

THYMe

Think Health for Your Memory

Facilitator Manual Week One

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Week 1 Session Plan

| Time | Agenda | Flip Chart | Page |
|--------|---|---|------|
| 5mins | Welcome Introduction Today's session | Welcome | 3 |
| 10mins | Icebreaker | Getting to Know Each Other | 3 |
| 10mins | Ground Rules and Expectations | Ground Rules Expectations | 4 |
| 10mins | Modifiable risk factors quiz | Are These Risk Factors for Developing a Dementia? | 5 |
| 10mins | What is self-management | What is Self-Management? (6 Pillars) | 6 |
| 15min | BREAK | | |
| 30mins | What is MCI What is memory How memory works Memory problems group activity | What is Mild Cognitive Impairment Types of Memory Use the Senses How Memory Works Hand Written Chart for listing memory problems | 7 |
| 55mins | Introducing goal setting Questions to help you set a goal Group goal setting | Our goals need to be.... Questions to help you set a goal (x2) | 11 |
| 5mins | Next week | | 14 |

Week One Session Detail

Welcome people as they arrive and give out name badges (facilitators also wear name badges). Have the 6 Pillar flip charts up on wall for reference.

This is a brief introduction. Thank everyone for coming and let people know the format of the session. Do not cover any detail as time does not allow.

Introduction/Today's Session (five minutes)

- Housekeeping: Toilets, Fire procedures, Parking
- Today's session: As per Flip
- Hand out and explain the resource book.

'The resource book has written information on what we cover each session so you do not need to try and remember everything discussed. We encourage you to read the relevant weeks' sections between sessions.'

'There will be time for questions during the group. Or if you would prefer to discuss something individually please feel free to talk to us during the break or after the session.'

'We will repeat ourselves as this helps memory and retention of the key points.'

Icebreaker (ten minutes)

Have a map of the British Isles up on the wall.

'We appreciate that starting any new group can be a little unnerving and it really helps to get to know each other and relax. Our memories work better when we are relaxed, and we are better able to learn and retain new information.'

Facilitators commence and then ask if someone in the group is willing to continue. Facilitator marks on the map where the person comes from. Explain that we have approximately two minutes per person.

At end relate in general how much everyone was able to recall from their early life. Make a few comments about how you will remember people e.g. John from London,

Welcome

Today's Session

- Housekeeping
- Getting to know each other
- Finding out what you would like from the group
- What is self management?

Break – Tea/Coffee and biscuits


- What is Mild Cognitive Impairment (MCI)?
- How memory works
- Tools to help
- Explanation of booklets/notebooks

Time for questions – during the group or individually at break or at the end

Getting to Know Each Other

- Your name
- Place of birth or where you grew up

Tell us one thing you remember about growing up there.



bombed in the war, will visualise what he was telling us about. Talk about how useful associations can be to help remember things.

Record information given as you will be able to use this to build a rapport with the group. It can also be used as a good example of how to use prompts to help your memory.

Ground Rules (five minutes)

‘To help the group run smoothly and to give everyone the opportunity to benefit fully we like to discuss ways in which we can all agree to participate. We can start this today, but if anyone would like to add other things in later weeks we can add them.’

Examples of how to link ground rules back to memory problems:

Allow others to talk - one person speaking at once:

‘It is hard to hear and remember just what one person says let alone two people at the same time.’

‘We are also aware that when you have memory problems if a thought comes into your head you need to just say it before it is forgotten. Please do, but we may need to write it down and come back to it, so we don’t forget.’

Making yourself comfortable:

‘If you need to get up and stretch, go to the toilet, eat, drink or anything else, please do. This is because if we are uncomfortable we are less likely to be able to concentrate and remember’

Expectations (five minutes)

‘Before we get into the session proper it is really useful for us to get an understanding of why you have come here today and what you hope to achieve from the group. This both helps us to tailor the group to any specific issues that are affecting you, but also makes sure that you get from the group what you hoped to obtain. It of course also means that we can be sure you haven’t come here thinking it was a group about something completely different.’

This can be a difficult section. Sometimes a lot of carer stress, emotions and memory problems come out. Give people the time to express these but do not get caught up

Ground Rules

- Allow others to talk
- Respect each others views
- Confidentiality
- Making sure you are comfortable

Anything else you would like to add?

Expectations

What would you like to get from the group?

