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Project RECLAIM Clinician Manual

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Project RECLAIM:

Reduce Clutter and Increase Meaning in Your Life!

Clinician Manual

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"Things do not change: We change." – Henry David Thoreau

Reclaim your home, reclaim your life.

Treatment Description

Worksheets and Handouts

Note: Project RECLAIM was developed using motivational interviewing as described by Miller & Rollnick (2013), and relevant quotations are included throughout this manual.

Miller, W. R., & Rollnick, S. (2013). Motivational interviewing: Helping people change. Guilford press.

Treatment Description

The purpose of the RECLAIM intervention is to assist participants in achieving their goals for their home (and their life). Session 1 and 6 will have some beginning and wrap-up material, respectively, but otherwise all sessions will be identical in terms of structure. The goal of each session is to have participants practice sorting/discarding and work towards creating a sustainable daily practice when the clinician is not present.

Session 1

Begin the session by introducing yourself, the RA, and affirming that they are ready to participate in the study. Ask if they have any questions at this point. The participant should already have their folder with a schedule inside (provided at the baseline assessment); provide them with the Session 1 handout and the sorting practice worksheets.

Explain that you are going to spend part of the session discussing why they want to participate in the study and what they hope to get out of the treatment.

Strengths

Ask the participant about their strengths (e.g., care for others, artistic ability) and have them record this on the **Session 1 handout.**

Values

Ask the participant about their values and have them record this on the Session 1 handout.

(They likely have more than three core values, but encourage them to really consider what is most important to them. Because hoarding patients tend to be indecisive, asking them to limit their answer prevents them from generating a list of values that is too long to be useful).

This may be a quick question-and-answer, or it may be a more in-depth conversation. For some folks, they may have never considered or verbalized the driving principles of their lives. Asking open ended questions

("Tell me what you care most about in life. What matters most to you?;" "What would you say are the rules you live by? What do you try to live up to?") can help elicit value-related cognitions, which can then be clarified using reflective statements.

If the participant doesn't immediately list off values, provide them with the Value List (based on the Values Card Sort). Be aware that hoarding patients often have low insight into the connection between their values and the actual impact of their actions. For example, a participant may tell you that protecting the environment is an important value, and then use that as justification for not putting things in the trash (including what most people would consider to be trash).

The skill <u>developing discrepancy</u> can be used to discuss this disconnect while maintaining a collaborative demeanor to the session.

Goal-setting

Ask the participant about their long-term and short-term goals (e.g., improved sleep, host friends and family, clear off couch and oven) and have them record this on the Session 1 handout.

Remind them that these goals may change over the course of treatment and are just being used as a jumping off point.

Sorting Practice Worksheet

Introduce the Sorting Practice Worksheet and discuss any anticipated issues in completing the worksheet. Spend the remainder of the session doing in-session Sorting Practice.

Schedule next session and write the date and time in the participant's treatment manual.

During each weekly session, clinicians will complete the Session Worksheet to document participants' weekly sorting efforts, barriers to treatment engagement, and session details. (Some of the worksheet can be filled in after the session, perhaps by the RA in conversation with the clinician on the drive back to the lab.)

Discussion of Weekly Sorting

Begin the session with checking in on how the patient's Sorting Practice went over the previous week and discuss any barriers that arose, including barriers to completing the Sorting Practice Worksheet.

Try to limit the discussion of the previous week to **less than 20 minutes** so that the bulk of the session can be spent on in-session sorting.

For Session 6, let participant know that this is their final session.

Complete Final Session Worksheet. Query if they achieved their goals for treatment and record goals for continued progress. Discuss client's plan for sorting/discarding post-treatment.

Sorting Practice

Ask the participant where they would like to focus their sorting today. Use MI skills as needed during the Sorting Practice and record session details on the Session Worksheet.

Scheduling

Schedule next session and write the date and time in the participant's treatment manual.

Sorting Practice

The bulk of each session is "Sorting Practice." The idea is that you will use MI techniques as necessary during the sorting.

Purpose

The purpose is to get the individual used to spending time sorting and discarding objects. If someone gets "stuck" on one object ("my grandmother gave this to me on my 16th birthday, I could never part with it, but I hate it and never wear it"), it is *okay* to skip to the next item. You might circle back later, or you might not. Either way, the hope would be that instead of spending 20 minutes talking about one item that the person doesn't want to discard, you can help them locate 20 items that they can easily part with. Thus, the ultimate point is to facilitate the person getting a sense of self-efficacy by discarding as much as possible.

