

Post course IBS self-assessment survey

Try to answer the following questions according to how you felt **over the past month**. They will guide you in your self-assessment and also help you to ascertain your progress.

Symptoms

1. Are you experiencing diarrhoea?

Please rate severity from 0 [none] to 10 [high] 0. 1. 2. 3. 4. 5. 6. 7. 8. 9. 10

2. Are you experiencing constipation?

Please rate severity from 0 [none] to 10 [high] 0. 1. 2. 3. 4. 5. 6. 7. 8. 9. 10

3. Are you experiencing stomach cramps?

Please rate severity from 0 [none] to 10 [high] 0. 1. 2. 3. 4. 5. 6. 7. 8. 9. 10

4. Are you experiencing abdominal pain?

Please rate severity from 0 [none] to 10 [high] 0. 1. 2. 3. 4. 5. 6. 7. 8. 9. 10

5. Are you experiencing nausea?

Please rate severity from 0 [none] to 10 [high] 0. 1. 2. 3. 4. 5. 6. 7. 8. 9. 10

6. Are you experiencing bloating?

Please rate severity from 0 [none] to 10 [high] 0. 1. 2. 3. 4. 5. 6. 7. 8. 9. 10

7. Are you experiencing gassiness or wind?

Please rate severity from 0 [none] to 10 [high] 0. 1. 2. 3. 4. 5. 6. 7. 8. 9. 10

8. Do you feel weak or tired?

Please rate severity from 0 [none] to 10 [high] 0. 1. 2. 3. 4. 5. 6. 7. 8. 9. 10

9. Do you feel better after exercising? Yes/ No .

10. Do you feel worse after exercising?

Please rate severity from 0 [none] to 10 [high] 0. 1. 2. 3. 4. 5. 6. 7. 8. 9. 10

11. Do you feel better after eating? Yes/ No .

12. Do you feel worse after eating?

Please rate severity from 0 [none] to 10 [high] 0. 1. 2. 3. 4. 5. 6. 7. 8. 9. 10

13. How long has IBS been a problem for you? _____

14. What percentage of time are you aware of your symptoms? _____

15. What do you think is causing your symptoms? _____

16. When are your symptoms most likely to occur? _____

Thoughts and Feelings

17. Do you worry about doing too much?

Please rate severity from 0 [none] to 10 [high] 0. 1. 2. 3. 4. 5. 6. 7. 8. 9. 10

18. Do you worry about not being able to control your bowels?

Please rate severity from 0 [none] to 10 [high] 0. 1. 2. 3. 4. 5. 6. 7. 8. 9. 10

19. Do you worry about passing wind in public?

Please rate severity from 0 [none] to 10 [high] 0. 1. 2. 3. 4. 5. 6. 7. 8. 9. 10

20. Do you worry that your pain is a sign of a rare disease that the doctors haven't been able to identify yet?

Please rate severity from 0 [none] to 10 [high] 0. 1. 2. 3. 4. 5. 6. 7. 8. 9. 10

21. Do you worry about going somewhere and not knowing where the toilet is?

Please rate severity from 0 [none] to 10 [high] 0. 1. 2. 3. 4. 5. 6. 7. 8. 9. 10

22. Do you worry about the shape or consistency of your stools?

Please rate severity from 0 [none] to 10 [high] 0. 1. 2. 3. 4. 5. 6. 7. 8. 9. 10

23. Do you worry about having an accident in public?

Please rate severity from 0 [none] to 10 [high] 0. 1. 2. 3. 4. 5. 6. 7. 8. 9. 10

24. Do you worry when you don't have a bowel movement?

Please rate severity from 0 [none] to 10 [high] 0. 1. 2. 3. 4. 5. 6. 7. 8. 9. 10

25. Do you worry about how your symptoms get in the way of doing the things you need to do?

Please rate severity from 0 [none] to 10 [high] 0. 1. 2. 3. 4. 5. 6. 7. 8. 9. 10

26. Do you worry about the negative effects of certain foods?

Please rate severity from 0 [none] to 10 [high] 0. 1. 2. 3. 4. 5. 6. 7. 8. 9. 10

Behaviour

27. Do you spend excessive amounts of time on the toilet? Yes/ No _____

28. Do you make yourself go to the toilet even when you haven't experienced the reflex to go? Yes/ No

29. Do you check your stools regularly? Yes/ No _____

30. Do you have irregular meals and mealtimes? Yes/ No _____

31. Do you miss work because of your symptoms? Yes/ No _____

32. Can you carry out your household chores? Yes/ No _____

33. Is your social life restricted due to your symptoms? Yes/ No _____

34. Do you exercise regularly? Yes/ No _____

35. Do you have a good sleep pattern? Yes/ No _____

36. Are your close relationships affected by your symptoms? Yes/ No _____

General

37. Do you feel discouraged or depressed? Yes/ No _____
38. Are you satisfied with your relationships? Yes/ No _____
39. Do you get enough emotional support from your partner? Yes/ No/n/a _____
40. Can you express yourself openly within your relationships? Yes/ No _____
41. Do you have any financial worries? Yes/ No _____
42. Are you worried about your children in any way? Yes/ No/ n/a _____
43. Do you feel you have enough challenges in your life? Yes/ No _____
44. Do you feel you have too many challenges in your life? Yes/ No _____
45. Overall, are you happy in your work? Yes/ No /n/a _____

Now that you have completed the IBS self-management course you may have a better picture of the impact IBS has had on your life and how this may have changed from before attending the course. It will also help you identify the areas that you are still struggling with and help you to set further goals using the strategies you have learnt on the course.

