meet physical activity goals.
 6. Describe energy density in foods and meal satiety, and incorporate these concepts into meal planning.
1. Review of past week's activity and homework (20 min)

Review of self-monitoring and records completed since the last session. Discuss barriers and solutions. Review the effectiveness of the exercise goal. Who successfully completed the goal? What helped them to reach their goals? Who did not successfully complete the goal and what things got in the way?

How is the meal plan working out? What have you learned from the food record? What alternative behaviors have you used to replace eating in response to negative emotions?

Remind participants about conditioned eating and the rationale of identifying and limiting triggers. Since many thoughts and images of food may occur each day, it is important to identify ways to disconnect the thought of food from actually eating it. Ask participants to report any thoughts and images that prompted the desire to eat this week, what strategies they used to handle these thoughts and images, and which strategies worked best.

Review rationale for eating in one place. Ask participants to report on their experience of eating in one place. Assess participants' adherence. If participants had difficulty eating in one place, discuss what got in the way and brainstorm solutions so that participants can continue to eat in one place this week.

2. Scheduling and time management (20 min)

Lack of time is a commonly-perceived barrier to meeting physical activity goals. We live in a very hectic time, and there are lots of demands on our time. However, it should be noted that people who are physically active and people who are not physically active both cite lack of time as a challenge. Both types of people are busy, but for active people, physical activity is a priority and so they are more willing to make time for it. People who are regularly active tend to use time management techniques to fit it in. Lack of time (having limited time for physical activity) is a reality for everybody, so we need to use time management techniques to help squeeze physical activity into a busy day.

Ask participants to think back over the previous week and determine how much time they spent on various activities across the day. Discuss examples and competing demands from family, friends, and work. Those who exercise have been able to learn effective methods of managing these demands on their time so they can prioritize exercise in spite of having these demands. Remember that your health is a top priority: physical activity is a key component of healthy weight management and may have particular importance to breast cancer survivors.

The first task is to find time for physical activity. (Share examples.) Determine parts of your schedule that you cannot control (these are fixed commitments). However, do take stock of these fixed commitments by asking how you are spending your time and your current ability to get things done. The other activities that fill your day are mixed commitments, i.e., something to work with, such as doing laundry, shopping, or cleaning, or even blank or uncommitted time slots. The mixed commitments are tasks that probably need to get done, but you have some control over when and how much time you devote to these tasks. Everyone also has some external time-wasters in the day, such as watching TV, telephone calls that interrupt your plans, waiting for someone, waiting in lines, traffic congestion, and unexpected visitors. There are also self-generated time wasters, such as lack of organization, procrastination, inability to say no, idle socializing, unnecessary perfectionism, and not planning ahead. All of these time wasters (both external and self-generated) need to be minimized.

As we discuss general principles of time management, note the ones that make the most sense for you and that you will try.

3. Time management techniques.

The first principle of time management is choices. We all have the same amount of time, but we all make choices about how it is used. You must make conscious and thoughtful choices about how you use your time. Consider the big perspective – the worksheet (page 69) will remind you about how your current weight management efforts contribute to your goals. How are you currently spending your time (page 70)?

A key principle is to organize your time. You can even use the goal-setting technique to reorganize your time, if reorganization is necessary. Essentially, you have to prioritize, make a “to do” list, and plan ahead. Being physically active does not just happen: It requires a lot of planning and scheduling. Examples are to consider combining function (doing two things at once), keeping a calendar of project due dates and other activities, planning ahead for “stolen moments,” and planning tomorrow’s tasks and physical activity tonight. Reschedule things if you need to, and let go of perfectionism. Another important time management technique is efficiency: Don’t procrastinate, don’t waste time, and don’t let extraneous things get in the way.

Your time is your responsibility and your choice. How are you organizing your day to allow you to meet the exercise goals? For many people, exercise time has to be a priority item that is set aside early in the day, prior to other activities. Others develop the ability to curtail other activities that can threaten to take over the planned exercise time, if it is planned for later in the day. How to deal with these challenges requires evaluating your behavior and activity log, followed by testing strategies to reorganize your day and your attitudes so that exercise will not

be left out (see page 71).

4. Energy density and feeling content with your food intake (10 min)

How “filling” a food or a meal might feel is determined by several characteristics. In addition to knowing your own taste and preferences, some specific strategies can be used to design a food plan that maximizes satiety with fewer calories. Overall, vegetables, fruits, and foods with lots of fiber are more filling than foods without fiber. This principle holds true even with high-calorie (and high-fat) food choices, such as nuts (which have lots of fiber and require chewing) being much more filling than oil, even though the calories are similar.

Specific characteristics that increase the volume of food, such as the amount of water or air in the food, can also influence satiety. Examples are: choosing raw vegetable salads or soup, or choosing cooked cereal instead of dry crackers. Adding vegetables, fruit or high-fiber foods to whatever else you are eating will reduce the energy density of the meal, and thus make you feel more content. In fact, starting a meal with a big salad or lots of vegetables will reduce the total volume of the rest of the food that you spontaneously eat at that meal. The bottom line is to include in your meal plan (and on your plate) lots of low-energy-density choices, and you will find that smaller amounts of the higher-calorie, lower-energy-density foods will be completely satisfactory. You will eat fewer calories but still be content and satisfied. Discuss principles of reducing energy density: Foods that provide bulk and few calories, fiber-rich foods and meals, high-water foods (such as soup and stews, cooked cereal), and foods with more air (such as popcorn). Discuss examples and strategies (see pages 72-75).

Review the concept of unit-based food choices: polishing off a defined unit of food can help to trigger satiety and signal that it is time to stop eating. In general, foods that you eat with a spoon or fork are more satisfying than foods that are eaten with the fingers – perhaps because you have to pay more attention to what you are eating!

Are you eating enough or too much? After years of dieting to lose weight, you might be trying to limit your intake (or avoiding specific foods) too much – this can later lead to overeating. As you examine your food diary, be aware of possible patterns of undereating and overeating. The consensus for a dietary recommendation to promote weight loss is to aim for an energy deficit of 500-1000 kcal/day. With a focus on exercise, the reduction in energy intake that is needed to promote weight loss may be very modest. On the other hand, people sometimes eat a lot more than they think they do – this is an important reason to be completely honest with your food diary. Feeling content with what you are eating, yet still losing weight, requires that you make choices based on your personal preferences. If you are experiencing cravings and episodes of overeating, then your plan needs some refinement and individual attention.

6. Wrap-up and summary.

7. Skill Builder (page 76)

- Look at how you spend your time most days (complete the grid on page 70). Think about changes you plan to make to allow more time to things that are important to you. Try at least one change before our next meeting. Consider the big picture and how the healthy

weight and behaviors that are the focus of this program contribute to your goals (see worksheet on page 69).

- Add ideas to eat more without adding calories in your meal planning.
- Set a specific goal for regular exercise this week; increase how often and how long you exercise.
- Track your food and activity. Focus on calories in foods and plan to eat fewer calories than you spend.
- Add to your list of activities to do instead of eating when you are upset.
- Reward yourself!

Week 8

Session focus: Benefits and costs of exercise, revisit alternative behaviors, strength training

At the end of this session, the participants will:

1. Continue to use the food/activity log for goal-setting and keeping track of progress
 2. Check and change the meal pattern and plan
 3. Update and change the specific, realistic goal for daily exercise
 4. Review the use of different behaviors to reduce overeating episodes
 5. Describe the personal benefits and costs of physical activity
 6. Learn what strength training is, what the benefits of strength training are and how to safely incorporate them to your exercise routine.
 7. Learn lower body strength training exercises
1. Review of past week's activity and homework (20 min)

Review of monitoring and records completed since the last session. Discuss barriers and solutions. Review the effectiveness of time management techniques that were used to help achieve the exercise goal. Who successfully completed their goals? What helped them to reach their goals? Who did not successfully complete the goal and what things got in the way? Ask participants about ways they ate more without the added calories.

Review exercise goals and meal planning, and revise as indicated.

2. Alternative behaviors reviewed (10 min)

As previously discussed, it is helpful to identify alternative behaviors that can be used to reduce overeating, and these behaviors are typically very individualized. Which alternative behaviors have you identified and used so far? If your list is brief, open your mind to pleasurable activities that are incompatible with overeating. Formulating the list ahead of time is essential, so add activities to this list today. As may be evident in your self-monitoring, you can often begin to predict when difficulties are likely to arise, and at these times, having some alternative behaviors to which you can turn can be very useful.

3. Why assess benefits and costs (pros and cons) of physical activity (motivational interviewing)? (10 min)

Basically, people tend to DO the things that will pay off in some important way. Assessing the pros and cons of a specific behavior can help to make rational decisions when choices or barriers are encountered. A benefit is something you hope to gain, while a cost is what you have to give up. The goal is to improve the decisional balance (increase the pros and decrease the cons) when it comes to physical activity. In this session, we will ask you to do a personal cost/benefit analysis of your physical activity. As a group, let's complete the grid (page 77) and compare benefits and costs of exercise.

Benefits of physical activity, or the positive elements, are what you expect to gain from your

exercise efforts. Review what participants wrote at the benefit section of exercise and the costs of “not exercising” and summarize. An important gain is to improve your health, by reducing your risk of heart disease, improving your blood lipid profile, lowering your blood pressure, reducing your risk for diabetes, strengthening your bones, and possibly, reducing your risk of breast cancer recurrence. Other benefits are to increase your energy level, to look and feel better, to reduce stress, and to improve your mood and self-esteem. Mental health benefits are extremely important. Physical activity has been shown to have a positive association with mental health and well-being, is associated with a reduction of stress emotions, and helps to attenuate mild to moderate depression and anxiety.

Routinely acknowledging the benefits of physical activity can be a powerful motivator. Both immediate (short-term) and long-term benefits should be known. For example, an immediate benefit might be “It makes me feel good,” or “It’s a great way to reduce stress.” (List benefits of exercise with the group.)

Costs of physical activity are the negative aspects, because this is what you must do or give up in order to receive benefits of exercise. Review benefits of not exercising and costs of exercising with the group.

When you are involved in weighing pros and cons, the costs are often the immediate factors (such as time), rather than long term. Often the benefits are in the future, so overcoming the resistance related to costs is an immediate challenge. One reason why it is so important to identify costs is that these define the barriers or challenges to adopting and maintaining physical activity. The goal of this program is to minimize the costs (i.e., by setting exercise goals that are convenient, or by managing time better so that the perceived cost of time is lessened). Costs take some effort to reduce.

Once the costs have been identified, then problem-solving can begin. What are possible solutions, or approaches that can minimize the cost? To overcome a barrier, you must have a plan.