Where/What to Sort

Unlike traditional exposure therapy for hoarding, **there is no fear hierarchy and no systematic sorting of one area or one type of item**.

At the beginning of each Sorting Practice, ask the patient if there is a particular area of the home or kind of object they would like to be the focus. This will add structure to the sorting and prevent it from feeling hectic.

Making Decisions

The clinician and RA are there to facilitate the sorting practice, but not to dictate what should or should not be discarded. *If you think someone is choosing to keep trash or discard something valuable, that is none of your business.* If a participant asks your opinion, turn it back on them ("Everyone is different. Why would YOU want to keep or discard this object?").

Ideally, everything that is kept should be put in a "forever home;" however, that is unlikely to be feasible at the early stages of treatment (e.g., because that spot is overcluttered as well). If things can be easily and quickly placed in their spot, that is great, if not, do not waste time in-session trying to make it work. **Focus on getting as much out the door as possible**.

Number of Piles

Ideally, things should be sorted into two piles: Keep and Discard. The Discard pile can be placed immediately into a trash bag, as feasible. The Keeps might be left in their current location or moved to their "forever home." Some participants may also want piles for donating, recycling, or for giving to specific people/locations (e.g., "I want to bring these napkins to church" or "I am saving this for my daughter's birthday").

Some participants might also make use of a Maybe pile. If you are working with someone who wants a Maybe pile, be sure to save time at the end of the session to circle back to the Maybes to see if they could be moved to Keep or Discard.

Wrap-up

At the end of the sorting practice, trash should be taken out to the trashcan (or dumpster or trash chute, depending on the person's living situation). This will help prevent re-sorting. Similarly, if the individual wanted to have a "to recycle" or "to donate" pile, those items should be placed in a box or bag and put in the person's car (if feasible) with a plan to have those things dealt with before the next session.

If an individual is unable to discard the items prior to the next session, query for barriers and encourage them to come up with a plan for completion.

Motivational Interviewing (MI) is used to *guide* participants to behavioral change. This is in contrast to a *directing* approach, in which you might take an active role in telling the participant what to do, or a *following* role in which you allow the participant to lead the session.

"MI is about arranging conversations so that people talk themselves into change, based on their own values and interests." (pg 4)

The individuals who are treatment-seeking for hoarding disorder are likely to still be ambivalent about making actual changes to their behaviors. They are able to identify the merits of increasing their sorting/discarding of possessions (e.g., cook in kitchen, entertain friends) but also have conflicting motivations (e.g., not wanting to spend the time, worried about throwing away something useful).

"Ambivalence is simultaneously wanting and not wanting something or wanting both of two incompatible things." (pg 6)

Hoarding participants who are ambivalent about change will have speech that includes both change talk ("I want to clean out the guest bedroom so my grandchildren can visit") and sustain talk ("There is nothing that I can bear to part with.")

"Yes, but. . ." is the cadence of ambivalence." (pg 6)

Examples of Hoarding-related Change Talk:

· **Desire**: *I want to have friends over for a dinner party.*
· **Ability**: *I can check the mail every day.*
· **Reasons**: *If I discard some of these papers, I will be closer to my goal of creating a craft area in my home.*
· **Need**: *I need to start discarding before I end up like my mother.*
· **Commitment**: *I plan to start discarding every day.*
· **Activation:** *I will clean out the kitchen.*
· **Taking Steps:** *I started discarding this week.*

Examples of Hoarding-related Sustain Talk:

· **Desire**: *I like to have all of my things around me.*
· **Ability**: *I don't have time to discard regularly.*
· **Reasons**: *Having clutter makes me feel safe.*
· **Need**: *I need to accept that nothing will ever change.*
· **Commitment**: *I will let my daughter deal with the clutter when I die.*
· **Activation:** *I'm just not willing to make the commitment to make these decisions.*
· **Taking Steps:** *I went back to Bargain Hunt yesterday and bought more egg cookers.*

When you as the clinician argue *against* the sustain talk, you put the participant in the position of arguing *for* the sustain talk. Thus, if you ask a hoarding participant to focus on the reasons they wish to discard an object, they may, paradoxically, start generating reasons for keeping the object due to a sense that you are pushing for change.

"MI involves a collaborative partnership with participants, a respectful evoking of their own motivation and wisdom, and a radical acceptance recognizing that ultimately whether change happens is each person's own choice, an autonomy that cannot be taken away no matter how much one might wish to at times." (pg viii)

Collaboration refers to the fact that the participant is not a passive recipient of the intervention. Remember: even the most unreliable narrator knows more than the reader! Never assume that you are more of an expert on a participant's case than they are. Let the participant tell you their own reasons for hoarding and the barriers that have prevented them from de-cluttering.

