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Embracing Change Clinical Practice Workbook

A clinically branded, function-preserving edition retaining the original exercises, psychoeducation, checklists, logs, planning tools, and response space.

DSM-5-TR · ICD-11 CLINICAL ALIGNMENT

1 · Identify the Need for Change

2 · The Stages of Change

3 · Costs and Benefits of Changing or Not Changing

4 · Motivate Yourself To Change

5 · Identify Personal Strengths

6 · Identify Barriers To Change

7 · Challenge Negative Beliefs

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10 · SMART Goals

11 · Personal Change Plan

12 · Develop a Growth Mindset

13 · Practice Positive Self-Talk

How to use this workbook

- Use this workbook selectively and collaboratively; it is educational and does not replace individualized assessment, diagnosis, treatment, medical care, or crisis services.
- Skip, pause, or modify any activity that increases distress, danger, shame, or loss of functioning. Adapt language for culture, disability, neurodivergence, health, resources, and lived context.
- Ratings in this workbook are reflection tools unless a named, validated measure and interpretation are explicitly provided.

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Identify the Need for Change

1. Reflect on your current daily routine and habits. Are there any patterns or behaviors that no longer serve you or align with your goals? Write about these and why you feel they need to be changed.

2. Consider your relationships. Are there any toxic or unhealthy relationships in your life that are draining your energy and holding you back? Describe these relationships and reflect on how they impact your overall well-being.

3. Explore your emotions. Are there recurring negative emotions or feelings of dissatisfaction that arise in certain aspects of your life? Write about these emotions and try to identify the underlying causes or triggers.

4. Reflect on your personal and professional goals. Are you feeling stagnant or unfulfilled in your current pursuits? Describe any areas where you desire growth or a change in direction, and explain why these changes are important to you.

5. Consider your physical health and well-being. Are there any lifestyle habits or choices that are negatively impacting your health? Write about any areas where you think improvements can be made, whether it's exercise, nutrition, sleep, or self-care practices.

6. Reflect on your overall happiness and life satisfaction. Are there any aspects of your life that feel out of balance or unfulfilling? Describe what those areas are and why you believe change is needed to improve your overall happiness and well-being.

Change can involve things you want to have or start doing as well as things you want to let go of or stop doing.

- Write down things/behaviors you want to start doing:

- Write down things/behaviors you want to get out of your life:

The Stages of Change

The Stages of Change model, developed by Prochaska and DiClemente, describes the different stages individuals go through when making a change. These stages include: precontemplation, contemplation, preparation, action, maintenance, and termination.

Go through the statements below and write a checkmark in front of the ones you relate to:

1. "I'm starting to think about the potential consequences of my behavior." _____
2. "I don't see any reason to change my behavior." _____
3. "I am actively working to prevent relapse and maintain my progress." _____
4. "I have been gathering information about how to make a change." _____
5. "I'm considering different options to address this issue." _____
6. "I'm actively seeking help or support to address this issue." _____
7. "I no longer feel at risk of reverting to my old behaviors." _____
8. "I am implementing new behaviors and breaking old habits." _____
9. "I can confidently say that I have overcome this issue." _____
10. "I have successfully sustained the changes I made." _____
11. "I have taken measurable steps towards changing my behavior." _____
12. "I have set specific goals and created a plan to make this change." _____
13. "I don't think my behavior is a problem." _____

14. "I'm weighing the pros and cons of making a change." _____

15. "I have integrated these new behaviors into my daily routine." _____

16. "This change has become a permanent part of who I am." _____

17. "This issue doesn't really affect me." _____

18. "I am using specific strategies or techniques to support this change." _____

Score Yourself. For every checkmark you wrote, give yourself 1 point.

The score of every stage will give you an idea about how far you've come:

Precontemplation:	2. _____ 17. _____ 13. _____	Score _____
Contemplation:	1. _____ 5. _____ 14. _____	Score _____
Preparation:	4. _____ 6. _____ 12. _____	Score _____
Action:	11. _____ 18. _____ 8. _____	Score _____
Maintenance:	10. _____ 3. _____ 15. _____	Score _____
Termination:	16. _____ 7. _____ 9. _____	Score _____

You may find that two stages have the same score. This may indicate that you're between these two stages.