4. Review strength training (20 min)

Strength training, or exercising with weights or machines, is a strategy that specifically helps to tone and increase muscle mass. Strength training does not cause women to “bulk up” because they do not have the male hormones that cause this to happen. Strength training can make an important contribution to increasing lean muscle mass. Even though strength training does not necessarily involve expending a lot of energy, it makes it easier to control your weight because your body’s resting energy expenditure is higher when you have more lean muscle mass. Other benefits associated with strength training are better ability to keep your balance (and reduced risk for falls) and increased bone density. Strength training should be done at least twice per week (although three times per week is fine).

Review lower body strength training with participants (pages 79-81); demonstrate. Warm up with participants and review all exercises with participant performing the exercises. Check posture.

Stress that upper body strength training needs to be supervised initially. Ask participants to choose exercise that is do-able despite any cancer treatment-related problems, such as lymphedema. For women with lymphedema, stress that they will need to have any supportive or compressive dressing re-checked during this program, because both weight loss and time will affect the amount of support that is provided (see pages 83-84).

6. Wrap-up and summary.

7. Skill Builder (page 84)

- Add lower body strength training 2-3 times a week.
- Set a specific goal for regular exercise this week; increase how often and how long you exercise.
- Track your food and activity. Focus on calories in foods and plan to eat fewer calories than you spend.
- Add to your list of activities to do instead of eating when you are upset.
- Reward yourself!

Session 9

Session focus: Evaluating and refining the meal plan, strategies for eating out, concerns about shape and weight, negative thoughts, introduce cognitive restructuring

At the end of this session, the participants will:

1. Evaluate progress in self-monitoring, physical activity, and the meal plan, and continue self-monitoring.
 2. Become more aware of dieting myths that may hamper progress, and refine the meal plan.
 3. Know strategies for eating out.
 4. Describe the steps involved in changing negative thinking patterns and concerns about shape and weight.
1. Review of past week's activity and homework (15 min)

Review food and activity records completed since the last session. Who successfully completed their physical activity goals? What helped them to reach their goals? Who did not successfully complete the goals and what things got in the way?

How is your meal plan working?

By this stage of a program of this type, sometimes conflicts and differences become evident. It is important to clarify and confront differences, and to acknowledge and accept differences and some degree of frustration. Giving permission to have differences promotes openness and cohesiveness. Long-term successful weight loss and maintenance is very individualized, and finding what works for you (on a long-term basis) is a major focus of this program. Everyone has different challenges, and there are many solutions to problems. Finding solutions that work best for you, and in your situation, is the goal.

2. Evaluating and refining your meal plan (10 min)

An important concern is that you must be content with what you eat or you will not continue with your food plan beyond a very short period of time. A major issue that concerns the meal pattern for women who are trying to lose weight is to avoid being overly hungry. Hunger is well-established as a factor that makes it more likely that you will overeat at some time in the near future. However, as we have discussed previously, frequent food exposure (eating many times during the day) also is not recommended, because that is associated with eating more calories as well.

Recall that only a small deficit in energy intake relative to expenditure is recommended when aiming to promote weight loss. If attempts to cut back are followed by overeating or are not sustainable, then the plan needs reconsideration. Also, it is important to separate the exercise goals and behavior from the eating behavior, in your mental review of progress and plans. These behaviors are analogous to distinct and separate investment plans that have different

benefit schedules. Problems with one behavior (such as making good food choices) can sometimes put the other behavior (such as regular purposeful exercise) at risk, if they are linked as simply a weight loss plan.

Remember that it is important that no food is forbidden. Even a healthy diet contains some foods that have very limited nutritional value. Food has meaning and personal and social value in addition to nutritional value. In fact, if most of what you eat provides nutrients, then a certain proportion of food choices can contribute only taste and satisfaction. If some foods are a problem for overeating or binge eating, the technique to learn how to include formerly forbidden foods in your diet is to start by including variations of them (choosing foods perceived as being more acceptable), or eat them at times when you are much less likely (or unable to) overeat. Remember, no food is forbidden! Planning around higher-calorie favorites (rather than being “on” or “off” a diet) is associated with better long-term eating attitudes and behaviors.

There are numerous dieting myths, and sometimes these work against progress in weight control. For example, several low-calorie food products have been shown to be helpful for many people, whereas others are sometimes not helpful because they are so unpalatable to some people that they are not satisfactory replacements. Strategies that have been shown to be helpful include: finding and choosing lower-calorie replacements that are acceptable (such as low-fat salad dressing), using high-flavor low-calorie seasoning products, and modifying usual recipes to include less fat and calories. Low-fat cheese (rather than nonfat) and low-fat salad dressings are examples of products that many find to be good alternatives to the regular high-calorie products. Keep an open mind and try low-calorie alternatives – chances are you will identify some types and brands that you enjoy. Realistic weight control strategies focus on behavior that is sustainable, rather than on whether a specific number of pounds are lost. As we have previously discussed, sustained weight loss is usually typified by a stepwise change in weight, with adjustment periods in between.

3. Eating out (30 min)

How are you coping with eating outside the home? Ask participants to describe some of the difficulties they have encountered while eating out.

Contrary to popular belief, eating in restaurants can be helpful for weight control, and research has shown that successful weight losers (and maintainers) still eat out quite regularly. The trick lies in planning ahead and in exerting some control over the choice of restaurant, although nearly all restaurants have choices among lower- and higher-calorie items. The advantage of restaurant (and take-out) meals is that there is less time involved in food preparation and less physical exposure to food and meal ingredients. Less handling of food reduces risk for snacks and tastes. Also, the amount of food to which you are exposed is defined (although often this can be more than what is appropriate for your needs). Planning ahead is the key factor: Think through what your choices will be, and make a decision about what you will eat before you arrive at the restaurant, and before it arrives at your place setting. National chain restaurants and many popular regional restaurants list menus on their Web sites, so you can review your options for many restaurants on line before you go.

The first step is to choose places that have a lot of low-energy-density foods, so you can fill up on those items: Big salads to start the meal and/or a bowl of soup are examples. All McDonald's and Olive Garden restaurants have salads, for example. An appetizer or small portion can be a perfectly-sized entrée if the meal begins with something filling. If the entrée that arrives is clearly bigger than you planned, portion out what you will share with others or take home BEFORE you start eating. Once you are in the eating situation, it becomes more difficult to stop eating. Discuss strategies and examples (see pages 85-88).

Review strategies for eating healthy while dining out:

1. Plan ahead (how can one plan ahead before eating out at a restaurant?) There are several approaches that can be discussed. A critical feature involves planning ahead.
2. Ask for what you want.
3. Take charge.
4. Choose foods carefully.

Distribute a menu from a popular chain restaurant (menus can usually be obtained from the restaurant's website) to each participant. Ask them to review the menu and place a "mock" order of what they would select at this restaurant. The goal is to order an appetizing meal that is relatively low in calories. What types of foods would they select and what could they ask the wait staff to modify to make the meal healthier? For practice purposes, they can assume that the restaurant will honor their requests for substitutions (e.g., baked potato instead of creamy mashed potatoes) and any special requests (e.g., salad dressing or cheese sauce on the side). The purpose of this exercise is to practice making lower calorie and/or fat choices at restaurants (see page 89).

As an example, Chili's has a wide range of choices (<http://www.chilis.com/EN/menu/Pages/home.aspx#> will access the menu, and http://www.chilis.com/EN/Nutritional%20Information/Chilis_Nutrition_Menu_Generic.pdf will provide the caloric contents). Good choices at Chili's would be the dinner house salad (140 Calories) with lowfat ranch dressing (110 Calories), with a Chicken Fajita sandwich (350 Calories) or Guiltless Grill Salmon (480 Calories)

For some women, eating out is an easier place to control intake, because kitchen time, leftovers and clean-up are avoided.

4. Negative thoughts: addressing concerns about shape and weight (10 min)

A basic concept is that thinking patterns strongly influence behavior. For example, thinking that you ate something that did not fit into a diet plan can precipitate an episode of overeating. The thought pattern behind this might be that the diet was blown, so therefore one might as well eat anything and everything. Negative thoughts about body image or how others perceive you can also precipitate overeating. In this program, we encourage a stepwise approach to overcoming the effects of these negative thoughts. Many of these thoughts relate to shape and weight.

Extreme concerns about shape and weight can be a barrier to behavior change and the development of healthy attitudes about food choices and physical activity. The steps to

changing these maladaptive thoughts can be very helpful in getting these concerns about shape and weight into perspective. The first step is to identify the thought and to write it down (the actual thought) – use your food diary to make notes about your thoughts. Examples are “I am too fat to wear shorts,” or “I am too old and fat to go for a walk in the park.” Specific to breast cancer survivors, one might ask “What difference does it make if I lose weight. I’ll never look the way I did before the surgery?” Then ask: What is the actual evidence to support or refute this thought? The arguments and evidence to support the thought should then be identified and considered. After considering the evidence, the reasonableness of the thought (and behavior that is influenced) can be challenged and modified accordingly. One reaches a conclusion that will then be utilized to determine the subsequent behavior. (Give examples.)

Starting today, note the thoughts and feelings that you experience in your eating and exercise log. Pay attention to your general thoughts about body shape and weight as well as those specifically related to breast cancer. The thought itself should be noted, and then consider arguments and evidence to support the thought as well as arguments and evidence that cast doubt on the thought. This approach can be used to challenge the thought when it recurs. The outcome of the challenge is a restructuring of maladaptive beliefs.

5. Wrap-up and summary.
6. Skill Builder (page 90)
 - Use at least one strategy to eat healthier outside of home.
 - Note negative thoughts, values, and beliefs in the log
 - Set a specific goal for regular exercise this week; increase how often and how long you exercise.
 - Track your food and activity. Focus on calories in foods and plan to eat fewer calories than you spend.
 - Add to your list of activities to do instead of eating when you are upset.
 - Reward yourself!

Session 10

Session focus: Using negative and positive thoughts to affect exercise, continued emphasis on identifying and modifying negative thoughts and maladaptive beliefs, weight goals, continue efforts to increase self-acceptance, tips to manage buffets and picnics.

At the end of this session, the participants will:

1. Evaluate progress in self-monitoring, physical activity, and the meal plan, and continue self-monitoring.
 2. Describe positive and negative self-statements and their influence on achieving physical activity goals.
 3. Continue to monitor negative thoughts and to increase self-acceptance.
 4. Reassess weight goal.
1. Review of past week's activity and homework (15 min)

How is the group doing with lifestyle activity and exercise activity goals? What physical activity goals were achieved, and what helped to reach those goals?

What negative thoughts about body weight and shape were identified this past week? Which were general thoughts about body weight or shape and which were specific to breast cancer? Review strategies to identify, challenge and revise these thoughts.

Examine your food records to assess achievement of individualized goals for refining the eating pattern. Examine episodes of overeating. What preceded these episodes of overeating, in terms of meal patterns or negative emotions? Which alternative behaviors have been effective for you?