Acceptance is also a key aspect of using the MI framework. Remember: you are not trying to change the participant, you are helping them to enact the changes they would like to make. "Honoring each person's *absolute worth* and potential as a human being, recognizing and supporting the person's irrevocable *autonomy* to choose his or her own way, seeking through *accurate empathy* to understand the other's perspective, and *affirming* the person's strengths and efforts." (pg 19)

There are four main processes in MI: Engaging, Focusing, Evoking, and Planning.

Engaging refers to pretty much anything you do to develop a working alliance with the participant. This includes using active listening skills, understanding what your body language is conveying (do you seem welcoming or judgmental?), and instilling hope.

This does _not_ include overuse of informal chat. Don't let your session slip away into a discussion of how cute cats are! Remember to stay on focus – you are there to help the participant achieve their clutter-related goals.

Focusing: "the process by which you develop and maintain a specific direction in the conversation about change." Hoarding participants coming to us for treatment already have an agenda on the mind (i.e., decluttering); however, their specific change goal (e.g., sorting every day while I watch TV so that in a month my daughter can come visit) is likely not solidified.

This might seem simple on the outset – they are here to get rid of stuff! – but it is likely more complex than that. Although this treatment is brief, 16 weeks is enough time for progress to start to gain traction.

Is there a particular part of the house the participant would want to focus on? Is there a part of their routine that they struggle to make concrete?

Evocation is the act of eliciting a participant's own change talk.

"Evoking involves eliciting the participant's own motivations for change, and it has always been at the heart of MI. It occurs when there is a focus on a particular change and you harness the participant's own ideas and feelings about why and how they might do it."

Instead of challenging why participants are choosing to keep objects, evoking in the context of hoarding treatment is about eliciting participants' reasons for why they might want to discard objects. You want to _let them convince themselves_ to declutter.

Planning is the process by which the clinician facilitates the participant developing their own plan for decluttering (e.g., increasing their sorting/discarding behaviors).

This is not a static step! The best of plans fail quickly in the face of other priorities. A plan should be a living thing that changes as needed. The key is to help the person create a plan that they feel is achievable and to include the necessary steps to make it achievable.

Assorted components/techniques of MI are described below.

Asking Open Questions helps to evoke motivations and creates a more collaborative feel to the session. (E.g., "What barriers got in the way this week?" vs. "Did barriers get in the way this week?").

The goal is to have the participant elaborate on the change talk by using <u>honest curiosity</u>. Note: watch your tone to avoid sounding pushy.

Affirming the participant's strengths and the behaviors they are doing that bring them closer to their goal(s). This doesn't mean affirming the negative aspects of a person's behavior, just validating the positive. (E.g., "It looks like you sorted more days this week than you did last week – that is wonderful progress towards your goal" vs. "It looks like you still aren't sorting daily.")

Affirmation can be thought of as a tool against defensiveness. Honest affirmations increase the participant's sense that you respect them and are not attacking their sense of self.

This is especially important for hoarding participants. There is a great deal of stigma around hoarding, combined with the often-overlapping sense of self with objects. You want to strike a delicate balance when giving affirmation so that you don't elicit defensiveness and sustain talk. (E.g., "You did a great job of persevering today during sorting practice even though I could tell it was difficult because you sorted mostly items associated with your family" vs. "You did a great job today throwing away all those sentimental things you don't need.")

Reflective Listening is used during the Evoking and Planning stages. This doesn't mean just repeating what the participant says! Reflecting is about taking in all that a participant says and paraphrasing key aspects to clarify and query about meaning. For example, if a participant volunteers a lengthy reason for why they need to keep a certain object for sentimental

purposes, you might reflect back something like "Connection to family is important to you and keeping this object is consistent with that value." By making this a statement, rather than a question, you are able to clarify with less risk of making the person defensive.

Reflections should be more than a simple paraphrase (e.g., the participant says, "I want to keep this because it was my mother's" and you respond with "Because that belonged to your mother, you don't want to get rid of it"). Instead, it should be a *reasonable guess* as to what meaning might be behind the statement (e.g., "Having this item makes you feel connected with your mother.").

Summarizing is essentially advanced reflective listening. For example, after a participant has chosen to keep multiple objects for sentimental reasons, you might summarize by saying something like "You have many objects that are connected to your value of family. You are concerned that discarding any of them might be disrespectful to the memory of the person. You would also like to have space to make new memories in."

