

# Mental Health Journal





# Sleep Tracker

Date	Hours	Notes
1	1 2 3 4 5 6 7 8 9 10 11 12	
2	1 2 3 4 5 6 7 8 9 10 11 12	
3	1 2 3 4 5 6 7 8 9 10 11 12	
4	1 2 3 4 5 6 7 8 9 10 11 12	
5	1 2 3 4 5 6 7 8 9 10 11 12	
6	1 2 3 4 5 6 7 8 9 10 11 12	
7	1 2 3 4 5 6 7 8 9 10 11 12	
8	1 2 3 4 5 6 7 8 9 10 11 12	
9	1 2 3 4 5 6 7 8 9 10 11 12	
10	1 2 3 4 5 6 7 8 9 10 11 12	
11	1 2 3 4 5 6 7 8 9 10 11 12	
12	1 2 3 4 5 6 7 8 9 10 11 12	
13	1 2 3 4 5 6 7 8 9 10 11 12	
14	1 2 3 4 5 6 7 8 9 10 11 12	
15	1 2 3 4 5 6 7 8 9 10 11 12	
16	1 2 3 4 5 6 7 8 9 10 11 12	
17	1 2 3 4 5 6 7 8 9 10 11 12	
18	1 2 3 4 5 6 7 8 9 10 11 12	
19	1 2 3 4 5 6 7 8 9 10 11 12	
20	1 2 3 4 5 6 7 8 9 10 11 12	
21	1 2 3 4 5 6 7 8 9 10 11 12	
22	1 2 3 4 5 6 7 8 9 10 11 12	
23	1 2 3 4 5 6 7 8 9 10 11 12	
24	1 2 3 4 5 6 7 8 9 10 11 12	
25	1 2 3 4 5 6 7 8 9 10 11 12	
26	1 2 3 4 5 6 7 8 9 10 11 12	
27	1 2 3 4 5 6 7 8 9 10 11 12	
28	1 2 3 4 5 6 7 8 9 10 11 12	
29	1 2 3 4 5 6 7 8 9 10 11 12	
30	1 2 3 4 5 6 7 8 9 10 11 12	
31	1 2 3 4 5 6 7 8 9 10 11 12	