Our expectation:
We really appreciate your feedback – good and bad

in fixing at this stage. Summarise the key problems and write it down. Explain that we will be covering it later on. If items come up that are not going to be covered in the group be honest and offer them the opportunity to speak to you at the end of the group.

‘How do you feel about doing things in your own time to help yourself to get the most from this group?’

Let people know that there will be things they can do at home, such as reading the manual, setting and working on goals and trying out different memory strategies and coming back to the group with how they got on.

‘We have found from experience that the people who get the most out of the groups are those who make the time to do these things.’

Quiz: Risk factors for Dementia over which we have some control (ten minutes)

‘Before we get into the content of the group we would like to get an idea of what things you think may contribute towards our memories deteriorating more quickly, and us possibly developing a dementia. For each of the following items can we have a show of hands for those that think these things have been associated with a greater risk of developing a dementia, those that don’t think they can and those who don’t know or aren’t sure.’

Read out each risk factor one by one, count the hands and note down on the flip chart. This information can be used in week 5 when you compare their knowledge using the same quiz.

Make sure people do not personalise this quiz.
We are referring to a general risk rather than their individual lifestyle. In past groups people have said things like “but I don’t smoke”, steer them away from this and remind them we are talking about risk factors in general, not their own personal risk factors.

Once the quiz is completed reveal that they are all have research evidence that they are risk factors for developing a dementia. Talk about how positive this is as it means there are things we all have some control over that we can change in order to lower our risk of our memories deteriorating.

| Are These Risk Factors for Developing a Dementia? | Yes No Don't Know | | |
|---|-------------------|----|------------|
| | Yes | No | Don't Know |
| Being physically inactive | | | |
| Smoking | | | |
| High Blood Pressure | | | |
| High Cholesterol | | | |
| Obesity | | | |
| Too much fat in your diet | | | |
| Stress in your life | | | |
| Lack of an active social life | | | |
| Lack of mental stimulation | | | |
| Drinking too much alcohol | | | |

'Our memory is at its best in our late twenties and begins to get worse from then on, so almost everyone can benefit from the material we are going to cover in the next five weeks.'

What is Self-Management? (ten minutes)

'The main focus of this course is to help you to manage your own health and help you prevent your memory from deteriorating any quicker than most other people's.'

'This group is based on a self-management approach. Self-management is about making changes for yourself and using existing support such as friends and family to help you do this.'

'To be able to make changes, this course aims to give you knowledge about what you can do to reduce those modifiable risk factors for developing a dementia.'

Refer to 6 Pillars flip on the wall

'We refer to these as 'The 6 Pillars of a Healthy Lifestyle for the Brain'. These are the things, within our lives, over which we have some control. They include having a balanced diet, keeping physically and mentally active; keep learning, trying something new, keeping socially active and relaxation.'

'Many of us are already aware that these things are good for our heart, but what we may not have realised is how good they are for our brains too.'

'This group will help provide you with techniques to help you achieve the changes you may want to make to help reduce the risk of your memory deteriorating. It will give you tools and information on how to manage your current memory problems and will give you an opportunity to practice using these tools to improve your confidence and belief that you can make a difference to your own health'

Obviously you decide how much you want to change and many of us will find we are already doing some of the things we cover in the group. For instance [Facilitator Example] put in your own relevant example.

You are the expert on your own health and wellbeing, and only you know how much you are already doing in the areas of the six pillars.....refer to flip on wall.

Each week you will be setting yourself things to do outside the group. As with most things you are likely to find that the more you put into doing these things the more you get out. Having said that we do appreciate that we all have busy lives so don't feel guilty if you haven't been able to do these things.....life sometimes gets in the way!!

What is Self-Management?

- Prevention
- Self-Management
- Knowledge
- Six Pillars
- Techniques
 - Lifestyle changes
 - Manage existing memory problems
- Opportunity to practice to improve confidence
- Your choice
- You are the expert

Handwritten flip

This group will give you the opportunity to share what you are already doing so we can all learn from and support each other.

For many health conditions medication will only be half the battle. The self-management approach covers all areas of your life rather than relying on just medication. There is no specific medication for mild cognitive impairment. However, as already discussed making your treatment for mild cognitive impairment are the things we will cover in this group, which is based on current evidence.