Informing and Advising with the permission of the participant and letting them reach their own conclusions. This is one of the trickier parts of MI and easily confused with trying to direct behavior.

It is important to communicate to the participant that they are the expert of their own values and goals, and you are just there as a helpful guide. (E.g., "We've talked about your goal to declutter to make more space for having friends and family visit. Would you be willing to consider selecting your favorite few items that connect you to your family and letting go of the others?" vs. "You clearly have too many sentimental objects. Getting rid of them would be an easy way to make more space.")

Exploring Discrepancy between stated values and current behaviors. This is NOT confronting the person; it is allowing them the space to examine the discrepancy themselves.
Your task is to encourage them to reflect on the discrepancy while remaining nonjudgmental. ("How would decluttering bring you closer or further from your values and goals?" vs. "If you don't get rid of things you will never be able to host your grandchildren.")

Agenda mapping = collaboratively deciding on a direction for the discussion/sorting practice. "What would you think about taking a few minutes to discuss where *you* want to focus today's sorting? You've talked about several different areas where you find the clutter to be most bothersome to your daily routine. Would it be okay if we discussed which areas might best fit with your values and goals?"

Elicit-Provide-Elicit is a strategy for exchanging information with a participant wherein you sandwich providing information between eliciting what the participant already knows/permission to give information/what they think about the information.

Example: if a participant is talking about how they can't get rid of a box of papers because they are copies of tax documents from several decades in the past, you might use this skill to discuss whether or not they need to keep those documents. Elicit = "Do you know about the requirements the IRS has for keeping tax documents?. . .Would it be okay for me to share that information with you?" Provide = "The IRS only recommends that you need to keep records for three years after you filed your return." Elicit = "Does that information change how you are thinking about these papers?"

You could also use a situation like this to ask if the participant would like to look up *together* the IRS requirements. This would help increase their sense of self-efficacy for finding such information again in the future.

(Pg 139)	Tasks	In Practice
Elicit	• Ask permission • Clarify information needs and gaps	• *May I. . .?* or *Would you like to know about. . .?* • *What do you know about. . .?* • *What would you like to know about?* • *Is there any information I can help you with?*
Provide	• Prioritize • Be clear • Support autonomy • Don't prescribe the person's response	• What does the person most want/need to know? • Avoid jargon; use everyday language • Offer small amounts with time to reflect • Acknowledge freedom to disagree or ignore

		• Present what you know without interpreting its meaning for the participant
Elicit	• Ask for the participant's interpretation, understanding, or response	• Ask open questions • Reflect reactions that you see • Allow time to process and respond to the information

Questions for Evoking Change Talk:

Importance Ruler. This is a tool for evoking change talk that comes in two parts:

1)   You ask the participant "How important is it for you to _____?" and ask them to rate the level of importance on an arbitrary scale of 0-10. For our purposes, this is likely to include something like "On a scale from 0-10 where 0 is not important at all and 10 is the most important thing in your life right now, how important is it for you to declutter _____?" And fill in the blank with either their whole house or a specific area(s) they have been discussing (e.g., bedroom/kitchen/living room).

2)   You then follow up by asking why that number isn't *lower*. Asking why the number isn't lower will elicit change talk; they will justify why they value decluttering, however much they value it.

Querying Extremes. Asking the person to image the extreme consequences of changing vs. not changing their behaviors.

Example:

"What are you concerned about might happen if you don't start to declutter?" and "What would be the best outcome to come from decluttering?"

Looking Back
"Do you remember a time when clutter wasn't a problem? What changed?"
Looking Forward
"What do you think might be different in your life if you start to declutter?"

<u>Responding to Change Talk:</u> Open Question --> Affirmation --> Reflection --> Summary

Open Question. The goal is to have the participant elaborate on the change talk by using honest curiosity. Note: watch your tone to avoid sounding pushy.

Example:

Participant: "I wish I could have my grandkids come visit but there is too much clutter."
Clinician: "How does the clutter interfere with their visit?"
Participant: "They don't have anywhere to sleep, and my daughter says she worries they might eat some of the food in the refrigerator."

You might also ask about specific examples; "Tell me about what happened the last time they visited." or "Tell me about what you would like to happen when they visit."

Affirmation. Affirmation and reflection are like the "yes, and" of MI. You want to acknowledge what they said (in a positive way!) and then generate the next step towards their goal.

