Worksheet

Professional Version | US English

Self-Monitoring Record (Universal)

Description

Self-monitoring is a technique in which clients learn to systematically observe and record specific targets such as their own thoughts, body feelings, emotions, and behaviors. The aim is to improve clients' awareness of their experiences and the contexts in which they occur, in order to help them gain insight into their symptoms and difficulties. Self-monitoring supports collaboration between the therapist and client, and creates opportunities to formulate and test hypotheses about these difficulties. Self-monitoring is usually introduced early in therapy, and provides an inexpensive and continuous measure of problem symptoms and behaviors throughout treatment.

Psychology Tools self-monitoring records have been carefully designed to focus on particular targets. In most instances, there are:

- **Regular** versions of each form which focus on collecting essential data about the target.

- **Extended** versions of each form, which allow additional data to be collected about the consequences of client behaviors, and which can be used to form hypotheses about reinforcing factors.

What is self-monitoring?

Self-monitoring functions as both an assessment method and an intervention (Korotitsch & Nelson-Gray, 1999; Proudfoot & Nicholas, 2010). Routinely used in cognitive behavioral therapy (CBT), it contributes to a wide variety of evidence-based treatments (Persons, 2008; Korotitsch & Nelson-Gray, 1999), and is comprised of two parts – discrimination and recording (Korotitsch & Nelson-Gray, 1999).

Discrimination consists of identifying and noticing the target phenomena. This can be challenging for clients. It may be the first time that they have brought attention and awareness to their symptoms, thoughts and emotions, and some clients express concern about 'doing it right'. Therapists can simplify the exercise by asking the client to record only whether the targets are present or absent, or by varying the questions they use to probe these thoughts and feelings. For example, instead of focusing on more difficult-to-capture thoughts and mental images, clients might be instructed to monitor more salient body sensations or behaviors (Kennerley, Kirk & Westbrook, 2017).

Recording is the process of documenting occurrences, usually through some kind of written record. Using a record allows clients to self-monitor: to discriminate the target (e.g. a feeling of anxiety), record it (e.g. when it occurred, how long it lasted, where they were, and what they were doing), and review it (e.g. how often did it happen in a week, what was common across different episodes).

Self-monitoring can be accomplished using many different tools:

- **Diaries** can be used to record information about when events occur, such as activity, sleep, or pain.

- **Logs** can be used to record the frequency of events, behaviors, thoughts, or emotions.

- **Records** can be used to record information about thoughts, memories, symptoms, or responses.

In practice, much of this terminology is interchangeable. For the purposes of this and other Psychology Tools resources, the term 'Self-Monitoring Record' will be used.

Why practice self-monitoring?

Clients are encouraged to actively participate in cognitive-behavioral treatment, so that they will develop the skills and knowledge to help them to address their difficulties. Introducing clients to self-monitoring is a straightforward way to begin this process.

Self-monitoring supports client engagement and motivation by fostering a sense of self-control and autonomy (Bornstein, Hamilton & Bornstein, 1986; Proudfoot & Nicholas, 2010). It helps clients to understand how and why these difficulties developed, and how they are maintained. This lays the foundation for intervention. Self-monitoring records can also be invaluable in helping therapists and clients identify controlling or influential contextual factors, which may not be immediately apparent during therapy sessions, or in the therapy room (Korotitsch & Nelson-Gray, 1999).

Data from self-monitoring records will often form the basis of case formulation and intervention planning (Cohen et al, 2013; Proudfoot & Nicholas, 2010). Different forms of self-monitoring provide different kinds of information, which can serve different purposes. For example:

- Self-monitoring data can help to define a problem hierarchy by identifying which problems occur most frequently, or which most severely affect a client's wellbeing.

- Data from self-monitoring can be used to identify unhelpful patterns or styles of thinking (e.g. rumination, catastrophizing), or to examine the domains of a client's preoccupation.

- Self-monitoring can be used to explore the context or triggers for a particular thought, feeling, or behavior.