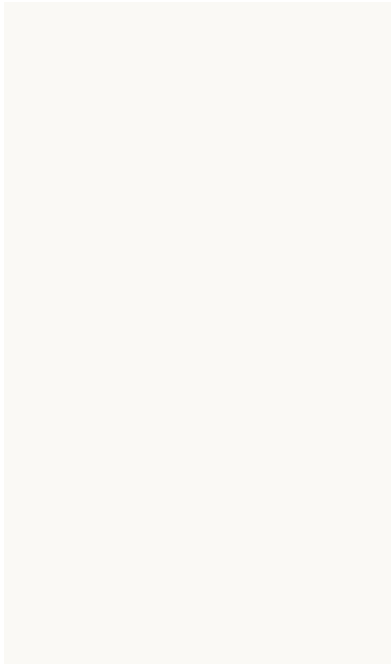




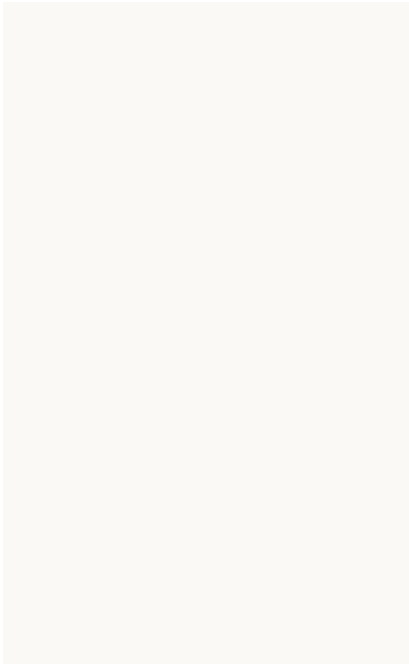
# Post-Therapy Notes

Date 

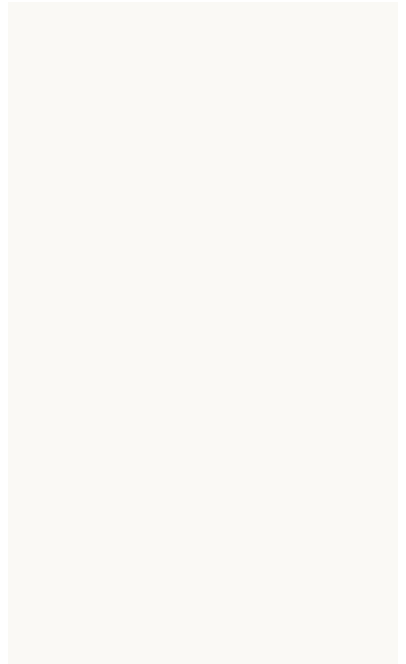
Topics we discussed



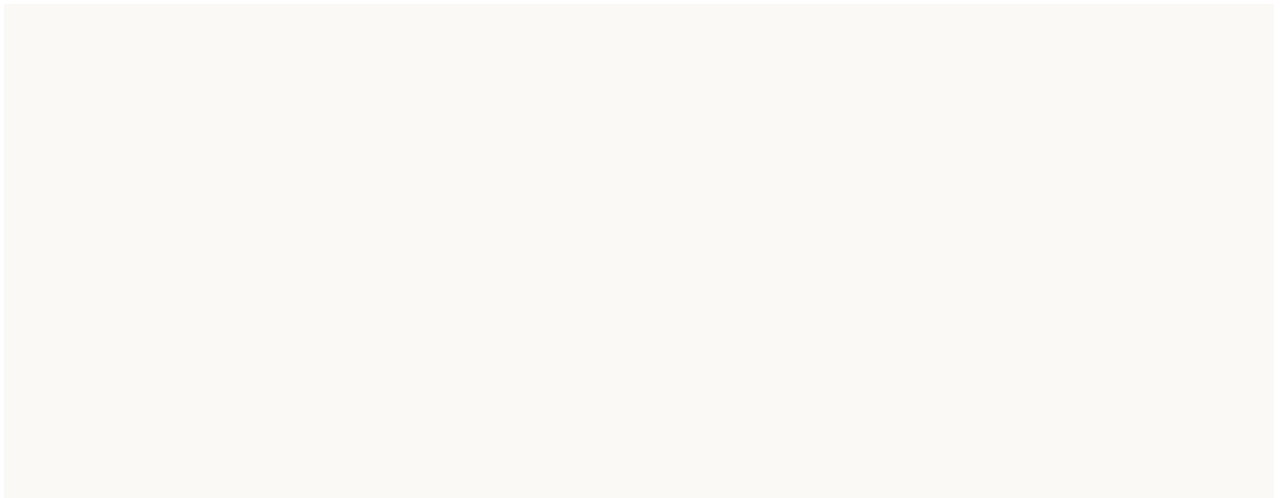
Things to remember



How I currently feel

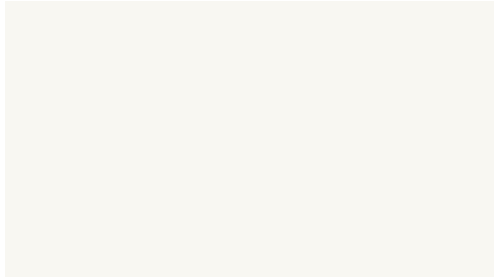


Summary




# Manifestation Worksheet

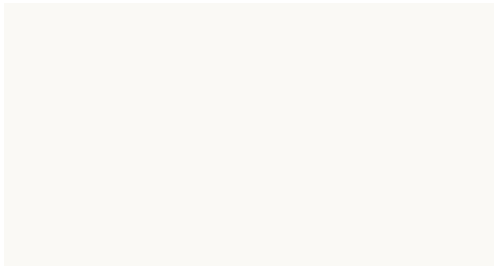
My primary goal



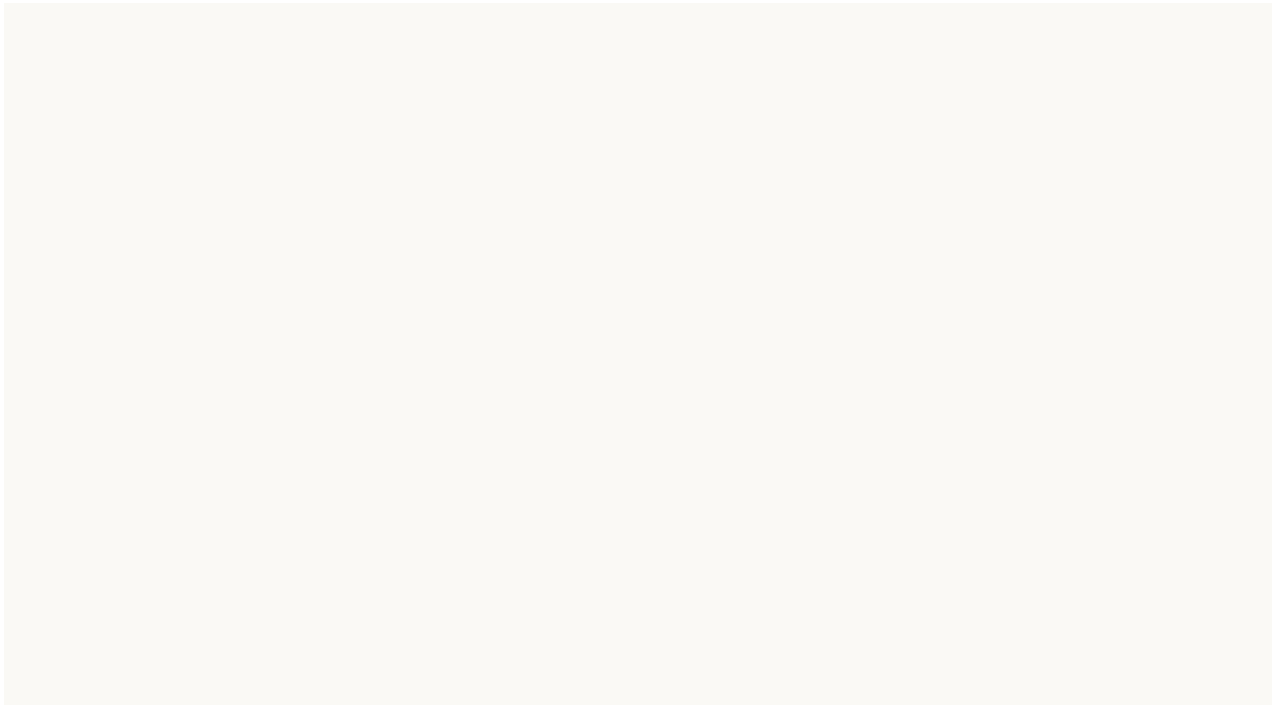
How can I reach my goal?



Why do I want this?



What will my life be like once I've manifested my intentions?



# Countering Anxiety

page 1

I'm worried that...

Describe the...

Worst outcome...

Best outcome...

Most likely outcome...

# Countering Anxiety

page 2

Imagine the worst outcome comes true.  
Would it still matter...

1 week from now

1 month from now

1 year from now

Brainstorm a list of actions you can do to prevent the  
negative outcome.

Don't worry about finding the perfect solution, just  
focus on the things you can control



# Thought Discovery Questions

Write down an actual event or situation

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What was I thinking? What was I saying to myself?

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What other ways are there of viewing the situation?

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If I were not feeling this way, how would I view the situation?

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# Mindfulness Exercise

Do I tend to obsess about the past or worry about the future?