2. Using positive and negative thoughts and self-statements to achieve physical activity goals (20 min)

Positive and negative thoughts, or self-talk, is the running internal dialogue we all have with ourselves. Self-talk is extremely powerful because it can affect our feelings and our actions. Self-talk can help us process emotions (which is relevant to acceptance) and also self-talk can enable us to talk ourselves in or out of physical activity. Studies have demonstrated the power of self-talk, and that the effect of self-talk happens automatically. You can use positive thinking to help meet your activity goals and to eat consciously. Self-talk is a way to internalize the response to negative thoughts that we discussed last week.

What are some specific things you say to yourself about physical activity, either before, during, or after exercising? Discuss the most common positive and negative self-statements. Think about the statement, and the feelings and actions that follow. How do they make you feel? What is the most likely effect of these thoughts and feelings on your current and future physical activity? (Share examples for discussion.)

Saying the positive self-statements about physical activity every day is helpful. You don't have

to believe them: They will work anyway.

Negative thoughts and self-statements are how we talk ourselves out of exercising. We can either consciously stop dwelling on them, or argue against them. What are some counter-arguments to the negative self-statements that you wrote down? These arguments do not need to be sophisticated, but should be a rebuttal or a “last word” (see page 93).

There are several examples of negative self-statements that many people experience:

I don't have time.
I don't have the energy.
I just don't have discipline.
I'll do it tomorrow.

Some that relate to the overall program, or to weight concerns, are:

I'm not changing as fast as I would like.
I'm just not as young as I used to be.

Some that relate specifically to breast cancer survivors are:

Because of my treatment, I'll never look the way I used to...so why bother with exercise?
I deserve a break after all that I've been through.

The best counter to negative self-talk is to at least start exercising. No matter what, at least start and exercise for 10 minutes. If you want to stop then, it's okay. At least 90% of the time, if you just start, you will continue. If you don't, then you probably were too tired.

Examples of self-talk to get you started:

I will only exercise 10 minutes.
I only have to walk one mile, then I will decide whether I want to continue or go home.

Another strategy is to practice thought-stopping, if negative thoughts and self-talk are interfering with your exercise and meal plans (see pages 94-95 for discussion and examples).

After meeting their goals, few people reward themselves. Behaviors that are not rewarded are likely to fade away. People who praise themselves for doing their activity are more likely to continue than those who take their success for granted. The easiest way to reward yourself is with self-praise. Saying something positive to yourself during and after activity sessions will make you feel great about being active. Self-praise costs nothing.

What are good self-praise statements for you? Here are some examples:

I am so proud of myself for exercising.
I can do anything I set my mind to do.
What a strong woman I am!
I am doing something positive to take control of my health.

Say these to yourself after each workout. Again, even if you don't believe them, they will make you feel better.

What are the self-statements that occur when you look at your body or when you think about your weight and shape? Negative thoughts or self-statements tend to reinforce a negative self-image. As we discussed last week, these can be challenged and modified.

One of the nicest aspects of physical activity is that it can bring to mind the nice things about your body, when it moves and shows you your own strengths and capabilities. Your body can move you from Point A to Point B, and it enables you to enjoy all kinds of activities and pleasant things. When you exercise, the air and movement all remind you that your body has senses and enables you to interact with the earth.

A specific barrier to exercise that occurs in some women following breast cancer treatments is fatigue. How might these strategies that we have discussed help to counter fatigue? Are there tweaks in the timing or type of exercise that you are planning to do that might be particularly helpful?

3. Weight goals and primary goals (10 min)

Weight goals need to be distinguished from primary goals. Primary goals are the goals that you hope will be achieved as a result of weight loss, such as improving your appearance, increasing clothing choices, being healthier and fitter, improving relationships, and increasing self-respect and self-confidence. An important concept is that primary goals are independent from weight goals. For example, buying new clothes, changing hairstyle, making healthy food choices, and increasing physical activity are all independent from weight loss, and they are in many ways a more direct route toward achieving the primary goals. Although weight loss attempts are usually linked with the hope of achieving primary goals, these are really separate goals.

Another important concept is that moderate weight loss has many benefits. As we have discussed previously, even a 5-10% reduction in body weight has been shown to markedly improve risk factors and other indicators of health risk.

Most people who embark on a weight loss program have a desired weight and a tolerable weight range. Because we are challenging the cultural “ideal” weight, it is important to personally address your own desired and tolerable weights. Regarding your desired weight, ask yourself several questions again: Why do you want to be this specific weight? What have been your previous weight goals? When were you last at your desired weight, and how hard do you think it would be to maintain that weight? Identifying and accepting a realistic goal weight is a challenging task that we will continue to discuss at future meetings.

What are your primary goals? What exactly do you believe will be achieved with weight loss?

4. Increasing acceptance (10 min)

As we have discussed, bodies exist in all shapes and sizes. Many women who are overweight do not value or appreciate their bodies. As you pay attention to negative thoughts, you can also identify maladaptive values, and these values can also be modified to increase acceptance and

self-esteem. For example, a maladaptive value is if you believe that “only thin people are attractive.” A modified value is “people of all sizes can be attractive.” That type of value modification involves the same steps of identification and challenge that are useful for modifying negative thoughts.

How you think and talk to others can increase your own positive body image. Downplay weight and shape aspects of appearance by not criticizing others for these characteristics. Don't undermine or denigrate your own body. When you exercise, remind yourself of the joy of feeling your body move and function effectively, effects that are independent of weight loss. Focus on a variety of strengths in yourself and others, including the appearance factors that are readily controlled (such as smiling).

5. Manage buffets and social occasions

Similar to eating in restaurants, there are good strategies for special occasions and being a healthy hostess (see pages 96-97).

6. Wrap-up and summary.

7. Skill Builder (page 97)

- Continue to use the food/activity log for goal-setting and tracking progress
- Count calories and plan to eat fewer calories than what you spend
- Set a specific goal for regular exercise this week; increase days per week and the time for each exercise session. Remember to work at the "somewhat hard" level.
- Note in your log any negative thoughts that go through your head this week
- Respond with positive thoughts
- Read tips for dealing with special occasions and note those that you think you can do.

Session 11

Session focus: Stimulus control, convenience and exercise, tips for grocery shopping.

At the end of this session, the participants will:

1. Evaluate progress in self-monitoring, physical activity, and the meal plan, and continue self-monitoring.
2. Describe specific ways to maximize their resources and environment to support increased physical activity goal.
3. Know techniques for healthier grocery shopping.

1. Review of past week's activity and homework (15 min)

How is the group doing with the daily exercise activity goals and meal plan? What physical activity goals were achieved, and what helped to reach those goals? How are alternative behaviors being used to avoid overeating?

What was learned from examining self-talk (both the positive and negative thoughts) and techniques to make self-talk work to increase activity and to feel good about your body? What thoughts did you have related to breast cancer? How did they affect your motivation to continue with your eating and physical activity goals?

What negative thoughts and concerns about shape and weight arose this past week? How did you argue against them to reshape your thinking patterns?

2. The environment and physical activity (10 min)

The environment is simply the physical settings in which we live. Modern environments are designed to discourage exercise. Those who want to exercise regularly need to understand the environmental conditions that make it difficult to be active and make plans to compensate for the lack of environmental support.

As we discussed in the first sessions, it is helpful to know your own environment. Now that you are becoming a regular exerciser, re-evaluate your environment and note the following: Do you have sufficient equipment or supplies for times when you need to exercise at home? What kinds of opportunities for lifestyle activity do you have? Where can you take the stairs? Where can you incorporate more walking into your day? Have you exploited all of the facilities and possibilities for physical activity in your neighborhood? Have you identified the most attractive routes in your neighborhood for walking or biking, parks and recreation facilities, and health clubs? A good goal is to go and try out all of the facilities that you can think of in your neighborhood (remember, just plan to go once to "check it out").

The overall aim of this re-review of your environment is to determine how to make maximum use of your local resources. In doing this review and regular reexamination, you may find new facilities or ideas to try. Make a plan to use them more.

3. Stimulus control and convenience (10 min)

The environment can help to influence exercise as well as food intake. There are many stimuli that discourage exercise, but the point of this discussion is that you can control some of the stimuli. You need to control your environment to exercise regularly with fewer barriers. To illustrate this point, consider the ways that environment can discourage activity. (Group discussion.)

Examples of barriers are:

- Eating too big a meal, or eating just before planned activity time.
- Important activities that come up at the time you are supposed to exercise.
- You start a task that won't be completed before the planned exercise time.

Essentially, this helps to identify triggers that lead you to skip exercise sessions. You can control these things, however, but you need to be insistent about protecting your exercise time. You need to avoid doing or being in the presence of these barriers. The first step is to recognize that these are your trigger situations and to avoid them.

You can also modify your environment so that you have positive cues to exercise, which makes exercise easier. Discuss examples (see page 99). Cues to exercise can include keeping your supplies and necessities (i.e., walking shoes, exercise clothes) in your car at all times, and putting exercise in your appointment book. Put reminders to exercise around your house, and place your self-monitoring papers in a place where you will see them regularly. Don't go home until you have stopped at the fitness center or have done your exercise for the day. Plan to exercise close to work or home (i.e., research shows that we are not likely to continue exercise that takes place far from home or is inconvenient).

The theory of behavioral economics says that we tend to do things that are easiest or most convenient. This is another way to increase the likelihood of being active, and there are probably some ways that you can make your activity more convenient. There are specific things that we can do to make it more convenient. We assume exercise requires some inconvenience, but it is necessary to minimize the inconvenience. One reason we encourage you to have a piece of aerobic exercise equipment at home is that sometimes that can be the ultimate convenience – even if it is not your favorite way to exercise, it is always available for Plan B when Plan A does not work out.

How would you define a convenient activity:

- Do any time: Easier to fit into a schedule
- Close by: Home, work
- Minimal equipment: Put on shoes and walk
- Minimal people: Individual activity
- No special skills

As we have discussed in earlier sessions, eating patterns and food choices are influenced a great deal by the environment. Most people have more control over their food environment and food cues than they realize. In addition to the stimuli control strategies that we discussed

earlier, additional specific strategies that have been shown to be helpful include reconsidering the sizes of food containers that you purchase, removing visual cues of food on counters and tables, modifying the amount of food prepared or served at meals (lots of the low-energy-density foods), and evaluating the environment (even rooms or offices) where you spend your time.

4. Tips for grocery shopping (15 min)

What are some tips for healthy grocery shopping? Brainstorm with participants and review strategies in the participant notebook (pages 100-103).