Example:

Participant: "I don't want to live this way anymore."
Clinician: "Signing up for this program was a big first step to making that change."

Reflection. Simple reflections just restate what the participant said. Complex reflections are the "and" part of the "yes, and."

Example:

Participant: "I want to clean out the guest bedroom so that my grandkids can sleep there."
Clinician: "You are excited about the idea of your grandkids being able to visit."

You are likely to have participants give you one snippet of change talk in an avalanche of sustain talk. The key is to reflect the change talk, not to try to problem solve the sustain talk.

Example:

Participant: "I hate how I can't cook in my kitchen anymore, but I just don't know where to put everything. I want to be prepared for having a big dinner party and I need to keep all of these plates and bowls so that I could serve all of my friends when I have a big party."
Clinician: "What was it like the last time you had a dinner party?" [open question] "You've already started to think about the reasons you want to reclaim this part of your home." [affirmation]
"You miss using your kitchen to make food for your friends." [reflection]

Summary. This is where you gather the change talk that the participant has sprinkled through the conversation and tie it altogether, ending with an open question to elicit additional change talk.

Example: "From what we've been discussing, family is an important value for you, and you would like to have your grandchildren visit you more often. De-cluttering the guestroom would be one way to make it easier for them to visit. You also enjoy cooking for friends and family and are excited to host dinner parties again. What are other goals you would want to move towards?"

Worksheets and Handouts

Session Worksheet – Session 1

PtID: _____ Clinician: _____ Session #: _____ Date: _____

Strengths:

1) _____

2) _____

3) _____

Core values:

1) _____

2) _____

3) _____

Long-term goals:

1) _____

2) _____

3) _____

Short-term (next 6 weeks) goals:

1) _____

2) _____

3) _____

Today's Session:

1) Length of today's session: _____

2) Time spent sorting/discarding in session: _____

3) MI techniques used in session:

_____

_____

_____

4) What barriers got in the way of sorting/discarding during session?

_____

_____

_____

5) Anything else you want to note about the session?

_____

_____

_____

Session 1

The purpose of this program is to help you reclaim parts of your home that are currently cluttered. Our hope is that by regular sorting and discarding of the clutter in your home, you will be able to reach your goals.

You might not achieve all of your goals during this 16-week program, but we hope that by the end of your participation in Project RECLAIM, you are on your path to achieving your goals and reclaiming your home!

My strengths are:

1) _____

2) _____

3) _____

My core values are:

1) _____

2) _____

3) _____

My long-term goals are:

1) _____

2) _____

3) _____

My short-term (next 6 weeks) goals are:

1) _____

2) _____

3) _____

Sorting Practice Worksheet

Use this worksheet to monitor you daily sorting/discarding and any barriers to sorting.

Day	Time spent sorting	What did you sort?	Barriers that arose

Session Worksheet

PtID: _____ Clinician: _____ Session #: _____ Date: _____

Review of Past week:

1) How many days since the previous session? _____

2) How many of those days did participant sort/discard? _____

3) On days participant engaged in sorting/discarding,
what was the average length of time spent sorting/discarding? _____

4) What barriers got in the way of sorting/discarding this week?

_____

_____

Today's Session:

5) Length of today's session: _____

6) Time spent sorting/discarding in session: _____

7) MI techniques used in session:

_____

_____

8) What barriers got in the way of sorting/discarding during session?

_____

_____

9) Anything else you want to note about the session?

_____

_____

Session Worksheet: Final Session

PtID: _____ Clinician: _____ Session #: _____ Date: _____

Review of Past week:

10) How many days since the previous session? _____

11) How many of those days did participant sort/discard? _____

12) On days participant engaged in sorting/discarding,
what was the average length of time spent sorting/discarding? _____

13) What barriers got in the way of sorting/discarding this week?

_____

_____

Today's Session:

14) Length of today's session: _____

15) Time spent sorting/discarding in session: _____

16) MI techniques used in session:

_____

_____

17) What barriers got in the way of sorting/discarding during session?
_____

_____

18) Anything else you want to note about the session?