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Does either obsessing about the past or worrying about the future help me deal with the present?

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How does becoming more aware of the present put me in a better place to deal with the present?

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# 4-7-8 Breathing Technique

1

Completely exhale through your mouth, making a whoosh sound

2

Breathe in quietly through the nose as you count to 4 in your head

3

Hold the breath for a count of 7 seconds

4

Exhale completely through your mouth, making a whoosh sound to a count of 8

5

Repeat the cycle up to 4 times





# Journal Prompts

1. Write a letter to the future you
2. Describe your perfect day
3. How does social media make you feel?
4. Write a letter to one of your parents
5. Make a list of 10 quotes that inspire you
6. What is going well in your life right now?
7. Write a thank you letter to your biggest supporter
8. What are the top 3 biggest obstacles you've overcome?
9. What is one thing you wish you had said no to? Why didn't you?
10. What does self-care mean to you?
11. What have you learned from anxiety?
12. Make a list of situations when you are anxious.
13. Make a list of your talents
14. Choose an inspiration word for the week.
15. Make a list of 3 things that you want to change about yourself. Write action points on how you could accomplish this.

16. What brings you peace?
17. How can you improve your life?
18. Where do you feel the safest and the reasons why?
19. What are your greatest fears?
20. Are they realistic?
21. Write something you forgive yourself for
22. What do you do to relax?
23. What do you want to explore? What are your hobbies?
24. What's your favorite memory? Describe that fondest moment
25. What movie do you relate to the most and why?
26. What are some of the things that make you unique?
27. Write about your favorite place. Why is it your favorite?
28. Who loves you truly for who you are?
29. Where do you want to travel? Name 7 places.
30. Think of some of your role models. Describe why they are inspiring to you.

# Annual Goals

January

February

March

April

May

June

July

August

September

October

November

December



# Favorite Affirmations List

1

2

3

4

5

6

7

8

9

10

# Challenging Thoughts Worksheet

Negative thought I have

Is that thought making me stronger or weaker?

Could my thought be an exaggeration of what's true?

What would a friend think about this situation?

Is there a better, more empowering way to look at this?

# 5-4-3-2-1

## Coping Technique for Anxiety

5

**Acknowledge 5 things you see around you**

You can pick between big and small items,  
anything in your surroundings

4

**Acknowledge 4 things you can touch around you**

Maybe this is your hair, hands, ground, grass, pillow, etc,  
whatever it may be, list out the 4 things you can feel

3

**Acknowledge 3 things you can hear around you**

Instead of listening to your own thoughts or sounds from your  
body like your stomach growling, focus on external noises

2

**Acknowledge 2 things around you that you can smell**

This one might be hard if you are not in a stimulating  
environment, if you cannot automatically sniff something out,  
walk nearby to find a scent

1

**Acknowledge 1 thing around you that you can taste**

Focus on your mouth as the last step and take in what you can  
taste. You can also substitute this by thinking of your favorite  
thing to taste

# Problem Solving Worksheet

Problem

Possible solution

Advantages of  
the solution

Disadvantages  
of the solution

Action steps to  
make it happen



# Anxiety Worksheet

What situations trigger anxiety?

What can you do to make them more comfortable?

What distracts you from achieving your goals?

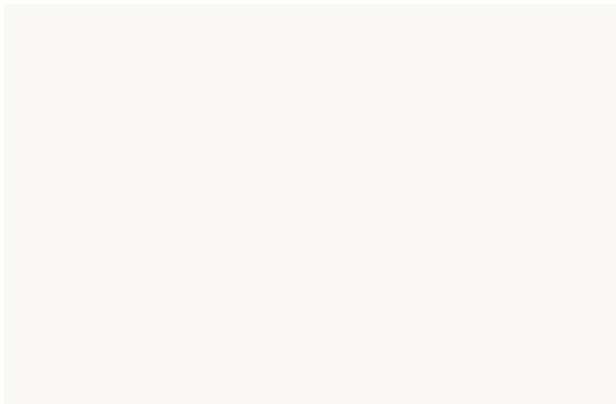
Remember the situation when you felt proud of yourself