5. Wrap-up and summary.

6. Skill Builder (page 104)

- Continue to use the food/activity log for goal-setting and tracking progress
- Count calories and plan to eat fewer calories than what you spend
- Set a specific goal for regular exercise this week; increase days per week and the time for each exercise session. Remember to work at the "somewhat hard" level.
- Continue to note negative thoughts that go through your head this week in your log; write back positive thoughts.
- Look at your physical activity and food environment. What can you learn from the food diary about environmental factors that you might need to change?
- Try at least one tip for healthy grocery shopping this week.

Session 12

Session focus: Body image, managing overeating episodes, lapses, interval training.

At the end of this session, the participants will:

1. Evaluate progress in self-monitoring, physical activity, and the meal plan, and continue self-monitoring.
2. Describe the complexities of body image and additional strategies for improving body image.
3. Describe problem-solving and identify more alternative behaviors and coping mechanisms to reduce risk for overeating.
4. Learn from lapses.
5. Learn what interval training is and its benefits.

1. Review of past week's activity and homework (15 min)

What new aspects did the group discover about their physical activity environments? What is the progress with the physical activity goals? Are you increasing your daily planned activity (especially duration and time)?

Examine the activity log and the food diary. Are there some barriers and possible solutions to keeping the monitoring and record-keeping on a daily basis?

How are negative thoughts being identified and reframed?

How are you using self-talk to support exercise and healthy food choices?

What grocery shopping tips were used?

2. Body image (15 min)

In earlier sessions, we have discussed how culture strongly influences our ideas about beauty and "ideal" body weight and how strict dieting is unlikely to promote long-term mental and physical health. We have discussed ways in which breast cancer has affected body image and how that might affect your motivation to lose weight. We have discussed the need for tolerance for all the shapes and sizes of bodies and we have begun the process of accepting and appreciating our own bodies.

The importance of developing a positive body image cannot be understated. However, changing body image is a very challenging task, which requires much effort. There are many misconceptions that go along with the concept that being thin as the ideal. For example, it is assumed that being thin means that all aspects of one's life are more likely to be successful. Letting go of the goal of being thin can even cause a grief or sadness reaction.

Many women actually overestimate their body size. As we have discussed previously, many women think that others are paying more attention to them (and being critical of them) than actually is the case. Women differ greatly in how they react to changes in their body image as a

result of breast cancer treatment. What is important is separating fact from speculation or emotional reasoning. For example, a woman might say “I am no longer physically appealing because I have lost a breast.” What is the evidence to support such an absolute statement? How would you challenge that viewpoint?

Examine how many women, in particular, unknowingly reinforce the apparent importance of looks and the narrow cultural definitions of beauty. For example, we often say “Hello, how are you, you look great,” simply as a form of greeting. (Alternatives would be to say “You look happy,” for example.) As we have discussed previously, what we say can actually affect our thinking patterns. Most importantly, being heavier than desired or gaining weight needs to be distinguished from being undesirable, unattractive, or unworthy.

Poor body image is often part of a broader negative perspective of oneself, or low self-esteem. One approach is to get a picture of how all of your roles and attributes interact with each other, which helps to see the positive and neutral characteristics and the sum of your parts.

3. Preventing overeating episodes and learning from lapses (20 min)

For most women who have been chronic dieters, episodes of overeating are evident in the food diaries by this stage of the program. In addition to avoiding strict food restriction, there are several strategies that may help to reduce the frequency of these episodes or the amount of food that is consumed. Typically, thoughts and negative moods may precede the episode, and aspects of the environment may also contribute (suggesting the possibility that environmental or stimulus control is not being maximally utilized), including stressful interpersonal situations or social pressure.

Negative emotions are a common trigger for overeating. Also, negative thoughts about weight and shape can be a trigger, and when they occur, they should be noted and evaluated. The most important task is to erase the old tapes and self-talk that reinforce the negative body image, and to replace these with recognition of positive attributes and good qualities. Also, using alternative behaviors to overeating is an essential skill to prevent these negative emotions and thoughts from being a trigger for overeating. Developing and practicing alternative coping mechanisms for dealing with these feelings is important, as we have discussed. Which alternative behaviors have been helpful for you? (Brainstorm more ideas: writing in a journal, talking to friends, and playing favorite CDs.) Alternative behaviors that are incompatible with eating should always be close at hand and on your mental list.

Your food/activity/thoughts record can help to problem-solve when difficulties have occurred, using the same stepwise process we have discussed. Lapses provide an opportunity to learn. The first step in problem-solving is to identify the problem as soon as possible after it has occurred. Next, all the ways of dealing with the problem should be considered, with many potential solutions generated. There are several strategies for analyzing the causes of lapses and strategies for managing slips and lapses (see pages 106-107).

4. Interval training (10 min)

Each week, the duration of the daily exercise activity needs to be evaluated, and the goals adjusted for your increasing fitness level. As we discussed previously, time and regularity are important issues particularly relevant for weight loss. Also, the intensity must be sufficient to produce effects.

If you are feeling bored with your exercise goals and patterns, or you want to increase your tolerance of higher intensity exercise, interval training may be helpful for you (see page 108).

5. Wrap-up and summary.

6. Skill Builder (page 109)

- Continue to use the food/activity log for goal-setting and tracking progress
- Count calories and plan to eat fewer calories than what you spend
- Set a specific goal for regular exercise this week; increase days per week and the time for each exercise session. Remember to work at the "somewhat hard" level.
- Continue to write in your log negative thoughts that go through your head this week; write back positive thoughts.
- In your food diary, note your feelings before and after any overeating episodes for future discussion.

Session 13

Session focus: Social support, physical activity goal reassessment,

At the end of this session, the participants will:

1. Continue self-monitoring of food intake, physical activity and negative thoughts.
 2. Reassess physical activity goals.
 3. Describe the role of social support in helping or hindering physical activity and healthy eating.
 4. Identify ways to get more social support if needed to promote physical activity.
 5. Review injury prevention and management.
1. Review of past week's activity and homework (15 min)

Review of food and activity records completed since the last session. How is the meal plan working out? Are group members attaining the weekly physical activity goals? For those who were successful, what helped them to reach their goals? Who did not successfully complete the goals and what things got in the way? How can problem-solving be applied to address these challenges and barriers?

Is the physical activity goal appropriate for your current capabilities and fitness level? These goals need adjustment at regular intervals.

What negative thoughts were recorded and addressed? What thoughts/feelings did you have that were associated with high-risk situations and actual or near lapses. What aspects of self-talk were used this week? How are the alternative behaviors and coping mechanisms having an effect on managing negative emotions? What thoughts or feelings came to mind about body image concerns specific to breast cancer? How did you challenge those thoughts?

2. Social support and physical activity (35 min)

For the most part, humans are social creatures. People influence our lives, for better or for worse. Research shows that people can have a strong influence on health behaviors such as physical activity and eating. Studies indicate that social support is one of the most important influences on physical activity, particularly for women.

Discuss ways that people can encourage or support your physical activity:

- Be active with you
- Entertain you during the activities
- Encourage you to start exercising (in a helpful and positive way)
- Offer to go walking or ride bikes with you
- Remind you that exercise may reduce stress
- Teach you things about activity
- Reduce some barriers, such as do a chore so that you have a chance to exercise
- Be a good role model.

Others can also put pressure on you to stay sedentary or stop exercising:

- Tell you to wait to exercise until after some event is over
- Make fun of you for starting out slowly or doing lifestyle activities
- Tell you that you look dumb when exercising
- Tell you that exercising is a waste of time
- Tell you that you don't need to exercise, that you are healthy and look good
- Tell you that exercise is boring.

Interestingly, just knowing a lot of people who are active helps you to be active. The effects of social support are subtle but strong.

Some people need more social support than others; for example, having a workout partner or a scheduled class is essential for some, but not all, people who are physically active. (In comparison with those who exercise more or better with social interaction, some people like to take walks alone or swim to do their thinking or meditation.) Discuss personal preferences and experiences with the group.

If you need more support or want to maximize your social support, there are techniques to do so. For example, consider who you would like to provide support. Then, consider very specifically what you would like them to do, before you ask them for what you want. To be most effective, ask for support with a positive angle (i.e., rather than nagging). Ask for praise, for doing activities together, or for other things that make the effort mutually enjoyable. Also, keep the requests simple in addition to specific, and ask your supporter to do things they will be comfortable doing. You can also request that people stop doing things that discourage you from being active.

How does social interaction influence the ability to maintain the meal plan?

People can also act as triggers to eat. Ask participants to identify people who they associate with eating (i.e., these people should include those with whom the participant is likely to overeat). These people may include spouses or significant others who overeat together. There may be some overlap between activities (parties, restaurant eating, socializing) and persons (friends, relatives).

Once these persons are identified, the goal is to find alternative ways to interact that either does not involve food (e.g., going for a walk or shopping instead of eating) or at least does not involve eating certain types of food (e.g., go to a different type of restaurant, split dessert, or select foods/snacks that are lower in calories). Have participants come up with alternatives which they can try this week.

Sometimes family members and friends can sabotage efforts to eat better. As with exercise, the best approach is to decide exactly what is needed, and communicate the specific desired behavior.

Discuss social support with examples from the group. Are they currently getting social support, and are there group members who need help getting social support? There are several

strategies that can help to improve your social support (see pages 112-115).

Also, there are many community-based groups and communications that might help to increase your social support in terms of cancer-specific issues and problems. These are available in our own community and also through the Internet.

You can determine from whom the support is needed and to define specifically what support is needed. A specific request (i.e., “It helps me when you eat your evening bowl of ice cream in the other room” or “Please take a half-hour walk with me each morning”) is better than a general one (“Don’t eat in front of me” or “Exercise with me”). How the request is made is also important. Review with participants the steps involved in responding assertively (i.e., how to ask): 1) Describe the behavior that is bothersome to you, 2) What is the effect it is having on you, both behaviorally and emotionally, 3) Specify what you would like changed, and 4) Describe the consequences of this change for you. How will you feel if the person does what you request?

Once a request has been made and an agreement or plan has been established, negotiate what will be done in return for support. Talk with the support person to determine how the participant may help them with some particular task.

Follow-up: Determine whether specific needs are being met. What will you do to assess if you are getting what you need? Offer praise if appropriate (i.e., Thanks for watching the kids, it made it a lot easier, rather than Thanks for being supportive). Praise is one of the most helpful things your family/friends can do for you. Showing appreciation and giving praise is a good way to encourage your friends’ and family’s support.

In addition to requesting support from family and friends, there are a variety of difficult real-life situations participants will encounter that may require them to ask for assistance, make a request, or stand up for themselves (e.g., asking a hostile server how a dish is prepared at a restaurant, asking co-workers to go to a restaurant that offers low-calorie options rather than high-calorie selections, refusing pressures to eat, responding to guilt trips related to weight control efforts). Therefore, this is an important skill to learn and practice. It is important for participants to present the request or “defend” their position in a manner that is direct and fair to themselves and others.