BREAK (fifteen minutes) - Remind people about the resource table

Memory Section (thirty minutes)

What is Mild Cognitive Impairment (MCI)?

'MCI means that you have memory problems which are more than age related but not significant enough to be diagnosed as a dementia.'

'Evidence shows that for some this will stay the same and will not develop into a dementia. It can be well managed and you can still lead full, active and enjoyable lives. Moreover, evidence also indicates that there are multiple things in our lives you can continue to do or commence doing to reduce the risk of progression to dementia. As we have already mentioned we will be covering these in the next four weeks.'

For more information on MCI see: www.alzheimers.org.uk

What is Mild Cognitive Impairment?

- Every ones memory deteriorates with age
- Problems that are more than would be expected for age
- But not significant enough to be a dementia
- Subtle problems with:
 - Day to day memory
 - Planning
 - Language (word finding)

Handwritten Flip

What is Memory?

1. Long Term Memory:

'This is the ability to remember events and experiences and information from many years ago. This may include events from childhood, where you grew up or your first job.'

Link this back to the icebreaker memories - many of these will have been long term memories. (Try and link back to one or two specific examples from the ice breaker)


'You often hear people saying "I can remember what happened years ago" but I can't remember what happened yesterday. Does this sound familiar to anyone?'

2. Short Term Memory or Working Memory:

Involves the ability to remember events, experiences and information which occurred a short time ago - .days, hours or even minutes. It is also for many people about holding information for a short time to

Types of Memory

1. Long Term
2. Short Term or Working
3. Visual
4. Auditory
5. Muscle Memory (Motor)
6. Other Senses (taste/smell)



use. For example, writing down an appointment you have been given over the telephone on the calendar.

'It is these short term memories that many of us struggle with and every week we will be looking at techniques, tips and different memory aids to help us with our memory. Are these the kind of things most of us are identifying where our problems are?'

3. Visual Memory:

'This is the ability to remember things in terms of pictures and images. We often say a picture is worth a thousand words. This demonstrates the power of visual memory.'

Useful memory prompts for visual memory can include: – looking at photos, making a collage/scrapbook, regular visits to places of interest

'Can anyone think of any examples when they have seen something and it has reminded them of something from the past or something they need to do?'

or facilitator provide example from own experience.

4. Auditory Memory:

'Involves remembering things that you hear, such as conversations or the breaking of the waves. Many people find that music can both create and bring back powerful memories.'

5. Muscle Memory (Motor):

Repeated movements and actions are automatically remembered in sequence e.g. knitting, cleaning teeth, doing up a shoelace.

Other Senses:

We've spoken about sight, hearing and to some extent touch. Of course, memories can also be created/retrieved through our other senses of smell and taste and again these can create strong memories. We will be talking about how important our senses are both in creating memories and in being able to retrieve the memories we have throughout the group. This leads us nicely onto the process of how memory works.

Using two or three different senses helps the memory. It reinforces the memory in different parts of the brain and some of us remember things better through different senses, especially if we have problems with one of those senses such as hearing or sight.

Use the Senses

- Sight
- Hearing
- Taste
- Smell
- Touch

How Memory Works:

'Memory and remembering is stored through three processes; input, storage and output'

1. Input/Registering Information:

'This is possibly the most important part of the process. If you don't take the information in in the first place, you don't have a hope of remembering it.'

Example – Facilitator provides own example from daily life e.g. not being able to remember if you have locked the door:

'Instead of thinking about what I need to do at work and what I am having for tea as I am locking the door I make a conscious effort to just concentrate on locking the door. I use my senses; I listen for the click of the lock when it turns, I watch what I'm doing, and feel the key turning. If I have friends with me I minimise distractions by telling them I'm doing this'

'Everything we want to remember has to come through our senses. That is the only way we create memories and take in information.' For instance when you go to the beach, make an effort to use all your senses, listen to the waves/seagulls, smell the salt air, feel the wind on your face, dip your toes in the sea, pick up interesting stones and shells, feel the sand fall through your fingers, eat a cold ice cream!

'In order to be able to take in the information we need to concentrate, focus on one thing at a time and minimise distractions.'

'Because of the importance of our senses it is imperative to have regular hearing and eyesight checks.'

'The other things that may affect our ability to take in information are if we are over tired, in pain, low in mood or anxious, hungry or needing the toilet.'

2. Storage

'Once information has been taken in we need to store it, so we can use it later.'