It's important to note that not everyone progresses through these stages linearly, and individuals may experience setbacks or periods of uncertainty.

1. Precontemplation: In this stage, individuals have not yet recognized or acknowledged that there is a problem or need for change. They may be resistant to any suggestions or attempts to address the issue.

- If you rated this stage of change the highest, what are the negative consequences or risks of your current behavior?

- What would it take to make you start thinking about making a change?

2. Contemplation: Individuals in this stage are aware of the problem and are considering the possibility of change. They may weigh the pros and cons, think about the potential benefits, and explore different options.

- If you rated this stage of change the highest, what obstacles or fears are holding me back from taking action?

- What might you gain by changing your behavior?

3. Preparation: During this stage, individuals are actively preparing themselves to make a change. They may start gathering resources, setting goals, and creating a plan to move forward.

- If you rated this stage of change the highest, what specific goals do you want to achieve with this change?

- What steps can you take to create a supportive environment for the desired change or how can you overcome obstacles that may be in your way?

4. Action: In the action stage, individuals begin to implement their plan and take measurable steps towards change. They put their intentions into action.

- If you rated this stage of change the highest, what actions have you taken towards achieving your goals?

- What strategies or techniques have been helpful in maintaining your motivation and commitment?

5. Maintenance: After successfully taking action, individuals enter the maintenance stage. This stage involves sustaining the changes made and preventing relapse.

- If you rated this stage of change the highest, how can you remind yourself of the gains you've made?

- What can you do to prevent yourself from sliding back into old beliefs and behaviors, and sustain the change?

6. Termination: The final stage, termination, represents the point at which individuals have fully integrated the change into their lives. At this stage, the changed behavior has become a permanent part of their routine, and they no longer feel at risk of relapse.

- If you rated this stage of change the highest, how has this change become integrated into your identity and lifestyle?

- What have you learned about yourself through this process of change?

Costs and Benefits of Changing or Not Changing

Describe a Behavior You are Considering Changing:

Use the following chart to list the benefits and costs involved in making the change or not making it. Rate each statement on a scale from 1 to 5 (1 being not really important and 5 being very important) then compare scores:

The following prompts may help you reflect on the benefits/costs of making the change:

Benefits:

- What are the possible advantages of this change in my life?
- What goals or aspirations could I potentially achieve by making this change?
- How might this change positively impact my relationships, career, health, or personal growth?

Costs:

- What sacrifices might I need to make to implement this change?
- What are the potential risks or uncertainties involved?
- How might this change disrupt my current routine or lifestyle?

Motivate Yourself To Change

The following are common motivations people have when deciding to make a change. Read through the list, check off the ones you strongly agree with, and add ones of your own:

- ☐ I want to develop healthy coping skills.
- ☐ I want to feel proud of my accomplishments.
- ☐ I want to have more positive thoughts about my life.
- ☐ I want to have positive things in my life that make me fulfilled.
- ☐ I want to stop hurting myself or my relationships.
- ☐ I want to treat myself and others better.
- ☐ I want to_____
- ☐ I want to_____
- ☐ I want to_____
- ☐ I want to_____

Identify Personal Strengths

Identifying your personal strengths can help you feel more confident in your ability to face challenges.

Use the following prompts to help you reflect on your strengths:

1. What activities or tasks do you excel at? Write about the specific skills or abilities that help you excel at these activities or tasks.

2. Recall a situation when you felt confident or accomplished. What personal qualities or strengths contributed to that success?

3. What do others often compliment or praise you for? Reflect on the positive feedback you've received from friends, family, or colleagues.

4. Think about a challenge or obstacle you overcame in the past. What strengths did you utilize to navigate through that difficult situation?

5. Consider the roles you play in your life (e.g., as a parent, friend, or employee). What strengths do you bring to each of these roles?

6. Finally, ask yourself: What do I love about myself? Reflect on the unique qualities that make you who you are and contribute to your overall well-being.

My personal strengths are: _____

Identify Barriers To Change

Use the chart below to identify your barriers to change and decide on possible solutions.