3. Review of injury prevention (10 min)

Injuries related to physical activity can be acute or chronic. As the exercise recommendations in this program have been individualized, the goal has been to prevent injury. A few general points are notable and worthy of review with the group at this point.

Injuries can be prevented in many instances by progressing gradually, at a rate that is not too fast for your entry-level degree of flexibility and strength. It is also important to warm up prior to a workout, which means doing gentle movement and activities that begin to increase blood flow to the muscles. Warm-up and stretching are two different tasks, because warming up makes the muscle and connective tissue more pliable, and more resistant to injury. Avoid sudden,

explosive movements. Developing flexibility is crucial for older women. Without a special focus on this aspect of physical conditioning, the risk for injury and having constraints in your ability to exercise are great.

How do you interpret pain when it occurs during or after exercise? We have emphasized the importance of not “overdoing it,” so hopefully, risk for serious problems is minimized. However, tendon, joint and other pain can occur after an increase in exercise intensity. (Discuss how to interpret the body’s signals.)

How to treat simple and common injuries: RICE (rest, ice, compression, elevation).

4. Wrap-up and summary.

5. Skill Builder (page 117)

- Continue to use the food/activity log for goal-setting and tracking progress
- Count calories and plan to eat fewer calories than what you spend
- Look at, check and, if needed, change your physical exercise goals: are you making progress forward?
- Continue to write in your log negative thoughts that go through your head this week; write back positive thoughts.
- In your food diary, record your feelings before and after any overeating episodes for future discussion.
- Group members needing social support: Find specific persons to support you and ways to obtain support for physical activity. (The worksheets on pages 116 and 117 can help.)

Session 14

Session focus: Enjoyment of physical activity, circuit training and cross-training, healthy cooking tips

At the end of this session, the participants will:

1. Continue self-monitoring of food intake, physical activity and negative thoughts.
2. Describe the importance of enjoyment in maintaining increased physical activity.
3. Identify ways to have more fun in physical activity.
4. Describe and use circuit training and cross-training strategies.
5. Know healthy cooking tips.

1. Review of past week's activity and homework (15 min)

Review of food and activity records completed since the last session. Are group members attaining the weekly physical activity goals? For those who were successful, what helped them to reach their goals? Who did not successfully complete the goals and what things got in the way? How can problem-solving be applied to address these challenges and barriers?

How is the meal plan working out? What kinds of restaurant experiences have been positive and helpful for you? Discuss progress with reducing overeating episodes. Does your meal plan need an adjustment?

Which alternative behaviors have you used to prevent overeating in response to negative thoughts or emotions?

Discuss the results of efforts to maximize social support for physical activity and following a meal plan.

2. Enjoyment (15 min)

People continue doing things that feel good, and they discontinue doing things that do not feel good. Enjoyment is absolutely essential if physical activity and desired eating patterns are to be maintained. One of the strongest behavioral principles supports this basic concept (reinforcement).

One reason that many people do not exercise, or tend to discontinue physical activity not long after starting to exercise, is that many adult exercises are potentially repetitious and boring. Another factor is that if you are not good at sports, you are likely to get embarrassed by doing activity. Women, in particular, have not been encouraged to exercise throughout life and may be uncomfortable with many aspects of physical activity. Many people do not feel comfortable in the common places where people exercise (i.e., health clubs at which members are thin and wearing exercise clothes that emphasize the body).

There are many ways to increase the level of enjoyment of physical activity. An important first step is to be sure to always choose an activity that you enjoy, as you set exercise and physical

activity goals. Dancing, shopping, and walking in pleasant surroundings are often already enjoyable even by very sedentary people who do not think that they enjoy any form of exercise. Another important concept is to choose a comfortable and sustainable intensity level. Doing activities at too high an intensity level is more likely to cause discomfort and even pain, which precludes enjoyment. If you are very uncomfortable, then the exercise goal needs to be reevaluated.

Plan to do your activity in a place where you feel safe, and seek out pleasant and interesting surroundings. If you do your activities indoors, consider air conditioning, amount of space, and choice of equipment. If you do activities outdoors, consider temperature, scenery, crowds, traffic, and surface.

You may need to diversify (different activities and places), because some people are bored doing the same thing in the same place all the time. Having a change of scene every week or two can make regular activity more interesting.

As we discussed last week, social support may also help to make physical activity more interesting. Another general tactic is to distract yourself, such as listening to music, watching television, having a conversation, reading, or watching scenery. Other useful tactics are listening to books on CDs, and arranging any home exercise equipment so that there are stimulating distractions and pleasant surroundings.

Self-talk is a useful part of making physical activity more enjoyable, when negative self-talk can be replaced with more positive self-talk. Examples are:

Negative self-talk

I've only done 10 minutes.
I've just started and I'm tired.
I don't have time for this.

Positive (alternative) self-talk

I'm 30% done.
I'm getting warmed up.
I'm proud that I am squeezing in this activity session in such a busy day.
I am doing something positive for my health.

Don't use your exercise time to do your worrying, but instead make that time a mental vacation. Make it a rule to think your most enjoyable thoughts during physical activity. Practice using mental imagery to wipe away the unpleasant thoughts when they creep into your mind while exercising (i.e., a wave washing away the thoughts that are written in the sand, watching the thoughts attached to balloons float away in the breeze).

What are the group's experience with increasing the enjoyment of exercise? (Group discussion.) What are other important ways of increasing enjoyment beyond those discussed? How is your food plan enabling you to enjoy eating?

3. Circuit training and cross-training (10 min)

Circuit training is an excellent way to simultaneously improve mobility, strength and stamina. The circuit training format utilizes a group of strength exercises that are completed one exercise after another. Each exercise is performed for a specified number of repetitions or for a

prescribed time period before moving on to the next exercise. The exercises within each circuit are separated by brief, timed rest intervals. The total number of circuits performed during a training session varies depending on your training level and time.

Cross-training basically means having more than one type of physical activity that you can do reasonably conveniently and regularly. Cross-training may add to the enjoyment of physical activity because it adds diversity. In case an injury occurs so that the primary activity cannot be performed for a brief period, cross-training may also provide an alternative form of exercising.

As you examine your activity log and goals this week, consider including more than one type of activity (in addition to lifestyle activity) to address with an exercise goal.

4. Identifying barriers to change (10 min)

Sometimes people have “mental barriers” to change exercise and eating habits that are due fear. What past experiences have you had with changing physical activity and eating patterns? How do those experiences influence how you think and feel about your current goals? Imagine yourself slim – what kinds of feelings do you experience? In addition to feelings of success, are there new expectations or situations that could be hidden in your thought patterns?

Explore these feelings with the group.

5. Healthy cooking tips (10 min)

Preparing lower-calorie and healthy foods is a good skill to learn and apply (see page 121).

6. Wrap-up and summary.

7. Skill Builder (page 122)

- Continue to use the food/activity log for goal-setting and tracking progress
- Count calories and plan to eat fewer calories than what you spend
- Look at, check and, if needed, change your exercise goals.
- Rate how much you enjoy your physical activity. Find ways to make your exercise more enjoyable. Set a goal to try at least one of these ways.
- Continue to note in your log negative thoughts that go through your head this week; write back positive thoughts.
- Try one of the tips for healthy eating.

Session 15

Session focus: Commitment, handling holidays and vacations.

At the end of this session, the participants will:

1. Continue self-monitoring of food intake, physical activity and negative thoughts.
2. Describe the importance of commitment in continuing the regular habit of physical activity.
3. Identify ways to demonstrate commitment to physical activity.
3. Evaluate progress in self-monitoring, physical activity, the meal plan, and identifying and restructuring negative thoughts.

1. Review of past week's activity and homework (15 min)

Review of food and activity records completed since the last session. Are group members attaining the weekly physical activity goals? For those who were successful, what helped them to reach their goals? Who did not successfully complete the goals and what things got in the way? How can problem-solving be applied to address these challenges and barriers?

What were the group's experiences with adding enjoyment to physical activity? Was circuit training helpful as an approach to strength training exercise?

How is the meal plan working for you?

Discuss negative thoughts about shape and weight this past week. Review the steps toward identifying and modifying these thought patterns.

2. Commitment (10 min)

An important step in establishing a regular habit of physical activity is to have such a high level of commitment to activity that you cannot imagine yourself ever becoming sedentary again. The best way to increase your commitment is through demonstrating your commitment. Commitment is something you do, because you show it through action.

Rate your own level of commitment at this time. Are you more or less committed than you thought you would be?

People who demonstrate their commitment through action are unlikely to drop out of exercise. Commitment keeps you exercising in bad weather, during times of stress (at which time exercise can actually be quite helpful), or when there are many demands on your time. If you show other people how committed you are, you will be embarrassed to drop out of exercise. You create positive peer pressure for your exercise. Doing things that show your commitment actually changes your own self-image. You define yourself as a successful and committed exerciser.

Being an activist is one way to show your commitment. The first level of activism is helping

someone else become or remain physically active. This can be accomplished by being a positive role model, and by showing how physical activity can add to your enjoyment of life. Ask what activities they like, and answer their questions about activity (in particular, tell them about the benefits of exercise). Ask if they would like you to assist them in becoming more active or overcoming barriers to activity. Invite them to do activities with you. Adopt a couch potato: find someone who is not active but who wants to be and is open to your help.

One of the benefits of helping a friend become more active is that you create some social support for yourself. However, you should be prepared for people to be uninterested in your assistance, so be ready to talk to several of your friends or acquaintances until you find someone who would like some assistance or encouragement from you.

Recruiting and encouraging someone else to increase physical activity has a very reinforcing effect on your own exercise patterns and commitment.

3. Holidays and vacations (30 min)

Have participants share images (e.g., good times, family traditions, stress, loneliness) and activities (e.g., parties, baking, eating and drinking) associated with holidays like Thanksgiving, Christmas, and New Years.

Holidays mean that special (and sometimes meaningful) foods fill the home and workplace, and holiday-related social events can involve increased exposure to high-calorie holiday foods. Eating extra calories and not achieving planned exercise goals (due to time being spent on holiday activities) may result. Planning ahead for how you will manage holiday challenges to achieving your goals is the first place to start (see page 123). What problems may arise, and how can you manage them (see discussion worksheet on page 124 and tips on page 126)? Budget your calories so that you can include some of your special holiday favorite foods (and thus not feel deprived) and don't waste calories on the foods that are always available or not your favorites. Note that there are aspects of the holidays that can be helpful in promoting increased exercise. For example, gyms and health clubs are usually less crowded, and time off from work means you have more time available for exercise. Getting together with family and friends during holiday visits or trips provides a great opportunity to be active with others, and to share your enthusiasm for feeling your best.

