**Homework in Preparation for Week 3**

***A. Practice Breathing Meditation Exercise***

***B. Complete “Reign in Responsibility Exercise Below in Preparation for the Next Group***

***C. Complete Seizure and Doctor’s Appointment Diary - Remember to Log Seizure Free When None Occur***

**A. *Sensory Mindfulness Activity, Eating Meditation***

* Eating One Raisin: A First Taste of Mindfulness
  + Holding

First, take a food and hold it in the palm of your hand or between your finger and thumb. Focusing on it, imagine that you’ve just dropped in from Mars and have never seen an object like this before in your life.

* + Seeing

Take time to really see it, gaze at the food with care and full attention.

Let your eyes explore every part of it, examining the highlights where the light shines, the darker hollows, the folds and ridges, and any asymmetries or unique features.

* + Touching

Turn the food over between your fingers, exploring its texture; if you like, try closing your eyes to enhance your sense of touch.

* + Smelling

Holding the food beneath your nose, with each inhalation drink in any smell, aroma, or fragrance that may arise, noticing as you do this anything interesting that may be happening in your mouth or stomach.

* + Placing

Now slowly bring the food up to your mouth, noticing how your hand and arm know exactly how and where to position it. Gently place the object in the mouth, without chewing, noticing how it gets into the mouth in the first place. Spend a few moments exploring the sensations of having it in your mouth, exploring it with your tongue.

* + Tasting

When you are ready, prepare to chew the food, noticing how and where it needs to be for chewing. Then, very consciously, take one or two bites into it and notice what happens in the aftermath, experiencing any waves of taste that emanate from it as you continue chewing. Without swallowing yet, notice the bare sensations of taste and texture in the mouth and how these may change over time, moment by moment, as well as any changes in the object itself.

* + - Swallowing

When you feel ready to swallow the food, see if you can first detect the intention to swallow as it comes up, so that even this is experienced consciously before you swallow the food.

* + - Following

Finally, see if you can feel what is left of the food moving down into your stomach, and sense how the body is feeling after completing this exercise in mindful eating

**B. *Reign in Responsibility***

Do you find it hard to say no? When this question is asked in the clinic, we find that patients often give a resounding, “YES”. It is a common challenge, to learn to set limits when people are asking too much of you. Sometimes the person asking too much of you, may be yourself. We find in NES recovery, that setting boundaries with yourself and with others is an important part of the treatment process. By learning your limits and practicing sharing responsibilities with others, you are likely to feel empowered and to reduce stress and tension in your life. Just as important as saying no, is learning to recognize patterns of avoidance in your own life. As we move through this exercise, we encourage you to pay attention to how you cope with the obligations in your life, and how enhancing coping skills can become part of your recovery.

“Reigning in Responsibility” asks you to evaluate the responsibilities in your life that may act as triggers for your non-epileptic seizures. Some responsibilities can be a great source of stress, which we understand can worsen the intensity and frequency of non-epileptic seizures. Some responsibilities may include practical and daily life tasks such as caring for a household, taking responsibility for finances, or caring for a loved one etc. Others may be less obvious, such as taking responsibility for seeking and engaging in therapy, being an emotional support for someone in your life, or being the individual in your family who resolves conflicts. Can you identify the responsibilities in your life that are associated with stress, or that appear to act as a trigger?

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Do you find it difficult to share responsibilities with others, or to ask for help in managing obligations your life?

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Have you noticed any patterns in your life regarding responsibilities? For ex. Do you find you often avoid taking responsibilities for aspects of your life? Do you feel guilty when you say, no, to others?

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Why do you think these patterns emerged?