The following is a list of common barriers to change:

- ☐ Lack of awareness or understanding of the need for change
- ☐ Limited resources (financial, time, etc.)
- ☐ Lack of support from family or friends
- ☐ Fear of failure or making mistakes
- ☐ Negative past experiences with change
- ☐ Uncertainty about the outcomes of change
- ☐ Fear of loss or letting go of the familiar
- ☐ Overwhelm from multiple changes happening simultaneously
- ☐ Lack of knowledge or skills needed to implement the change
- ☐ Lack of motivation or incentive to change
- ☐ Feeling overwhelmed by the perceived effort required for change
- ☐ Belief that the change is unnecessary or won't bring improvement
- ☐ Peer pressure or influence against the change
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____

What stops you from making the change?	Possible solutions
e.g. procrastination	e.g. Break tasks into smaller steps, Use time-management strategies such as the Pomodoro Technique (working in bursts of focused time followed by short breaks)

Challenge Negative Beliefs

Negative beliefs can also be barriers to change. The following is a list of common negative beliefs related to change. Check off the ones you relate to:

- ☐ This habit is my only way to cope with stress/escape pain
- ☐ I will fail if I try to make this change.
- ☐ Change is too difficult for me.
- ☐ I will lose out on the benefits of my current situation if I make this change.
- ☐ Others won't support or understand my decision to change.
- ☐ This change will cause too much stress in my life.
- ☐ I'm too old/young to make this change now.
- ☐ I don't deserve to experience positive change.
- ☐ Making this change will require too much time and effort.
- ☐ I've tried in the past and it didn't work, so it's pointless to try again.
- ☐ This change will disrupt my current relationships or social circle.
- ☐ I don't have the necessary resources or support to make this change.
- ☐ I will face judgment or criticism if I make this change.
- ☐ Making this change means admitting that I was wrong before.
- ☐ I'm afraid of starting over from scratch.
- ☐ I don't trust myself to follow through with this change.
- ☐ I'm too busy with other responsibilities to focus on this change.
- ☐ This change won't make a difference in the grand scheme of things.
- ☐ _____
- ☐ _____

Negative belief: _____

1. Are there any instances where these beliefs have been disproven or challenged?

2. What strengths and resources do you have that can help you navigate this change successfully?

3. Are there any individuals in your life who have successfully made similar changes? How can you learn from their experiences and use them as inspiration?

4. How might your negative beliefs be influenced by past experiences or traumas? How can you separate those experiences from your current potential for change?

5. What alternative beliefs could you adopt that would support your desire for change?

6. What are some small, manageable actions you can take to gradually challenge these negative beliefs and start moving towards the change you desire?

Do Something Differently

1. Identify the situation or behavior you would like to change:

Example: Procrastinating on tasks and assignments

2. Identify the negative consequences of the current behavior:

Example: Feeling stressed, overwhelmed, and falling behind on important deadlines.

3. Determine one specific action you can take to do things differently:

Example: Set a daily schedule and break down tasks into smaller, manageable steps.

4. Consider potential obstacles that might prevent you from implementing the new behavior:

Example: Distractions, lack of motivation, or difficulty sticking to a schedule.

5. Brainstorm strategies to overcome these obstacles:

Example: Minimize distractions by turning off notifications, finding a quiet workspace, and utilizing time management techniques such as Pomodoro Technique.

6. Set a realistic timeline for implementing the change:

Example: Start implementing the new approach within the next week and aim to consistently follow the schedule for at least 30 days.

7. Write down any additional resources or support you may need:

Example: Using productivity apps, seeking accountability from a friend or family member, or exploring time management techniques through online resources or books.

8. Reflect on how this change will positively impact your life:

Example: By overcoming procrastination, I'll feel more accomplished, less stressed, and have more time for other activities and self-care.

Goal Setting

Reflect on your ideal future:

Imagine yourself living your ideal life 5 or 10 years from now. Where do you see yourself? Consider various aspects such as career, relationships, personal growth, health, and leisure. Describe in detail what your ideal life looks like in each of these areas.

Set specific long-term goals:

Based on your vision of the future, identify three to five specific long-term goals that align with your aspirations and values.

SMART Goals

One effective exercise to set goals is called "SMART Goals." SMART stands for Specific, Measurable, Achievable, Relevant, and Time-bound.