'To do this we need to transfer it from our short term to our long term memory, otherwise our short term memory becomes overloaded and information is forgotten, because our short term memory has a limited capacity whereas our long term memory is much larger.'

'e.g. if I try to remember everyone's name in the group I will struggle whereas trying to remember one or two people's names is likely to be more successful.'

Good sleep is key to storage, as this is when our memories are transferred from short to long term storage.

3. Output – retrieving information

How Memory Works

Input - taking in information and paying attention:

- Using other senses
- One thing at a time
- Minimising distraction
- Consciously paying attention

Storage - Like a filing cabinet:

- Try not to overload/too much information
- Focus on what's really important
- Rehearsing information
- Chunking or breaking information down
- External memory aids e.g. diary

Output - how we retrieve memories and information:

- Take the pressure off yourself!
- Prompts
- Use the senses

‘Once we have stored the information we then need to retrieve it. Sometimes we know that we know the information but can’t bring it to mind – that ‘tip of the tongue’ feeling. Is this something anyone can relate to?’

‘Sometimes the more we try to remember the harder it seems. If you take the pressure off yourself, often it magically comes back. As facilitators we can feel under pressure and can forget where we are. Therefore we have it written down. Writing things down is a good memory strategy as it helps you retrieve information.’

Carers can support ‘Output’ by providing subtle prompts e.g. wasn’t our visit to Dawlish yesterday lovely, rather than just asking..... What did we do yesterday?’

‘Another example of needing to retrieve is taking medication: Most of us who take medication will know, for example, that we take it three times a day and we may have a routine that taking medication is linked to meal times. We may at times forget to actually take it. We have inputted and stored the information but at that point in time we have not retrieved it because we have forgotten to take our medication. This is again where external prompts/aids can be very valuable, for example, dosette boxes, blister packs and linking to routines, or your husband or wife!’

‘Another one is forgetting appointments or things you need to do. Can anyone relate to this?’

‘This can also link to the senses and using prompts.....a photo or a smell will often help us to remember things.....use them to help you.’

‘See the Memory Handbook for further information on this section and other memory strategies.’

Group activity: memory problems discussion

Have a blank flip for any solutions that come up to be written on so they are being acknowledged and so they are not lost to memory.

‘To help tailor the group to your individual needs it really helps if we all share some of the memory difficulties we are having and how they affect the things that you do. Some of these may be things we all have difficulty with and others may be unique to you. So today we are just going to list these difficulties and in following weeks we will explore in more detail the ways to overcome them.’

| | |
|--|---|
| What memory difficulties are you having? | How does this affect you practically/emotionally? |
| | |
| Handwritten Flip | |
| | |

Try to avoid exploring solutions at this point, otherwise you will run out of time. The purpose of this discussion is to identify relevant memory problems and share the emotional impact. In order for people to feel they are not alone.

Examples of common memory problems to use as prompts if needed:

- Names of people, places and items

- Misplacing items
- Forgetting where you've left the car
- Forgetting appointments and birthdays
- Forgetting what you have just been told
- Forgetting why you went into a room
- Forgetting the day/date
- Difficulty using new technology
- Difficulty learning something new
- Forgetting the plot in a book
- Concentration
- Repeating yourself in conversation
- Having to check that you have done something e.g. locking the door
- Forgetting to pay bills or reply to letters
- Losing track of conversation
- Forgetting what you went into a shop for
- Forgetting things you meant to take out with you e.g. wallet

'How do these affect your life? How do they make you feel?'

Think of examples from your own lives in advance of session. Talk about how it makes you feel and impact on your life.

When solutions come out from suggestions from the group, acknowledge them and write them down. Explain these will be discussed in future sessions.

Give out A4 top four memory difficulties sheet which can be found at the end of this section.

'We have identified a range of difficulties we are all having with our memory and now have a long list. To help us, what we would like you to do now is write down the four from the list that you would most like to work on over the next four weeks during the group.'

Collect the sheets and hand out the Alzheimer's Society – The Memory Handbook. Encourage the group to read up to page 13 and session one in their resource book as this covers what we have discussed today.

Introducing Goal Setting

'Evidence suggests that if we all make changes to our life style in the six areas of a healthy lifestyle for the brain it will reduce the risk of our memory deteriorating and help us manage our daily memory problems.'