Most importantly, although eating and drinking are part of the holiday celebrations, they should be kept in perspective. What pleasures, other than food and drink, can participants focus on during the holidays (e.g., gift giving, decorating, socializing) to make them meaningful but not interfere with your weight loss goals? Discuss the advantages of focusing on social aspects (rather than food) during the holidays. (See discussion worksheet on page 125.)

For many people, vacations are a time to escape from everyday work and family responsibilities and indulge in more pleasurable activities. Similar to the situation with holidays, the first step is planning ahead (see page 127). Check out the exercise possibilities before you commit to a hotel or resort. If you will be spending time at the homes of family and friends, explore the possibilities and opportunities in their neighborhoods before you go or as soon as you arrive.

Often nearby gyms, hotel fitness centers, and health clubs have daily or weekly passes available for minimal cost that would allow you to keep up your planned exercise activities when you travel. Some characteristics of vacations can actually be very helpful for healthy weight management. For example, you get out of your home and work environment and the temptations of your own kitchen and pantry - away from the environmental factors that stimulate eating and into a new environment full of interesting things to see and do. As with holidays, budget calories so that you can include some truly special new foods and don't waste calories on foods that are not so special or not your favorites. (See discussion worksheet on page 128.)

4. Wrap-up and summary.

5. Skill Builder (page 129)

- Continue to use the food/activity log for goal-setting and tracking progress
- Count calories and plan to eat fewer calories than what you spend
- Look at, check and, if needed, change your exercise goals
- Continue to note negative thoughts that go through your head this week; write back positive thoughts

Session 16

Session focus: Stress management.

At the end of this session, the participants will:

1. Continue self-monitoring of food intake, physical activity and negative thoughts.
2. Describe the importance of physical activity in promoting mental health.
3. Identify ways to use physical activity in stress management.
4. Learn ways to prevent stress and techniques to deal with stress.
5. Evaluate progress in self-monitoring, physical activity, the meal plan, and identifying and restructuring negative thoughts.

1. Review of past week's activity and homework (15 min)

Review of food and activity records completed since the last session.

How did the group members progress with demonstrating commitment by working with a couch potato? Are any group members planning fun physical activities or expanding their repertoire of satisfying activities?

Discuss the individualized meal plans. Have you encountered additional barriers and challenges in managing food and food choices? What adjustments have been made?

How are the group members using alternative behaviors to reduce overeating? Which negative thoughts have been identified and addressed?

2. Mental health and physical activity (5 min)

Note that evidence from research studies demonstrates that physical activity is associated with improved mental health and well-being. In particular, studies have shown that regular exercise reduces mild to moderate depression, anxiety, stress and fatigue.

3. Stress management (20 min)

Stress is simply a reaction to changes in the external or internal environment that suggest a need to adapt, when you perceive that you are not able to make those changes. Many internal and external events serve as stressors and may include thoughts related to breast cancer. In the stress response, there are physiological, behavioral, emotional and cognitive effects (thoughts). Many people develop unhealthy ways of trying to manage stress, such as alcohol abuse and overeating, or may be unable to sleep or function. Stress is a necessary part of life, so one cannot eliminate it but instead must learn to manage it. A very important point is that physical activity is an effective way to decrease stress. Research shows that even moderate physical activity can reduce anxiety and enhance overall well-being.

Several strategies can help to manage stress. One strategy is to alter the situation, by getting rid of or changing the stressor whenever possible. A second strategy is to avoid the situation: If

you know something is going to be stressful for you, avoid it if you can. A third strategy is to adapt to the stressors, by changing the way you think of them. Challenge your thoughts, as we have practiced earlier in this program, because often situations can be redefined to be experienced differently.

There are several strategies to preventing and managing stress (see page 131). These including taking charge of your time, using problem-solving to alter the situation, and planning ahead. Applying instant coping strategies, such as deep breathing, can also help get you through a stressful situation (page 132). Learning and practicing purposeful relaxation exercises can also be helpful (page 133) – practice letting go of your body with the group (page 134).

4. Fatigue (5 min)

It is not uncommon for breast cancer survivors to experience higher than normal levels of fatigue even years after completion of treatment. While it seems counter-intuitive, regular exercise has been shown to reduce fatigue. While this doesn't necessarily mean that you shouldn't make sure you get enough rest, it does suggest that a balance between rest and regular exercise may help to significantly reduce any fatigue you might experience.

5. Lifestyle activity (5 min)

Keeping active throughout the day through lifestyle activities can make a big contribution to overall physical activity and can also facilitate healthy weight management. Examples discussed earlier include parking further from the door, taking the stairs when possible, and using small tasks as an excuse to move your body more when doing regular activities.

Using the pedometer can enable self-monitoring of walking. Increasing the number of steps you take every day is a subtle but effective way to burn more calories through lifestyle activities. Setting a goal to increase the number of steps you take provides a focus to increasing lifestyle activity.

6. Wrap-up and summary.

7. Skill Builder (page 135)

- Continue to use the food/activity log for goal-setting and tracking progress
- Count calories and plan to eat fewer calories than what you spend
- Examine, evaluate, and adjust your exercise goals.
- Continue to note log negative thoughts that go thoughts your head this week; write back positive thoughts.
- Try at least one stress preventing technique and at least one stress coping technique this week.

Session 17

Session focus: Focus on relapse prevention and management

At the end of this session, the participants will:

1. Continue self-monitoring of food intake, physical activity and negative thoughts.
 2. Describe techniques to prevent the expected interruptions in physical activity from becoming a sustained pattern.
 3. Identify ways to rate yourself on the relapse continuum and link your potential situation with strategies to get back on track.
 4. Learn strategies to regain control over eating, when relapse occurs.
 5. Evaluate progress in self-monitoring, physical activity, healthy eating, and management of negative thoughts and feelings.
1. Review of past week's activity and homework (15 min)

Review of food and activity records completed since the last session. Which behavioral skills are proving to be most useful in promoting the maintenance of physical activity? How are factors such as environmental control, social support, and enjoyment being utilized to enable achieving the weekly goals?

How is the meal plan working, and is it time for a readjustment? What are some examples of good food choices that you would like to share with the group? What challenges have you faced in making good food choices?

How are the group members increasing their lifestyle activity?

Which negative thoughts and feelings were identified and addressed this past week?

How did you react to stressful situations? What thoughts and feelings did you experience? Did the stress have an impact on your physical activity and eating goals? What techniques did they try?

Did you experience fatigue this past week? Were you aware of an automatic response to this fatigue (e.g., to sit or lie down and rest)? Did you try exercising as an alternative? If so, how did you feel afterward?

2. Relapse in exercise and eating behavior (30 min)

Even during a lifetime of physical activity, interruptions in the activity pattern are inevitable. These are 'lapses' in your behavior change process. What are some of the causes for these interruptions? (Discuss examples such as injury, illness, travel, vacation, relatives, work demands, home demands.) In some of these instances, good planning ahead of time may even prevent the lapses or at least keep them from resulting in the complete resumption of old patterns. For example, planning for travel can include considerations of how and when exercise can be incorporated. In other cases, the disruption may be unavoidable. It is important to

recognize that the issue is not IF disruption occurs, but WHEN will it occur. It is far better to be prepared for it rather than letting it become a collapse of the entire effort.

The longer you are not active, the harder it is to get back on track. Thus, one goal is to minimize the effect of the interruption. Also, planning ahead with a Plan B (the alternative activity when an interruption occurs – see page 138) is essential.

A first important point for relapse prevention is to be aware of vulnerable situations. Second, devise strategies to contain the missed sessions to a minimum. Beware of self-defeating conditions, such as occurs with negative self-talk. Use the techniques of replacing negative self-talk with positive self-talk, as we have discussed. Self-defeating cognitions involve turning the “slip” into a total “collapse,” by using dichotomous thinking (all or nothing), which expands the interruption into a complete character judgment (“I’m a failure at this and everything”) or stops the activity completely (“I skipped exercise today, so the rest of the week is shot”). Keep exercise goals separate from the challenges of maintaining a regular eating pattern.

Irrational thoughts also can sneak in, to become contributors to the lapse. (Provide examples, i.e., “I am supposed to exercise 60 minutes and I only have 50 minutes so I’ll skip it.”) As always, this type of thinking needs to be challenged.

If you can identify where you are on the relapse continuum and get back on track without the judgments, you will reinforce physical activity as a habit for life. Apply the behavioral skills that are basic (as practiced in this program): set a reasonable goal, schedule and plan, make it as comfortable as possible, identify social support, and provide praise and reward for your effort.

As with physical activity, it is important to have realistic expectations about lapses with eating patterns. As we have discussed previously, women who have dieted a lot tend to view any deterioration in the food plan as a relapse. Note the difference between a lapse and a relapse. It is important to recognize that there are degrees of deterioration, and to be able to identify the dichotomous thinking patterns that become a barrier to lasting behavior change.

Eating problems can recur at times of stress. In this program, you have been learning (through practice) the techniques that will help you get control over eating patterns that are going awry. You have been learning skills that will need to be pulled back into your front vision if your eating pattern is getting worse or if you sense that you are at risk for relapse.

When eating problems may be recurring, set aside some time to reflect on the situation, because you need to develop a specific plan of action. If you have cut down on the self-monitoring, now is the time to resume. Plan your days ahead and your meals in some detail, so that you feel a sense of structure in your meals and planned snacks. Avoid long periods of unstructured time and also “overbooking” your days. Recall the alternative behaviors that are not compatible with eating, and plan these activities into each day. If you are thinking too much about your shape or weight, this may indicate increased anxiety or depression. Use problem-solving to identify any new problems that might be amenable to being resolved or addressed.

Another very helpful strategy is to talk to someone: Sharing concerns can help you deal with the

emotional aspects and describing concerns or situations can sometimes reveal solutions and coping strategies.

3. Reinforce a positive self-image (10 min)

Getting to know and accept yourself has been emphasized in this program. Being diagnosed with breast cancer, and simply being an overweight woman in the United States, can have a big effect on body image, and how you feel about yourself can have a big effect on your efforts to exercise and make healthy food choices. In respecting and valuing your true self, you also need to increase your awareness of situations that can arise in which you are at risk of reverting to a negative body image. Being aware of your psychological environment is part of preventing relapse to formerly bad attitudes and perceptions.

A good strategy is to be able to monitor your own feelings and responses similar to how you have learned to monitor your food intake and your activity patterns with record-keeping. Listening to your body's own signals can alert you to a problem or a situation in which your true self may be clouded and covered by bad feelings. Being aware of a problem situation is the first step, followed by considering the alternative strategies such as avoiding the source of the bad feelings or redefining your own internal response. In very simple terms, you need to move yourself toward the people and activities that are restorative and uplifting and reinforcing of good feelings about your true self, and move away from those that produce dark feelings and negative affect. If these situations are unavoidable, then problem-solving must be applied.