- Self-monitoring can highlight specific coping or avoidance behaviors that the client uses to manage their feelings.

When should self-monitoring be practiced?

Self-monitoring is often taught early, during the assessment stage of therapy. It can be particularly useful when the target phenomenon is covert and cannot be observed by anyone but the clients themselves (Cohen et al, 2013). Examples of covert targets include rumination, self-criticism, or self-harm.

Early in therapy, clients may be asked to complete simple self-monitoring tasks, such as noting the frequency of particular behaviors or emotions. This can then develop into more sophisticated records that explore the triggers, thoughts, and consequences linked to specific events. As the intervention progresses, self-monitoring can be used to track adherence (e.g. how often a client uses a new strategy or adaptive coping technique) and the effectiveness of an intervention (e.g. how often the client now experiences problem symptoms, or implements new responses).

How is self-monitoring conducted?

Self-monitoring should be completed by the client during or shortly after an event. If the client finds it difficult to access their thoughts or emotions, self-monitoring can begin by focusing on more tangible experiences, such as body sensations or overt behaviors (Kennerley, Kirk & Westbrook, 2017). The target of self-monitoring should be discussed and agreed with the client using specific definitions and examples, with discrimination and recording first practiced in-session until the client feels confident.

"Formal monitoring is distinct from casual observation. It requires a commitment on the part of the therapist and the patient to think through what monitoring is needed and to consistently assess a variable or variables, collect the data, and use the data to inform the formulation and treatment plan."

(Persons, 2008, p.183)

Description

Effective training uses clear and simple instructions that can be easily revisited. It has been shown that the accuracy of self-monitoring decreases when individuals try to monitor more than one behavior, or complete concurrent tasks (Korotitsch & Nelson-Gray, 1999). Therefore, the therapist and client should identify a single, well-defined target for monitoring, model and practice completion of the record, and emphasize the importance of repeated practice (Korotitsch & Nelson-Gray, 1999).

Accuracy also improves when clients are aware that what they record will be compared with therapist observation or checked in some way (Korotitsch & Nelson-Gray, 1999). To support this, self-monitoring records should be reviewed in each session and the data should contribute to client-therapist collaboration, formulation and intervention planning.

If a client experiences repeated difficulty with completing self-monitoring, the therapist should consider the following (Korotitsch & Nelson-Gray, 1999):

- What is the client's understanding about why they are being asked to practice self-monitoring? Do they see value in self-monitoring?

- Is there anything about the client's current situation and environment that could be interfering with self-monitoring?

- Are too many targets being monitored?

- Does the client need additional in-session practice?

- Would a different type of assessment or recording be more suitable for this client?

- Is the client avoidant of particular experiences?

- Does the client hold beliefs which might interfere with self-monitoring? (e.g. beliefs about doing things 'perfectly')?

The target for self-monitoring (e.g. events, emotions, thoughts, memories, body sensations, or behaviors) will differ depending on the client's presentation. Psychology Tools provides many self-monitoring records, each tailored toward specific purposes.

The *Self-Monitoring Record (Universal)* worksheet is designed to help clients capture information about situations relevant to their presenting problem. It includes columns to record information about the clients thoughts, emotions, body feelings, and responses in a particular situation. An additional 'extended' version of the form includes a column for recording the consequences of the client's coping strategies to further inform their formulation.

Instructions

Suggested Question

A great way of finding out more about your experiences of these difficult thoughts, feelings, and reactions is to use a Self-Monitoring Record. It's like a diary that lets you record when a problem occurs, and any important details which could help us understand more about how it works. Would you be willing to go through one with me now?

Step 1: Choosing a focus, purpose, and prompt for data collection

Self-monitoring records are best used to capture information about specific categories of event that are of interest to the client, or related to a presenting problem. The accuracy of self-monitoring decreases when individuals try to monitor for more than one target, so therapist and client should identify a single well-defined target (e.g. *"Times when you notice yourself feeling anxious"*, "Times when you notice a sudden change in how you are feeling", "Times when you criticize yourself"). Self-monitoring is most helpful when it is completed as soon after the target event as possible, while the client's memory is still clear.

