

# [My goals](https://assignbuster.com/my-goals/)

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The behavior I intended to change is worry. This behavior was triggered by my being overweight. To address this behavior problem, I intended to solve the cause. My precise goal was to reduce the frequency and duration of worrying per day.

Before the behavior intervention program, I would be worried for about ten hours in a day. The benefits which I perceived would come with this behavior change include: to increase my ability to fully concentrate in my studies since I had been unable to do so courtesy of the high levels of worry, and to increase my associates since the worry had turned me antisocial. I kept track of my daily progress through the use of a table. In this table, I recorded the number of hours I exercised per day, my weight loss every day, the number of minutes I could concentrate on my studies each day as well as the number of hours I would stay worried in a day. Both extrinsic and intrinsic factors motivated me to achieve my goal.

My Intrinsic motivation was basically fuelled by the benefits I perceived would come from the program as well as my positive response to the program. The “ readiness to act” type of motivation, whereby, the fear of contracting a serious disease if I failed to address my condition also came in handy. An important element in this type of motivation is the belief and confidence that behavior change can be positive (Stuart, 1996). Having an exercise specialist motivated me extrinsically. This specialist taught me the appropriate distance I needed to cover at different times. This reinforced my behavior thereby increasing my skill as well as confidence and the likelihood of maintaining this exercises as part of my lifestyle.

I also had a diet specialist who advised me on the right meals to take to ensure I lost weight to the level I desired while at the same time cushioning myself against negative impacts of the loss. This motivated me further. Extrinsic motivation also came from my family members who would sometimes accompany me in the exercise and also comment on my progress. Their positive comments kept me going. Counter-motivation came from the slow pace of positive response at the start of the program and negative comments from some of my peers. I relied more on extrinsic motivation from the specialists and family members since the de-motivators would reduce my intrinsic motivation greatly.

My motives greatly contributed to the ultimate outcome since they kept my eyes fixed on the benefits I perceived would come from the program. Social cognitive theory which is commonly used in exercise and nutrition education was of great assistance to me. This theory argues that an individual’s ability to perform a behavior, the confidence to perform the behavior and the expected results are very vital in behavior change (Stuart, 1996). The skill and confidence in me was boosted by the specialists while the expected outcome of the program served as a very key motivator. This strategy worked very well in helping me achieve my goals. One major emotion I felt while executing the program was anger especially when my peers ridiculed the whole plan.

Anger also came in when the rate of response was low in the beginning. One barrier I encountered was lack of adequate time for the program since I was in school at the time. I didn’t anticipate the barrier in the beginning since I didn’t know the program would require much time to carry out. To overcome this barrier, I talked to my advisor so that we could do much in the morning before college hours. The help of my family members came in handy especially through encouragement. They would also accompany me in the exercise and this was of great motivation hence helpful.

I managed to achieve my goal. At the beginning, I could take about ten hours of the day in a state of worry. At the end of the program, I could take less than one hour in such a state. Effects of the worry also reduced greatly by the end of the program. For instance, I could not concentrate to read for more than an hour at the beginning but at the end, I could do more than two hours of full concentration.

The cause of my condition was also solved since I managed to loose weight from about 12o kilograms to about 70. My social network also got a great boost since I can confidently term myself an extrovert. At the beginning, I would avoid social interactions and this ate into my confidence to the extend that I could not address a gathering of more than two people. At the end, I would be invited to lecture high school students on behavior change. I was overly impressed by the outcome since it gave me a new lease of social as well as academic life.

In future, I would prefer joining groups of people with a similar condition since group therapy would add to my motivation. The cost of engaging specialists would also be shared.