The important point is that you need to "look out for yourself" by being aware of your feelings and responses, in order to keep your mind and soul in a balanced and healthy place.

4. Wrap-up and summary.

5. Skill Builder (page 140)

- Continue your food and activity log.
- Be aware of calories in food and aim to eat less than you expend
- Review your food plan and change if you are having problems
- Examine, evaluate, and adjust your exercise goals
- Continue to note negative thoughts and respond with positive thoughts
- Anticipate three events or situations that may be expected to temporarily disrupt your physical activity pattern and healthy eating pattern. For each, write down strategies that may help to prevent relapse, and a plan that will get you back on track.

Session 18

Session focus: Review of behavioral skills and techniques

At the end of this session, the participants will:

1. Continue self-monitoring of food intake, physical activity and negative thoughts.
2. Recall behavioral skills and techniques that need to be considered when aiming for attainment of physical activity goals and healthy eating.
3. Continue to use cognitive restructuring techniques to alter maladaptive thinking patterns.
4. Continue to set reasonable goals to promote continued progress.

1. Review of past week's activity and homework (20 min)

Review of food and activity records completed since the last session. What barriers and challenges have been encountered, and when has problem-solving been utilized to allow achievement of goals?

Which negative thoughts were identified and addressed? How are alternative behaviors helping to manage negative emotions and minimizing relapse?

Are your friends and family members noticing changes in you and your activity patterns?

What are events that can temporarily disrupt the physical activity pattern and healthy eating pattern? What are strategies that may help to prevent relapse, and strategies that will get participants back on track.

2. Dealing with plateaus (15 min)

It is not uncommon for weight loss to slow or stop after the initial months of healthier lifestyle. Individuals commonly experience disappointment and frustration when plateaus occur and are at risk for relapse. Ask participants about their thoughts and feelings when their weight stays the same for a while.

Plateaus may be due to biological and/or behavioral factors. For example, as one's body size decreases, less energy is required to maintain body weight; therefore, if one continued to consume the same amount of calories as one did at a higher body weight, the rate of weight loss would decrease, if not stop all together.

Have participants think through questions they could ask themselves to help identify behavioral causes of a weight plateau. How accurately are you noting or recording your intake (see pages 141-142)? If adherence to self-monitoring, calorie goals, and/or activity is reduced, help participants think through what changes need to be made to get back on track and their associated costs. If adherence appears to be adequate, have them evaluate other measures of progress and assess the cost/benefits of continued weight loss at this time.

Setting a personal challenge can often provide a good boost to increasing your level of physical activity and awareness of food choices. For example, sign up for an upcoming walk-a-thon event, special hiking trip or bike ride. Consider committing to a new activity, such as ballroom dancing lessons.

3. Review behavioral techniques (15 min)

Because we have discussed so many skills and techniques in this program, briefly reviewing these many factors may help you to recall ideas that may be helpful for you now, at this point in your progress.

Self-monitoring: Recording your food intake and physical activity and thoughts. This process can be motivating when you are doing well and can be an early indicator when you need to spend some more effort or redirect your efforts to achieving your goals. This is a crucial source of information when eating and activity patterns demonstrate difficulty in achieving goals.

Goal-setting: Goals break up tasks into manageable parts. They are very specific: they tell us what we need to do for the week. Goals need to be realistic and attainable, working with our lifestyle, fitness level, body characteristics, time management and scheduling, preferences, and life situations. Continued progress with making good food choices, achieving and maintaining fitness and increasing lean body mass requires regular evaluation of the goal. Goals for food choices are flexible, based on guidelines, information and planning, rather than strict diet rules.

Scheduling and time management: We are all busy, so if we are going to fit in physical activity, we must be aware of how we spend our time and make choices about how to spend our time. It is a constant struggle to manage work, family, social commitments, domestic tasks, and relaxation time. Scheduling physical activity in our lives on a weekly basis helps us fit it in, as we juggle so many aspects of our lives. Remind yourself - physical activity gives us more energy so we can live fuller, richer lives.

Benefits and costs: We want to maximize the benefits because the wonderful gains from exercising are powerful motivators for regular physical activity. Concentrate on short-term benefits, to balance the short-term costs. Enjoy and appreciate the benefits that can be attained by exercise. Also, minimize or eliminate the costs, and use problem-solving to determine the solutions for the barriers. Making food choices that promote healthy weight management has a cost but the benefits for how you feel (in the present) and your health (in the future) must be recognized.

Self-talk: What we say to ourselves has a significant effect on our feelings and actions. We need to be aware of our self-talk and to increase positive thoughts while reducing or countering the negative thoughts. We also need to be nicer to ourselves about our bodies, and its accomplishments and capabilities. This strategy relates to reframing our thinking patterns, but it is a very specific application of how thoughts determine behavior.

Environmental control and convenience: If physical activity and exercise and healthy eating are convenient and supported by your environment, they are likely to continue. Look around at your

daily activities and surroundings and realize how you can maximize these factors. Controlling and influencing your environment makes it much easier to control your food choices and what you eat.

Enjoyment: People who continue doing exercise do so because they enjoy it. Similarly, a good long-term food plan is one that feels good to you, rather than like being “on a diet.” Your goals should reflect your preferences, and whatever you do can be made more enjoyable, which increases the likelihood that you will achieve your physical activity and healthy eating goals. Keep attuned for the best levels of regularity and variety that promote a healthy eating pattern for you.

4. Review the identification and challenge of maladaptive thinking patterns (10 min)

As we have discussed in previous sessions, the way that you think about yourself and your eating and exercise patterns has a huge effect on behavior. This is a highly individualized, collaborative way of examining your own thinking patterns, using the approach that starts with identifying the thought pattern and writing it down. After reviewing the evidence, a new course of action is taken and the thinking pattern is reframed.

Also, remember the importance of body acceptance. The images and messages around us, plus our internalized feelings and perceptions, can reinforce poor body image. This is true for body image concerns that are common to all women and also to concerns that are specific to breast cancer survivors. The solution is to systematically counter the messages and to provide regular, honest praise about our bodies and ourselves. Physical activity can also help tremendously. Using physical activity to increase body acceptance and body image, rather than solely to change the body, is a new concept for many women.

5. Wrap-up and summary.

6. Skill Builder (page 143)

- Continue to use the food/activity log for goal-setting and tracking progress.
- Count calories and plan to eat fewer calories than what you spend; check that you are recording accurately.
- Review your food plan and change as needed to allow long-term satisfaction.
- Examine, evaluate, and adjust your exercise goals.
- Continue to note negative thoughts that go thoughts your head this week; write back positive thoughts.
- Set a personal CHALLENGE. Plan for an event or gain a skill to really boost your exercise activity.

Session 19

Session focus: Review of progress, health benefits of exercise, weight maintenance

At the end of the session, the participants will:

1. Assess their progress, challenges, and goals.
2. Describe the health benefits of exercise and weight control for breast cancer survivors.
3. Continue self-monitoring of food intake, physical activity and thought patterns.
4. Prepare for changes in monitoring and behavior for weight maintenance.

1. Review of past week's activities and homework (15 min)

How well are you achieving your weekly goals? The key to using goal-setting most effectively is to make specific, detailed, behavioral goals.

For some people, self-monitoring in writing is something that can be very challenging. It is possible that by this time in the program, you may have developed an abbreviated method of keeping track of your behaviors. (Group members share their challenges and approaches.) In the long term, you will benefit by self-monitoring, and a sustainable approach is often one that involves less detail than we have stressed to date. Self-monitoring of body weight is another long-term behavior that we strongly encourage.

2. Physical activity, body weight and breast cancer survivors (10 min)

All women benefit from regular exercise and maintaining a healthy weight, but breast cancer survivors may have personal benefits. Although controlled clinical studies have not yet shown effects on survival, it is clear from the observational studies that women who maintain a healthy weight are at lower risk for recurrence. Also, regular moderate to vigorous exercise has been associated with lower risk for primary breast cancer and recurrence.

These are some benefits from exercise that breast cancer survivors have named:

- Exercise will help me lose weight.
- I feel stronger and healthier when I exercise.
- Exercise helps to lower blood cholesterol and reduces risk for heart disease.
- Regular exercise may reduce risk for cancer recurrence and new cancer.
- I will be more likely to see my children and grandchildren grow up if I stay healthy.
- Exercise helps me sleep better.
- If I exercise, I am calmer and I feel less stressed.
- Exercise increases and defines muscle, and so my body looks better.
- Exercise sets a good example for my family and/or friends.
- When I exercise, my clothes fit better and look better on me.
- When I exercise, it reminds me that I am a strong and resilient woman.

What are the motivators that work for you?

3. Weight maintenance (30 min)

Skills for weight maintenance are somewhat different from skills for weight loss. At some point in this program, weight stability (rather than weight loss) will be the goal. Weight loss and weight maintenance are separate goals and they present challenges in many ways. Long-term weight maintenance can be much more difficult than weight loss, because it is less reinforcing, indefinite, and there is little reinforcement from others.

In preparation for learning more about weight maintenance, we have previously discussed weight goals, body image, health benefits of moderate weight loss, and how primary goals are different from weight loss goals. When are you ready to change your focus to weight maintenance rather than weight loss? If your weight loss goal has been achieved, you are ready to switch gears to the goal of weight maintenance. Also, if weight loss has slowed down or stopped, or the effort of continued weight loss seems to exceed the perceived benefits, then it is time to consider this goal change. People sometimes observe a “plateau” and assume that there is some metabolic change that is in process, but the real issue is often a “behavioral plateau.” That also would suggest that it is time for focusing on weight maintenance rather than weight loss, at least for a set period of time.

Maintainable behavioral patterns can define the change in weight that you are likely to achieve at a given time. Hopefully, you decided on a realistic weight loss goal as we have discussed; however, this might still need some adjustment. Letting go of an initial weight loss goal and focusing on weight maintenance, for at least some defined time period (e.g., for the next six weeks or six months), is the strategy. A challenging aspect of this new goal relates to acceptance and body image, because the weight you are now aiming to maintain may differ from the “ideal” weight goal that you brought into this program. Although it is an important step to embrace weight maintenance as an important goal, it is acceptable to leave open the possibility that you might return to weight loss goals in the future – demonstrating that you can maintain weight loss can be an important accomplishment before further weight loss is attempted. Successful weight change often occurs over a very long time (even years), as a step-wise process.