Suggested Questions

- *You've told me you're really bothered by these feelings of <anxiety/sadness/shame/…>, I wonder if you could fill in a self-monitoring record when you notice these feelings come on, so we can find out more about what's happening in those moments?*

- *If we're trying to understand more about your <depression/anxiety/other problem>, what situations do you think it might it be helpful to collect some details about?*

- *When will you fill in this self-monitoring record? What will your prompt be?*

Step 2: Situation

Whenever the client notices their prompt for completing a self-monitoring record, they should be encouraged to start by recording information about the situation. Relevant contextual information might be factual (e.g. date, time, location), externally focused (e.g. things that they could see, hear, touch, smell, taste), or internally focused (e.g. thoughts, images, memories). Helpful questions to ask include:

Suggested Questions

- *Had you been particularly aware of anything just before you noticed <your prompt>?*

- *What do you think caused you to start <thinking/feeling/experiencing> that?*

- *Were you aware of any triggers being present when you started to feel that way?*

- *Who were you with?*

- *What were you doing?*

- *What was happening?*

- *Where were you?*

- *When did this happen?*

Step 3: Thoughts

A core tenet of the cognitive behavioral approach is that people's emotional and behavioral reactions to an event are driven by their appraisals of that situation ("what you think affects the way you feel"). It is important to help clients notice and identify their automatic thoughts, interpretations, and predictions. Any automatic images or memories that clients experience can also be probed for meaning:

Suggested Questions

- *What went through your mind when you became aware of <the trigger>?*
- *When <situation> happened, what did you think?*
- *When you noticed <the trigger>, what did you think was going to happen? (prediction)*
- *What did you say to yourself in that moment?*
- *What mental images or memories did you notice when that happened? What did you think that image meant?*

Step 4: Emotions and body feelings

Self-monitoring records provide opportunities to educate clients about the cognitive behavioral model, and specifically the links between thoughts, emotions, physiology, and behavior. Clients can be helped to explore their emotional response to their interpretation of what happened, and to the events themselves. Some clients may benefit from being shown the emotion wheel, or lists of emotions.

Helpful questions might include:

Suggested Questions

- *Did you notice any feelings or sensations in your body? Can you describe them?*
- *How strong was that feeling at that moment? Could you rate it on a scale from 0 to 100?*
- *Feeling are often best described with just one word, whereas thoughts often take a few words to be described. What is the word that best describes how you felt in that moment?*
- *You said that you felt <angry/anxious/ ashamed>. Were there any other feelings underneath that <anger/anxiety/shame>?*

Step 5: Responses

The final step is to explore how the individual responded to the situation and their appraisal of what was happening, and to their emotional and physiological responses. Behavior can be framed as 'coping responses' or 'things that you did to help you cope with feeling that way'. Consider asking:

Suggested Questions

- *What happened next?*
- *Was there anything you avoided?*
- *What did you do to cope or manage how you were feeling when you <thought/felt> that?*
- *How did you react to feeling that way?*
- *Are there times when you have coped differently when faced with a similar situation?*

Step 6: Consequences (Optional)

The extended version of the *Self-Monitoring Record (Universal)* worksheet includes an additional column for clients and therapists to explore the consequences of the client's coping strategies. This step is not recommended for clients in the early stages of practicing self-monitoring, as it introduces unnecessary complexity. However, exploring the consequences of an action can aid understanding of why particular patterns of behavior persist. Some behaviors might lead to positive feelings (e.g. hair-pulling in trichotillomania can feel satisfying), some might lead to the removal of an unwanted feeling (e.g. escaping from a situation can lead to a reduction in fear), and some might have positive short-term consequences and negative long-term consequences (e.g. rumination can feel productive in the short-term, but may prevent taking more immediate action to lift one's mood). Prompts could include:

Suggested Questions

- *What was helpful or unhelpful about responding that way?*
- *How did you feel when you did that (emotionally and in your body)?*
- *How did people react when you did that?*
- *How did you feel (a) at the time and (b) later?*

References

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Self-Monitoring Record (Universal)

Situation	Thoughts	Emotions & body feelings	Responses
What was happening when you noticed a change in your thoughts, feelings, or actions?	What went through your mind? (Thoughts, images, or memories)	What did you feel? How strong was that feeling? (0–100%)	What did you do? How did you cope with those feelings?
Who were you with? What were you doing? Where were you? When did it happen?	If it was an image or memory, what did it mean to you?		