Think about the values based goals you set yourself at the start of the course – do you feel any nearer to achieving these goals? Rate yourself from 1 (not anywhere near) to 10 (achieved) _____

If you still want to achieve these goals what do you need to do to get nearer to achieving your goal? Jot down some action points:

- 1.
- 2.
- 3.

Are there any further values based goals you would like to add now? What things in your life would you like to change? How would you like your life to change?

Jot down some goals:

- 1.
- 2.
- 3.

Maintaining Progress

What have I learned?

What was most useful?

What can I continue to do to prevent a setback?

What are my high risk situations of this happening?

What events / situations / triggers cause me to be more vulnerable?

What are the signs?

Thoughts / feelings / behaviours

What can I do to avoid losing control?

What could I do differently? What would work best?

When I'm struggling or feeling bad, what could I do that will help?

What could I do if I did lose control?

What has helped? What have I learned? Who can help?

In case of a setback...

How can I make sense of this?

What events / triggers led up to this setback? How did I react to this? What did I do? What did I think? What did I feel?

What have I learnt from it?

Was this a high-risk situation? Are there things that I can identify are difficult? What helped and what didn't?

With hindsight, what would I do differently?

When I think / feel.....what could I do instead?

Self-Coaching Session Form

Can be used following end of therapy, or during other periods of self-directed therapy. Consider scheduling regular self-coaching sessions, perhaps weekly initially, then gradually decrease over time & as appropriate.

Name	Date
Mood check: <i>What am I feeling? Rate your mood (0 – 10 or %)</i>	
Important changes in emotions, thoughts or behaviours	
Homework check: <i>How did I get on with last session's homework? What would have made it easier? How can I do it differently next time?</i>	
What skills have I been practising well?	
Where am I still having difficulties and what can I change or do differently? <i>Is there anything I need to stop or do less of? Anything I can start doing or do more of?</i>	
What are my therapy goals? What can I realistically achieve by next session?	
What can I do that will help me meet these goals? <i>Think differently? Do differently? Other?</i>	
Date for next session:	

Based on Wilhelm & Steketee 2006 (p.230)

What now?

PRACTICE, PRACTICE, PRACTICE!

This is just the start of your journey. You have learned some skills, and now you need to keep doing them, repeatedly.



CBT is not a magic-wand therapy, it takes hard work and commitment, but you will be rewarded!

After a while, you won't need to write things down most of the time as you'll find yourself doing all the steps in your head, you'll get better at it, and be able to do it quickly.



their instrument.

If you start learning to play a musical instrument, there's no point in just going along to your lessons each week - you **HAVE** to practise repeatedly every day, in order to progress and improve. You can be taught how to play, but you won't play any better without putting the practice in. For the serious musician who puts in the practice, eventually, they learn to play pieces of music competently. Some will go on to master

We too can become competent at making effective and healthy changes, that make a real difference to our lives and the lives of those around us.

You may find the [STOPP handout](#) helpful. Photocopy it, or print another copy from the website at www.get.gg, put it on your fridge, or next to your computer, in your car, or in your pocket.

www.getselfhelp.co.uk/stopp.htm

Remind yourself often to PRACTISE! Practise at times you don't need to practise, so that when you really need those skills, they'll come easier to you. Just like that practising musician expects to play for several hours a day to become competent before showing off her skills at a big recital concert, or before the big exam.



Maintaining Progress

- Consider the future - what future situations might be difficult for you? What can you do differently at those times?
- What have you learned that's been the most helpful?
- What hasn't helped?
- What has helped?
- What is worth continuing to practise?
- What can you do to help or remind you to practise?
- What support or help do you need?

Remember: Don't believe everything you think!

PRACTICE, PRACTICE, PRACTICE!

Remember and practise the helpful steps you have learned over and over, and even when you feel you can use them effectively, just carry on practising!



After a while, maybe after a great deal of practice, you will more easily notice your thoughts and reactions, realise what you are reacting to, and the meaning you are giving to situations. You will naturally start to question things, and then see things differently, seeing the bigger picture. In questioning and seeing different perspectives, so you will feel very differently, and much more healthily, from the way you used to react.

You may not have used all the items listed here, so just use whatever you've done and/or find helpful.

Use your "Maintaining Progress" (Relapse Prevention) worksheet to remind yourself of what helps most, and what you need to keep practising.

<http://www.getselfhelp.co.uk/ccount/click.php?id=23>

Use your 'New Me' (or 'Virtuous Flower') formulation to guide what you need to keep doing

<http://www.getselfhelp.co.uk/ccount/click.php?id=143>

Practise STOPP! as much and as often as you can – the more you practise, the easier it will be when you need it

www.getselfhelp.co.uk/stopp.htm

- ❖ **Stop!** Don't act immediately.
- ❖ **Take a breath**
- ❖ **Observe** – what's happening, what am I responding to?
- ❖ **Put in some Perspective** – pull back.
What's the bigger picture? What would someone else make of this?
Is there another way of looking at this? What would I say to a friend? Fact or opinion?
- ❖ **Practise what works!** – Play to your principles and values.
What's the best thing to do, for me, for others, for this situation?



Practise Mindful Breathing and be aware of where you are putting your focus of attention

- ❖ **Mindfulness**

www.getselfhelp.co.uk/mindfulness.htm

Use the Self-Help resources on this website:

- ❖ www.getselfhelp.co.uk (www.get.gg)

Imagery Self-Help Techniques will help you build on the skills you have learned

- ❖ **Imagery for Self-Help**

www.getselfhelp.co.uk/imagery.htm

Try not to act merely in the moment. Pull back from the situation. Take a wider view; compose yourself.

Epictetus (AD 55-135)