The first step of weight maintenance is to define the weight range that will be maintained. The application of a range, rather than a specific weight, allows the normal weight fluctuations to be tolerated. We have encouraged you to monitor your own weight on a regular basis, and that should continue, using a weight graph as a useful strategy. Interpreting the fluctuations and changes in weight that you observe requires some knowledge and skills, and also being aware of the thinking patterns that can adversely affect your ability to problem-solve and make good choices. Caloric intake or exercise level will have to be adjusted in response to the consistent changes in weight. For most women, the caloric intake to maintain a higher weight is lower than the amount needed to maintain a lower weight. Fortunately, physical activity (which has been emphasized in this program) can also be manipulated, which should allow you to eat a reasonable amount of food and maintain your weight. In the simplest equation, successful weight maintenance requires balancing energy intake with energy expenditure. (See pages 145-149 for a summary of strategies for weight loss and weight loss maintenance.)

Now is a good time to start making your personal weight maintenance plan (see page 150).

Specify the goal weight range that you think is appropriate for you, key eating and activity habits, high-risk or danger areas, weight tracking and reviewing schedule, and when you will act. In future sessions, we will be increasingly discussing how food choices, activity patterns and thinking patterns affect the weight maintenance (rather than weight loss) goal.

4. Wrap-up and summary

5. Skill Builder (page 151)

- Continue to use the food/activity log
- Be aware of calories in foods, and aim to eat fewer calories than you spend
- Examine, evaluate, and adjust your exercise goals
- Continue to note negative thoughts; write back positive thoughts

Session 20

Session focus: Evaluating progress and motivation.

At the end of this session, the participants will:

1. Continue self-monitoring of food intake, physical activity and thought patterns.
2. Describe changes that have been made over the past few months, in physical activity and eating patterns.
3. Describe their greatest successes in behavior change.
4. Anticipate challenges that will occur in the next months and years, and describe the behavioral skills that are likely to be useful for weight maintenance.

1. Review of past week's activity and homework (10 min)

What barriers and challenges have been encountered? Discuss problem-solving, using examples from the group.

How are you keeping track of food intake and physical activity? What abbreviations did they use?

What strategies they choose for long term maintenance?

Are they feeling conflicted about switching gears to thinking mainly about weight maintenance rather than weight loss?

2. Self-praise and encouragement (10 min)

One aspect of self-praise is to recognize successes that you have achieved to date.

What have you learned about yourself from participating in this program?

3. What you have learned (15 min)

Studies show that behavioral skills can significantly improve food choices and also increase physical activity. Using the strategies we have discussed (and you have practiced) will help to maximize the chances of being regularly active beyond this time with our program and throughout your lifetime. Developing a healthy eating pattern that is sustainable takes some time, and lapses and slips can be learning experiences that help to move us forward.

As boss of your own behavior, and the one most knowledgeable about your barriers, challenges and needs, you are in a position to choose and use the techniques that are helpful to you. The key is to be flexible, expect and prepare for change, and use the behavioral and cognitive skills as needed. The strategies discussed in this program have been shown to really work, so use them.

Remember to expect occasional setbacks. Have a plan for dealing with times when you sense that your eating pattern is becoming a problem, and when achieving the exercise goal is becoming problematic. Setbacks provide an opportunity to learn, because if you review the circumstances and your thoughts and behavior during that time, you can learn how to prevent them from occurring again.

Use the worksheet (pages 153-155) to focus the group discussion. What are your goals for the next six months (see page 156)?

4. Weight maintenance (15 min)

What are the special challenges are faced with weight maintenance? As with weight loss, it helps to have a concrete, individualized goal, as a personal weight maintenance plan. (Share goals and experiences among the group participants.) What are the challenging situations that are expected to be faced in the future? What components of the program were most helpful in the past few months, and which strategies also may be helpful for weight maintenance?

Review the weight monitoring system. Have you described the specific range that will be the goal during weight maintenance? If you are weighing yourself regularly, the monitoring of these data is crucial. How do you interpret these numbers, when you see an increase or decrease? What would be your reactions when you see weight going steadily toward the upper range? Discuss the thinking patterns that may arise during this process. The “simple” solution, although it may not always feel simple, is that corrections and adjustments are likely going to be necessary through the process of learning weight maintenance.

These are the basic elements that make maintenance of weight loss challenging:

- * The goal is no weight change, or change only within a range, rather than weight loss.
- * Attention still needs to be paid to feeling good about yourself, because feeling successful and comfortable with yourself (as we have discussed) will help to keep you on track.
- * Weight maintenance is indefinite, so this is a long-term process.
- * Over time, you will get less reinforcement from others – although if you have developed some social support and are sharing your health gains, continued behaviors and persistence may be reinforced.

Discuss how the participants will evaluate changes in weight. Is it a rapid change or gradual change? What are possible explanations – changes in diet, exercise, illness, travel, or other factors? Specific strategies need to be developed, depending on the specific situation. Give examples and discuss approaches that will be used.

5. Facing future challenges (10 min)

Particularly during times when your weight is moving consistently toward the high end of your maintenance range, it is helpful to return to more detailed monitoring of your food intake, activities, and related thoughts and feelings. Barriers to making and maintaining behavior change are inevitable, so after identifying them, the next step is to problem-solve and develop solutions.

Many women in the group have lost weight and regained it in the past. Have you also started exercising in the past and then discontinued it? How is the situation different this time? Are you anticipating the challenging situations and times ahead?

6. Motivation (10 min)

Review ways to stay motivated in the participant book (page 157). Review goal setting and importance of rewards. Examine your own personal issues relating to motivation (see pages 158-159).

7. Wrap-up and summary.

8. Skill Builder (page 161)

- Set specific exercise goals for the next week
- In the long-term, shorter self-monitoring approaches may be acceptable, as long as you continue to track your weight, as well as eating patterns and exercise.
- Review your desired weight goals, primary goals.

We hope that you make every effort to attend the continued (although less frequent) group sessions. Please verify that the information we have for you on the contact cards is correct, so that we can keep in touch with you even if you move.

Session 21

Session topic: Fruits, Vegetables, Fiber and Phytochemicals

1. Review of past month's activity (10 min)

How did participants find the experience of meeting once a month? Did they miss the weekly structure of the group?

Note that meeting monthly facilitates participants having to deal with the reality that they will not come here forever. It is important to use this phase to help participants deal with long-term issues (lapse, small weight gains) and develop ways to monitor their weight and behavior when they no longer attend sessions.

2. Fruits, vegetables, fiber and phytochemicals (40 min)

Refer to participant handouts to cover

- A. Phytochemicals
- B. Fiber
- C. Fruit and vegetable intake

3. Wrap-up and summary (5 min)

Remind participants of the date and time of the next meeting.

It is important to use this phase to help participants deal with long-term issues (lapses, small weight regains) and to develop ways to monitor their weight and behavior when they no longer meet as a group. A key skill for long-term weight control is to adhere to a system of checking-in with yourself about the key behaviors related to weight control. Encourage participants to pick a day to review their progress each week (weight, meal plan, exercise, thoughts).

4. Skill Builder

- Review desired weight goals, primary goals.
- Continue to use tools learned to achieve desired goals.
- Check-in with yourself on a weekly bases.
- Review your intake of fruits and vegetables and adjust your diet this month, if necessary, and identify meals and snacks where you can increase your fruit and vegetable intake. This eating pattern is associated with better weight management.

Session 22

Session topic: Heart Health

1. Review of past month's activity (10 min)

Welcome participants and address any questions left from the last group meeting. How are they doing with self-monitoring and maintenance of an eating pattern and exercise level that promotes healthy weight management?

2. Heart health (40 minutes)

Refer to participant handouts for the following topics:

- A. Review risk factors for heart disease
 - a. Blood pressure
 - b. Smoking
 - c. Cholesterol levels
 - d. Alcohol
 - e. Physical activity

3. Skill Builder

- Review desired weight goals, primary goals
- Continue to use tools learned to achieve desired goals
- Check-in with yourself on at least a weekly bases.
- Review "Destination! Heart Healthy Eating Booklet"

Remind participants of the date and time of the next group meeting.

Session 23

Session topic: Reading the Food Label - Beyond Calories

1. Review of the past month's activity (10 min)

Welcome participants and address any questions that have arisen since the last group meeting. How are they doing with "checking in" with themselves?

2. Reading the food label - beyond calories (40 min)

Refer to participant handout to cover the following topics:

- A. Mandatory and voluntary label information
- B. Reading the label and identifying all components listed
 - Panel information
 - Serving size
 - Calories
 - Macronutrients
 - Micronutrients
 - Bottom section of the label
 - Other label information
- C. Label claims

Are there any new foods or food products that are helping them with controlling caloric intake?

3. Skill Builder

- Review desired weight goals, primary goals
- Continue to use tools learned to achieve desired goals
- Check-in with yourself on at least a weekly basis

Remind participants about the date and time of the next group meeting.

Session 24

Session topic: Dietary Supplements

1. Review of the past month's activity (10 min)

Welcome participants and address any questions left from the last group meeting. How are they doing with self-monitoring and "checking in" with themselves regularly?

2. Dietary supplements (40 min)

Refer to participant handout to cover the following topics:

- a. What is a dietary supplement?
 - b. Safety of supplements
 - c. Manufacturer claims
 - Health claims
 - Nutrient claims
 - Structure/function claims
 - d. Adverse events
 - e. Regulation of advertising and of quality
 - f. DRIs
 - g. Who should use dietary supplements?
 - h. Dietary supplements and cancer survivors
 - i. Specific supplements
 - Vitamin D
 - Calcium
 - Antioxidants
 - Folic Acid
 - Soy
 - Tea
 - j. Food vs supplements
- ### 3. Skill Builder
- Review weight goals and primary goals
 - Continue to use tools learned to achieve desired behavioral goals
 - Check-in with yourself on at least a weekly bases.

Remind participants of the date and time of the next group meeting.

Session 25

Session topic: Keep on Moving.

1. Review of the past month's activity (10 min)

Welcome participants and address any questions that have arisen since the last group meeting. How did they do with self-monitoring and "checking in" with themselves?

2. Keep on moving (40 min)

Refer to participant handout to cover the following topics

- a. Staying motivated
- b. Explore a new plan

3. Skill Builder

- Review weight goals and primary goals
- Continue to use tools learned to achieve desired behavioral goals
- Check-in with yourself on a weekly bases

Remind participants of the date and time of the next group meeting.

Session 26

Session topic: ONE YEAR SUMMARY AND CELEBRATION.

1. Review of the past month's activity (10 min)

Welcome participants and address any questions left from the last group meeting. How did they do with monitoring themselves?

2. One year summary (40 min)

Discuss the following topics: Transitioning on your own, with support from the newsletters. Review participants' accomplishments.

Ask participants about their experiences graphing their weight and using the weight graph to help them monitor their weight.

3. Skill Builder

- Review weight goals and primary goals.
- Continue to use tools learned to achieve desired behavioral goals
- Check-in with yourself on at least a weekly basis.

Remind participants that we will follow up on a monthly basis and they will come to clinic visits every 6 months. They will be receiving tailored newsletters.