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You may have found during this exercise that you are surprised by how much responsibility you take ownership for. You may have also found that there are some responsibilities in your life that you have been avoiding. We find that patients share experiences of avoiding tasks that feel overwhelming. Some overwhelming responsibilities may include engaging in treatment or making critical changes in your life to help manage medical issues. It is human nature to avoid distress. Distress can be incredibly challenging for both the mind and the body. The avoidance of taking on or sharing responsibility is often a tactic to avoiding distress. It can be distressing to try to set boundaries with others, and to take steps towards your goals. We ask you in the next exercise to evaluate the responsibilities you listed above. Can you identify who “owns” the responsibilities you listed? For example, if caring for the finances in your family is an overwhelming task, does that task solely belong to you? Could you potentially share this with someone else? In the chart below, list who you feel is the true “owner” of the responsibilities you list in the left column. Try to be “objective” meaning, take a step back, and consider whether these responsibilities could look differently.

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| **Responsibility** | **Owner of the Responsibility** |
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Were you surprised at the answers you shared above? It can often be an eye-opening experience. Many are unaware of just how much they take ownership for. Once you identify who you believe “owns” these tasks, we encourage you to ask yourself if you accept this ownership. For example, if you are taking ownership of the finances in your household, do you accept this responsibility? Is this a responsibility that you would like to change? Are you ready to accept responsibility or would you like to work towards any changes? Group members will often share that they do not have anyone in their life who would be able or willing to take on a task. We understand that some responsibilities may not be able to be shared. We encourage you to evaluate whether you accept that a responsibility belongs to you utilizing the chart below. We ask that you try to think “outside the box” and notice if you may have opportunities that you were not initially aware of to seek support and help from others.

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| **Responsibility** | **Owner of the Responsibility** | **Do you accept this responsibility?** |
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Were you surprised by how many responsibilities you accept ownership of? Were you surprised by some responsibilities that you have avoided? What patterns did you notice?

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In the next part of this activity we would like you to recognize how you cope with the tasks you shared above. For example, if you identified managing the household finances as a task that is overwhelming and you have decided and accepted you are the sole owner, how do you cope? If an overwhelming task is associated with your seizures, it will be important to evaluate how you can either change the task directly or change how it affects you. As we explored in the week 1 homework, triggers create internal states that can increase risk of seizures. To reduce the impact of a stressful responsibility we must take active steps to intervene. How do you cope with the responsibilities you listed above? If it can be shared, and you accept that it should be, how can you take steps to share them? Some coping skills for example may include:

* 1. **Positive reframing-** trying to see the positive aspects of each situation you encounter, sometimes avoiding or pushing away negative feelings
  2. **Avoidance-** avoiding thinking about or tackling a task, avoiding asking for help or sharing responsibilities, blaming others
  3. **Denial**- denying how much a responsibility may be affecting you, or denying responsibility for tasks in your life (such as engaging in therapy)
  4. **Getting support-** reaching out to those who may be able to help, for either practical support, or emotional support
  5. **Reducing distractions**- making an environment more productive, by creating a plan of action and definitive steps
  6. **Humor-** laughing and using humor to avoid painful emotions or to reduce tension
  7. **Venting-** sharing your feelings and frustrations with someone else, not necessarily planning change

The examples listed above, are all examples of skills that are helpful in some circumstances but can be unhelpful when utilized too frequently or in the wrong circumstances. We use the word “skills” when exploring coping mechanisms, because learning new ways to cope involves practice and hard work. There is no perfect person who can cope with anything life throws their way. We hope that through your time in the program you explore your patterns of coping, and practice new ways of interacting with stressful tasks in your life.

Using examples listed above, or your own examples, what coping skills do you use to cope with the responsibilities you listed above? For example, if you are overwhelmed with finances, do you avoid asking for help from a partner out of fear of being a burden?

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Can you identify opportunities where you felt your coping mechanisms were helpful? Can you identify how these same coping mechanisms have been unhelpful in your life?

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Where did you learn these patterns of coping?

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Lastly, in the exercises above, there may have been responsibilities that you do not accept total responsibility for. You may have been able to notice areas where you could share the burden and ask for support. If you have been able to identify any of these tasks, what next steps are available to you, to begin to make a change? How can you change how this responsibility affects you and your quality of life?

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***C. Complete Seizure and Doctor’s Appointment Diary - Remember to Log Seizure Free When None Occur***