Self-Monitoring Record (Universal)

Situation What was happening when you noticed a change in your thoughts, feelings, or actions?	Thoughts What went through your mind? (Thoughts, images, or memories)	Emotions & body feelings What did you feel? How strong was that feeling? (0–100%)	Responses What did you do? How did you cope with those feelings?	Consequences What was helpful or unhelpful about responding in that way?
Who were you with? What were you doing? Where were you? When did it happen?	If it was an image or memory, what did it mean to you?			

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Self-Monitoring Record (Universal)

Situation What was happening when you noticed a change in your thoughts, feelings, or actions?	Thoughts What went through your mind? (Thoughts, images, or memories)	Emotions & body feelings What did you feel? How strong was that feeling? (0–100%)	Responses What did you do? How did you cope with those feelings?
monday 5:00pm I was watching TV before I was going to do a workout.	There's no point in trying because I'm never good at anything.	Sad, low, hopeless – 70%. Tired, low energy.	Gave myself a hard time to try and get motivated, but in the end I didn't bother doing the workout.
Wednesday 8:00pm Received an email from my boss asking to meet first thing in the morning.	I'm in trouble. I must have done something wrong. I'm going to lose my job.	Anxiety, panic – 80%. Heart beating. Alert and awake.	Sat and worried about what I could have done. Checked my emails to see if there were any clues. Rehearsed the conversation that I might have with my boss.
Friday 7:00pm My son wanted to play a building blocks game with me.	This is a bit boring and I keep wanting to look at my phone. I should be enjoying this.	Bored, frustrated – 30%. Guilty – 30%.	Looked at my phone, then realized what I was doing and reminded myself that it didn't matter if I was bored. What mattered was that he was happy. Played with him.
Who were you with? What were you doing? Where were you? When did it happen?	If it was an image or memory, what did it mean to you?		

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Self-Monitoring Record (Universal)

Situation	Thoughts	Emotions & body feelings	Responses	Consequences
What was happening when you noticed a change in your thoughts, feelings, or actions?	What went through your mind? (Thoughts, images, or memories)	What did you feel? How strong was that feeling? (0–100%)	What did you do? How did you cope with those feelings?	What was helpful or unhelpful about responding in that way?
Monday 5:00pm I was watching TV before I was going to do a workout.	There's no point in trying because I'm never good at anything.	Sad, low, hopeless — 70%. Tired, low energy.	Gave myself a hard time to try and get motivated, but in the end I didn't bother doing the workout.	I initially felt relieved, then felt bad about being lazy.
Wednesday 8:00pm Received an email from my boss asking to meet first thing in the morning.	I'm in trouble. I must have done something wrong. I'm going to lose my job.	Anxiety, panic — 80%. Heart beating. Alert and awake.	Sat and worried about what I could have done. Checked my emails to see if there were any clues. Rehearsed the conversation that I might have with my boss.	I felt prepared but very anxious about the meeting. In retrospect, it was a wasted effort because it was just my boss giving positive feedback from a client.
Friday 7:00pm My son wanted to play a building blocks game with me.	This is a bit boring and I keep wanting to look at my phone. I should be enjoying this.	Bored, frustrated — 30%. Guilty — 30%.	Looked at my phone, then realized what I was doing and reminded myself that it didn't matter if I was bored. What mattered was that he was happy. Played with him.	I felt better for controlling my urges and focusing on what was best for my son.
Who were you with? What were you doing? Where were you? When did it happen?	If it was an image or memory, what did it mean to you?			

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