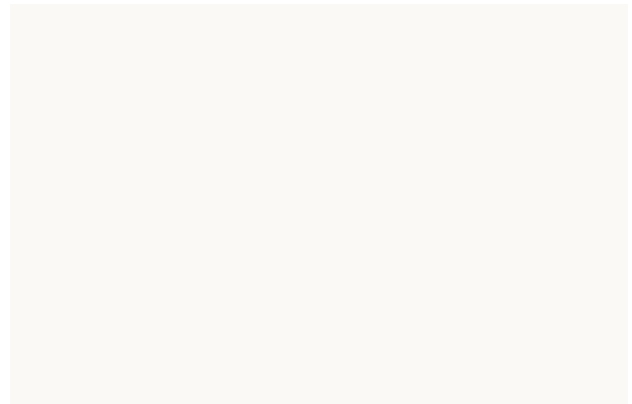
# Daily Journal

Date 

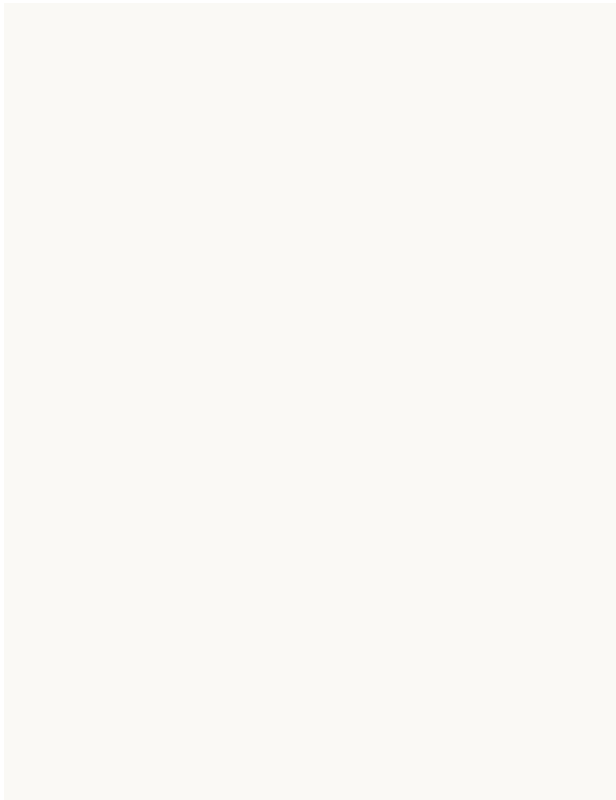
Today's Goals



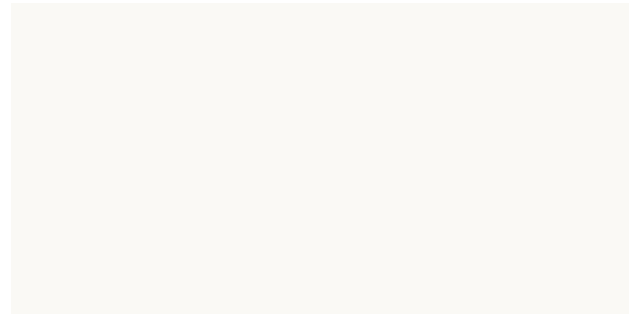
Quote of the day



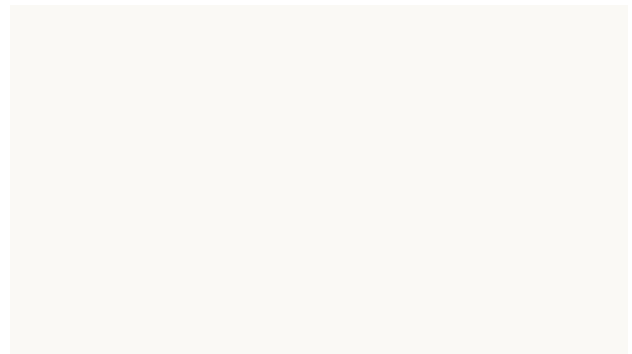
I'm thankful for



Affirmations



I've learned today



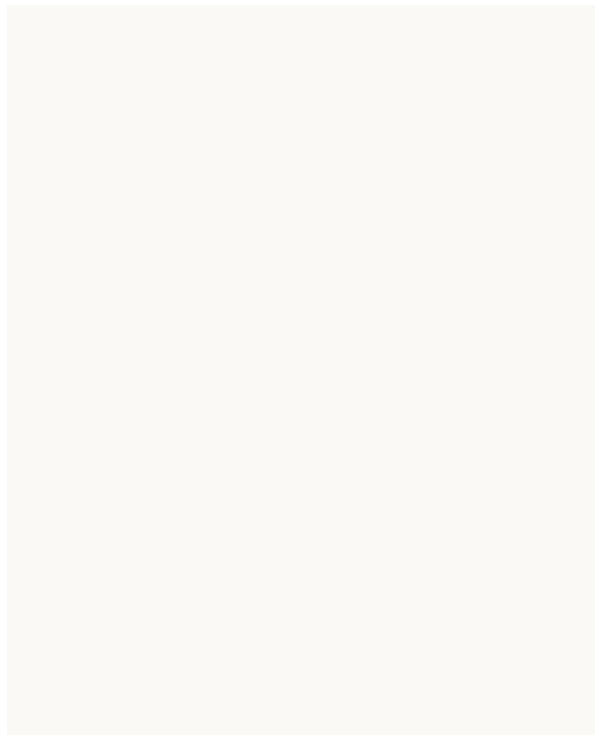
# Daily Planner

Date

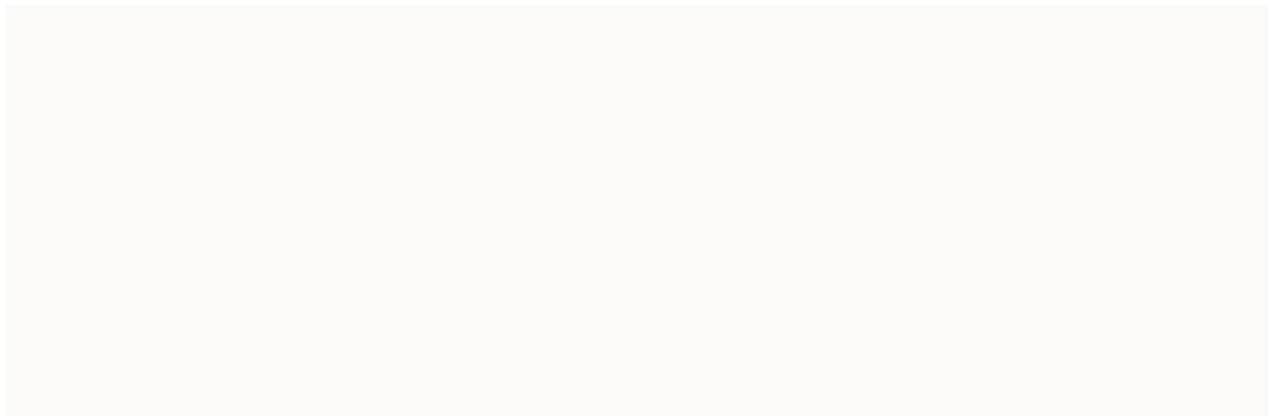
Goals for the Day

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

Tasks to Do



Inspiration Corner



# Acceptance Worksheet

Realities that I'm refusing to accept	Ways to accept the reality

# Positive Experiences

Write briefly about times when you displayed each of the following qualities

Courage

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Kindness

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Selflessness

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Love

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Sacrifice