1. Specific: Clearly define your goal. Avoid vague statements and be as specific as possible.

For example, instead of saying "I want to exercise more," specify "I want to go to the gym three times a week."

2. Measurable: Determine how you will measure your progress towards the goal. Use quantifiable indicators to track your achievements.

For instance, you can measure the number of gym visits per week or the amount of weight lifted during workouts.

3. Achievable: Ensure that your goal is realistically attainable given your current resources and circumstances. Consider your time, energy, and any potential obstacles that may arise. Set a goal that stretches you but remains achievable.

4. Relevant: Assess the relevance of the goal to your overall well-being and long-term aspirations. Determine if it aligns with your values, interests, and priorities. A goal that is personally meaningful is more likely to motivate and inspire you.

5. Time-bound: Set a specific timeframe within which you aim to accomplish your goal. This deadline creates a sense of urgency and helps you stay focused and accountable.

For example, establish a target date by stating, "I will start going to the gym three times a week within the next month."

1. Specific: What specific behavior or habit would I like to change or develop?

2. Measurable: How can I measure or track my progress towards this behavior change or habit development? Is there a way to quantify it (e.g., frequency, duration)?

3. Attainable: Based on my current circumstances and resources, what would make this goal realistic and within my capabilities?

4. Relevant: How does this behavior change or habit development align with my values and contribute to my long-term goals and aspirations?

5. Time-bound: By when do I want to achieve this change or habit? Are there any smaller milestones I can set to keep myself motivated and on track?

My goal: _____

Personal Change Plan

The change I want to make:
The most important reason why I want to make this change:
To reach my goal I plan to do these things:
The first steps I plan to take are:
Some obstacles that could interfere with my plan are:
Ways I can overcome those obstacles include:

Develop a Growth Mindset

The concept of Growth Mindset versus Fixed Mindset was introduced by psychologist Carol Dweck.

1. Growth Mindset:

- Individuals with a growth mindset believe that abilities and intelligence can be developed through effort, practice, and learning.
- They embrace challenges and see them as opportunities for growth.
- They are open to feedback and use it constructively to improve.
- They view failures as temporary setbacks and learn from them.
- They admire and are inspired by the success of others, seeing it as a source of motivation and learning.
- They persist in the face of obstacles and see them as a chance for further development.

2. Fixed Mindset:

- Individuals with a fixed mindset believe that abilities and intelligence are fixed traits that cannot be significantly changed.
- They tend to avoid challenges that may expose their perceived limitations.
- They may shy away from feedback or become defensive when facing criticism.
- They see failures as confirmation of their limited abilities.
- They may feel threatened by the success of others, perceiving it as an indication of their own inadequacy.
- They may give up easily when facing obstacles, believing that effort is pointless.

For the next week, pay attention to your inner thoughts and reactions when faced with difficult or challenging situations using the following chart:

Set back or failure	Thoughts	Fixed or Growth Mindset?	Growth Mindset thoughts	Growth Mindset action
e.g., I got rejected by someone I really liked.	"I'm unlovable. I should just give up on dating."	Fixed Mindset	"Although this rejection hurts, it doesn't define my worth as a person. I can learn from this experience and gain insights about myself and what I seek in a partner."	- Reflect on what I learned from the interaction and how it can guide my future dating choices. - Engage in activities and hobbies that promote self-care and self-love.

Set back or failure	Thoughts	Fixed or Growth Mindset?	Growth Mindset thoughts	Growth Mindset action

Practice Positive Self-Talk

The following is a list of statements to support you on your journey to making a change:

- ☐ Change is a natural part of life, and I am embracing it with kindness.
- ☐ It's okay to feel uncertain or uncomfortable; I am allowed to take my time.
- ☐ I am deserving of compassion and understanding as I navigate this change.
- ☐ Mistakes are opportunities for growth; I will be gentle with myself along the way.
- ☐ It's normal to have ups and downs during this process, and I will be patient with myself.
- ☐ I am brave for taking steps toward positive change in my life.
- ☐ I value myself and my well-being, which is why I am making this change.
- ☐ Every small progress I make is worth celebrating and acknowledging.
- ☐ I trust in my ability to adapt and learn from new experiences.
- ☐ I am choosing to let go of what no longer serves me and embrace what brings me joy.
- ☐ Change can be challenging, but I have overcome challenges before, and I can do it again.
- ☐ I am allowed to set boundaries and prioritize my needs during this transition.
- ☐ I am learning and growing every step of the way, and that is something to be proud of.
- ☐ As I look back on my journey, I see how far I've come and the resilience I possess.

