

WELL-BEING ACTION PLAN

USE THE SPACE BELOW TO PLAN YOUR SELF-CARE, ESPECIALLY IF YOU KNOW IT TENDS TO BE LESS OF A PRIORITY ON DIFFICULT DAYS. IT MIGHT INCLUDE DRINKING MORE WATER, CHANGING YOUR TOWELS OR GETTING AN EARLY NIGHT. IT ALL COUNTS.

SIMPLE THINGS I KNOW HELP

MEAL PLANNER IF NEEDED

A SELF-CARE GOAL FOR THIS WEEK

SMALL THINGS FOR MY WELL-BEING

	(S)	(M)	(T)	(W)	(T)	(F)	(S)
01	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
02	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
03	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
04	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
05	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
EG. GO FOR A WALK, PHONE A FRIEND	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>