'Setting small achievable goals each week has been proven to help people make these changes in their life style. The changes you make will hopefully also add to the quality of your life and not make you feel as if you have to give things up. In fact it is important that they do add to the quality of your life as you are far more likely to keep them going.'

Goal Setting: (fifty five minutes)

'The skills we are going to teach within this group have already been proven to work in helping other people manage their health in conditions such as depression and diabetes. Every week everyone in the group will set a goal to achieve that week. We are going to look at setting a goal that you can achieve within that week. The evidence shows that people who regularly set and work towards goals are more positive and confident about making changes and taking control of their life. By doing and achieving small steps it often motivates us to do more. Goal setting can also help problems seem more manageable.'

Our Goals Need to be....

- Our Choice
- Important to you
- A little bit difficult to achieve
- Realistic

Our Goals Need to Be.....

'Our choice: Other than what someone else is suggesting. That way you are more likely to put more effort into it'

'Important: In life generally there may be a lot of things that ideally you would like to change or do. It is unlikely any of us have the time or energy to change every think. Therefore it is important to make sure our goal is what is most important to us so we have the time and energy to put to that. If you try to do too much it is likely to result in not achieving anything.'

'Be a little bit difficult to achieve: If we set a goal that is too easy you are unlikely to benefit as it is not much of a change. Conversely if you set yourself too hard a challenge you may not achieve the goal and it may result in you giving up, and may be thinking what's the point?'

'It may be helpful to identify what is your starting point, what are you doing now? In order to make changes.'

Questions to Help you Set a Goal

Introduce your goal by going through the questions on the flip chart. Each facilitator asks the other the set questions.

Something that has worked well in week one is if a facilitator sets themselves a goal around drinking more water....and explains why this is good for your memory whilst going through the questions.

'You are more likely to achieve your goal if you think about your week and identify when you are most likely to have time to do the goal you have set. Of course, life does get in the way sometimes, and we all have to review our goals when this happens, and decide if we can still fit them in that week or delay them until the next week.'

Explain that the evidence shows that if we are seven or more on the confidence scale when asked these questions that we are then more likely to achieve the goal if it is under seven they may need to rethink the goal as it is likely to be unrealistic.

‘When thinking about a goal consider what you do now. For example, if you currently do a 30 minute walk once a week it is likely to be unrealistic and a struggle to try and walk every day and you may score your confidence as 2/10. Maybe just increase by an extra one or two days and your confidence is likely to be 7 or above.’

After the water goal has been set the facilitator who did not set the goal can talk in general terms about the benefits of drinking fluid for the brain and memory and identify the guidelines of 1.5 litres a day. Sometimes a good way to start this is to throw the question out – Does anyone know what percentage of the brain is fluid? If you are dehydrated your memory and concentration will deteriorate – instant fix to help memory

Set second facilitator’s goal with the other facilitator asking the questions to help set a goal. Complete handwritten flips below as you are presenting this.

‘Goal setting is our own choice and no one is going to think any the less of any of us if we come back next week and have not been able to achieve the goal. We understand how life is often busy and this is a new skill that will take time to learn and develop.’

Questions to Help you Set a Goal

- **What?** What is it you’re going to be doing
e.g. walking
- **How Much/How Often?** e.g. 10 minutes,
twice a week
- **How Important?**

- **When?** When will you do this. Be Specific!
- **How Confident?** Visualise doing this goal.
Are you 7 or more?