_____

_____

10) Did participant achieve their short-term goals from session 1?   Yes   No

11) Participant goals for maintaining/continuing progress:

1) _____

2) _____

3) _____

Values List

ACCEPTANCE - to be accepted as I am
ACCURACY - to be correct in my opinions and beliefs
ACHIEVEMENT - to have important accomplishments
ART - to appreciate or express myself in art
AUTHORITY - to be in charge of others
ADVENTURE - to have new and exciting experiences
ATTRACTIVENESS to be physically attractive
AUTONOMY - to be self-determined and independent
BELONGING - to have a sense of belonging, being part of something
BEAUTY - to appreciate beauty around me
COMPASSION - to feel and act on concern for others
COMPROMISE - to be willing to give and take in reaching agreements
COOPERATION - to work collaboratively with others
COMPLEXITY - to embrace the intricacies of life
CONTRIBUTION - to make a lasting contribution in the world
COURAGE - to be brave and strong in the face of adversity
CARING - to take care of others
CHALLENGE - to take on difficult tasks and problems
COMFORT - to have a pleasant and comfortable life
COMMITMENT - to make enduring, meaningful commitments
COURTESY - to be considerate and polite toward others
CURIOSITY - to seek out, experience, and learn new things
CREATIVITY - to create new things or ideas
DEPENDABILITY - to be reliable and trustworthy

DILIGENCE - to be thorough and conscientious in whatever I do
DUTY - to carry out my duties and obligations
ECOLOGY - to live in harmony with the environment
EXCITEMENT - to have a life full of thrills and stimulation
FAITHFULNESS - to be loyal and true in relationships
FAME - to be known and recognized
FAMILY - to have a happy, loving family
FLEXIBILITY - to adjust to new circumstances easily
FREEDOM - to be free from undue restrictions and limitations
FITNESS - to be physically fit and strong
FORGIVENESS - to be forgiving of others
FRIENDSHIP - to have close, supportive friends
FUN - to play and have fun
GENUINENESS - to act in a manner that is true to who Iam

GENEROSITY - to give what I have to others
GOD'S WILL - to seek and obey the will of God
GRATITUDE - to be thankful and appreciative
HEALTH - to be physically well and healthy
HOPE - to maintain a positive and optimistic outlook
HUMOR - to see the humorous side of myself and the world
GROWTH - to keep changing and growing
HONESTY - to be honest and truthful
HUMILITY - to be modest and unassuming
IMAGINATION - to have dreams and see possibilities
INDEPENDENCE - to be free from depending on others
INDUSTRY - to work hard and well at my life tasks
INNER PEACE - to experience personal peace
INTEGRITY - to live my daily life in a way that is consistent with my values
INTIMACY - to share my innermost experiences with others
JUSTICE - to promote fair and equal treatment for all
LEADERSHIP - to inspire and guide others
KNOWLEDGE - to learn and contribute valuable knowledge
LEISURE - to take time to relax and enjoy
LOVING - to give love to others
INTELLIGENCE - to keep my mind sharp and active
LOVED - to be loved by those close to me
MODERATION - to avoid excesses and find a middle ground
MASTERY - to be competent in my everyday activities
MINDFULNESS - to live conscious and mindful of the present moment
MONOGAMY - to have one close, loving relationship
MUSIC - to enjoy or express myself in music
NON-CONFORMITY - to question and challenge authority and norms
NOVELTY - to have a life full of change and variety
NURTURANCE - to encourage and support others
OPENNESS - to be open to new experiences, ideas, and options
ORDER – to have a life that is well ordered and organized
PASSION - to have deep feelings about ideas, activities, or people
PLEASURE - to feel good
POWER - to have control over others
PROTECT - to protect and keep safe those I love
PATRIOTISM - to love, serve, and protect my country
POPULARITY - to be well-liked by many people
PRACTICALITY - to focus on what is practical, prudent, and sensible
PROVIDE - to provide for and take care of my family

PURPOSE - to have meaning and direction in my life
RATIONALITY - to be guided by reason, logic, and evidence
REALISM - to see and act realistically and practically
RESPONSIBILITY - to make and carry out responsible decisions
RISK - to take risks and chances
ROMANCE - to have intense, exciting love in my life
SAFETY - to be safe and secure
SELF-CONTROL - to be disciplined in my own actions
SELF-KNOWLEDGE - to have a deep and honest understanding of myself
SELF-ACCEPTANCE - to accept myself as I am
SELF-ESTEEM - to feel good about myself
SERVICE - to be helpful and of service to others
SEXUALITY - to have an active and satisfying sex life
SIMPLICITY - to live life simply, with minimal needs
SOLITUDE - to have time and space where I can be apart from others
SPIRITUALITY - to grow and mature spiritually
STABILITY - to have a life that stays fairly consistent
TRADITION - to follow respected patterns of the past
TOLERANCE - to accept and respect those who differ from me
VIRTUE - to live a morally pure and excellent life
WORLD PEACE - to work to promote peace in the world