- ☐ It's okay to ask for support and seek guidance from others during this change.
- ☐ I forgive myself for any missteps and trust that I am moving in the right direction.
- ☐ I am not alone in this process; many others have navigated similar changes successfully.
- ☐ My self-worth is not tied to the outcome of this change; I am worthy as I am.
- ☐ I release any guilt or shame I may have around this change; I am doing what's best for me.
- ☐ I can be patient with myself as I adjust to new circumstances and find my footing.
- ☐ I am allowed to feel a mix of emotions during this change; they are all valid.
- ☐ Each day is a fresh start, and I can approach this change with a renewed mindset.
- ☐ It's okay if my progress is slower than others; I am making progress at my own pace.
- ☐ I release the need for perfection and embrace the beauty of imperfection in this change.
- ☐ I give myself permission to enjoy the journey and not just focus on the destination.
- ☐ _____
- ☐ _____

Remember to read these statements as often as needed and customize them to best suit your own personal situation. You deserve compassion and support throughout this process of change.

2026 Clinical Alignment

DSM-5-TR (including Sept. 2025 update) · ICD-11 CDDR / 2026 MMS

Classification status

- DSM-5-TR: No standalone DSM-5-TR diagnosis under the workbook title · educational/contextual topic unless a separately assessed disorder applies
- ICD-11 CDDR: No dedicated ICD-11 CDDR mental-disorder code under the workbook title · educational/contextual topic unless another coded condition is established
- This workbook is non-diagnostic. A title, checklist, or completed activity never establishes a diagnosis.

Pages requiring the updated interpretation

- The audit identified source pages 2, 9, 10, 14, 16, 17, 22, 27. The statements below supersede incompatible diagnostic, scoring, safety, or resource wording on those pages.

Diagnostic and differential limits

- Use Embracing Change material to support assessment or intervention planning, not to assign a diagnosis. Evaluate duration, severity, clinically significant distress or impairment, developmental and cultural context, medical/substance causes, exclusions, and relevant differentials.

Document-specific corrections

- Keep Embracing Change explicitly non-diagnostic; its exercises organize experience and goals but do not establish a mental disorder or causal explanation.
- Supersede diagnostic-sounding scoring on pages [2, 9, 10, 14]: disclose whether each tool is validated or author-created, remove unsupported thresholds, and separate symptom monitoring from diagnosis.
- Replace crisis wording on pages [2] with the current U.S. 988 call/text/chat pathway, 911 or nearest emergency department for immediate danger/medical emergency, and a direction to use verified local services outside the United States.

Measures, scoring, and permissions

- Pages [2, 9, 10, 14] contain named, implied, or author-created screening/rating content . These scores are not diagnostic unless the exact instrument, version, validation population, administration, and interpretation are established. Identify provenance for every item set and scoring rule. Obtain publisher permission/license when required; otherwise remove cutoffs and label it as a nonvalidated reflection checklist, or replace it with a properly licensed measure without altering its wording/scoring.

Intervention scope and contraindications

- Use Embracing Change activities as psychoeducation and structured reflection, not diagnosis or a stand-alone treatment plan. Adapt or stop any exercise that worsens distress, functioning, conflict, pain, or dissociation, and escalate care according to the actual presentation.

Crisis and current resources

- For Embracing Change, use: ·If there is immediate danger or a medical emergency, call 911 or go to the nearest emergency department. In the U.S., call or text 988 or use 988lifeline.org for 24/7 crisis support. Outside the U.S., use verified local emergency and crisis services. · Verify all topic-specific agencies and links at publication.

Authoritative references

- <https://www.psychiatry.org/psychiatrists/practice/dsm/updates-to-dsm/updates-to-dsm-5-tr-criteria-text>
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