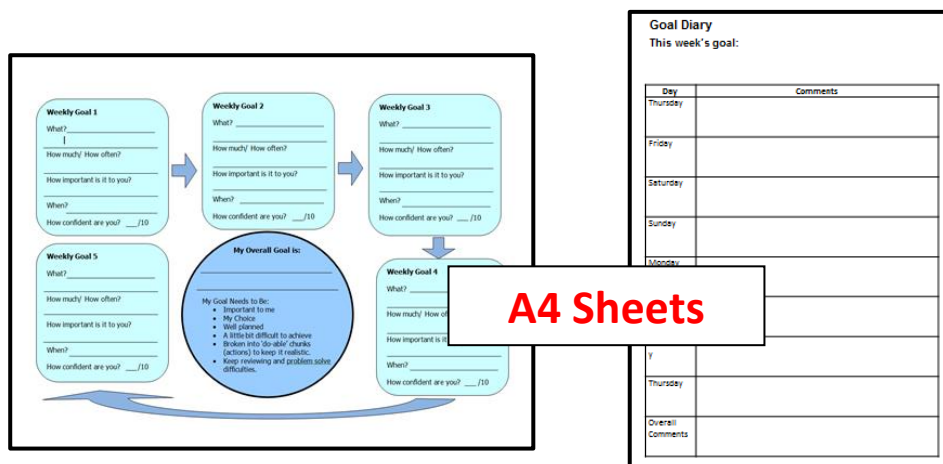
Questions to Help you Set a Goal

- **What?**
- **How Much/How Often?**
- **How Important?**
- **When?**
- **How Confident?**

Group Goal Setting

In your resource book you have a goal setting and the goal diary sheets. The goal diary sheet is somewhere for you to write down what you have done this week, so that when you come to feedback next week you will have a prompt to remind them.

Allow five minutes for people to think about a goal and write it down using the Goal Setting Sheet. You are likely to have to go around the room and provide suggestions, especially if people come on their own.



Feedback to the group - ask if anyone minds feeding back first and then go around the room in one direction. When people are feeding back, try to get them to answer all the questions...What, How Much, How important, When and How confident.... this will ensure people have thought about these things. How much you push for these answers is a subjective decision as every group and participant will be different.

The other facilitator records the goals to aid feedback of goals done in next session.

Next week: (Five Minutes)

Check everyone is okay with what's been covered today. This is the most intense of the sessions, with a lot to cover and less time for attendees to talk than in the next four sessions. Tell them Reiterate they can speak to you afterwards if they have any questions. if they have any questions they would prefer not to ask in a group setting then they can see you after the group. Thank everyone for coming and discuss next week:

Remind people what they need to bring next week (could be written up somewhere) and tell them the topic for next session – mental stimulation and memory strategies. Write up what you want people to bring next week, use a white board if available or flip chart if not.

- Diary Sheet....to record how you got on
- Notebooks...you may want to bring one along
- Goal sheets
- Keep resource book and bring back next week (remind the pages to read)
- Next week's session covers mental stimulation and memory strategies

Materials for the group:

Resources

- A4 Resource books x8
- Blank Flip chart x2
- Printed flip charts
- Reflective book (Facilitators)
- Highlighters
- Flip chart pens
- Managing Mild Memory Problems booklet x8
- Map of British Isles
- Register
- flip chart easels
- Local Resources relevant to location
- Tea/coffee, biscuits, milk.
- 3 clipboards
- Blue tac
- Self-adhesive name labels.
- Session Plan
- Goal planning sheet 5 weeks x 20
- Goal Diary sheets x 20
- Top four memory problem sheets x 20
- Resource table leaflets....see list below.
- Map for icebreaker

Each week possible props – clock, memory box, whiteboard, memex, pivotel, blister pack, dossett box, diary, calendar, notebook

Put up various flip charts on the walls each week to act as a reminder from previous sessions. This week you will definitely need Six Pillars X 2.

Goal Diary

This week's goal:

| Day | Comments |
|------------------|----------|
| Thursday | |
| Friday | |
| Saturday | |
| Sunday | |
| Monday | |
| Tuesday | |
| Wednesday | |
| Thursday | |
| Overall Comments | |

| Name | Week 1 Goal | Feedback |
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| Name | Week 2 Goal | Feedback |
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| Name | Week 3 Goal | Feedback |
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| Name | Week 4 Goal | Feedback |
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| Name | Feedback from week 4 goal |
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| | GAS Scores +2 A lot better +1 A little better 0 No change -1 A little worse -2 A lot worse |

Name:.....

Please list the four memory problems you would most like to work on over the next four weeks in the group:

1)

2)

3)

4)

Weekly Goal 1

What?

How much/ How often?

How important is it to you?

When?

How confident are you? /10

Weekly Goal 2

What?

How much/ How often?

How important is it to you?

When?

How confident are you? /10

Weekly Goal 3

What?

How much/ How often?

How important is it to you?

When?

How confident are you? /10

Weekly Goal 4

What?

How much/ How often?

How important is it to you?

When?

How confident are you? /10

Weekly Goal 5

What?

How much/ How often?

How important is it to you?

When?

How confident are you? /10

Weekly Goal 6

What?

How much/ How often?

How important is it to you?

When?

How confident are you? /10