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Wisdom

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Happiness

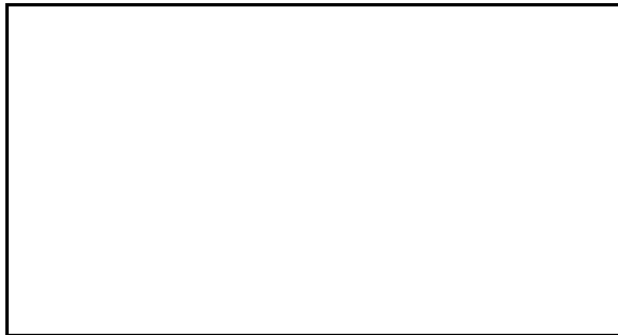
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Determination

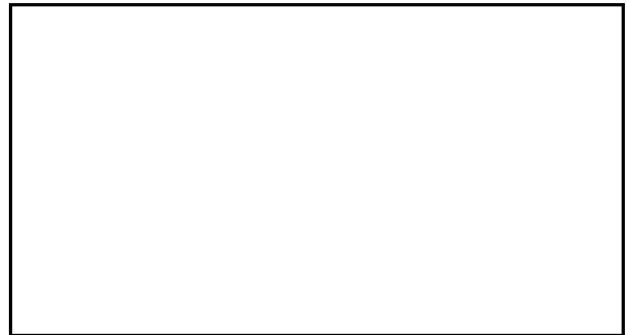
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# Analysis Of Problem Behavior

Problem behavior that  
I'm analyzing



What prompting event  
caused this behavior?



What things in myself or in my environment made  
me vulnerable?



What harm did my  
problem behavior cause?



Ways to reduce my  
vulnerability in the future







# My Safety Plan

1. My warning signs are:

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2. My effective coping strategies are:

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3. People I can reach out to for distraction:

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Person 1:

Person 2:

Person 3:

4. People I can reach out to for help:

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Person 1:

Person 2:

Person 3:

5. Steps I can take to make my environment safer:

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- 1.
- 2.
- 3.
- 4.

6. In the event of a crisis:

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Call Emergency Contact #1:

Call Crisis Hotline:

Call Emergency Services:

# Monthly Reflection

Things that made me happy this week

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Things that were hard or stressful this week

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How can my past experiences help me in the  
future

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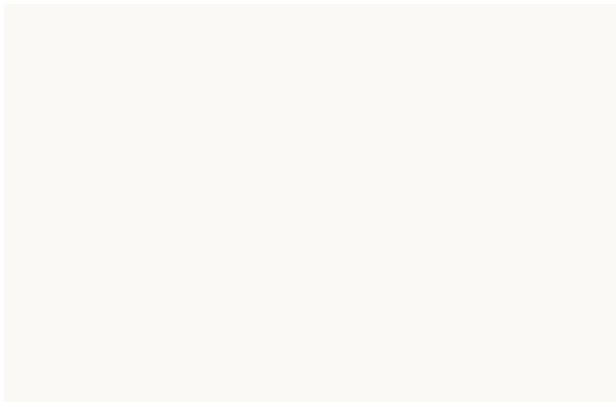
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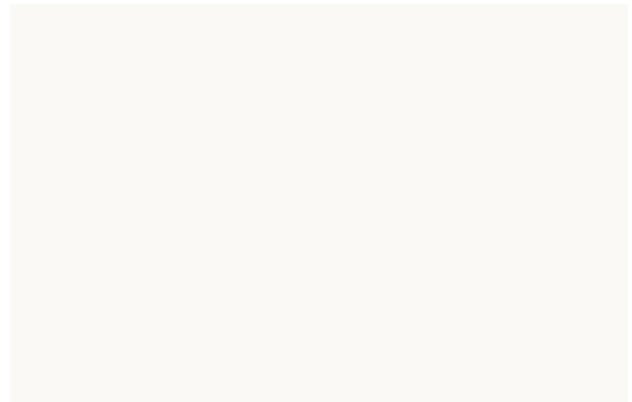
# Monthly Reflection

Month 

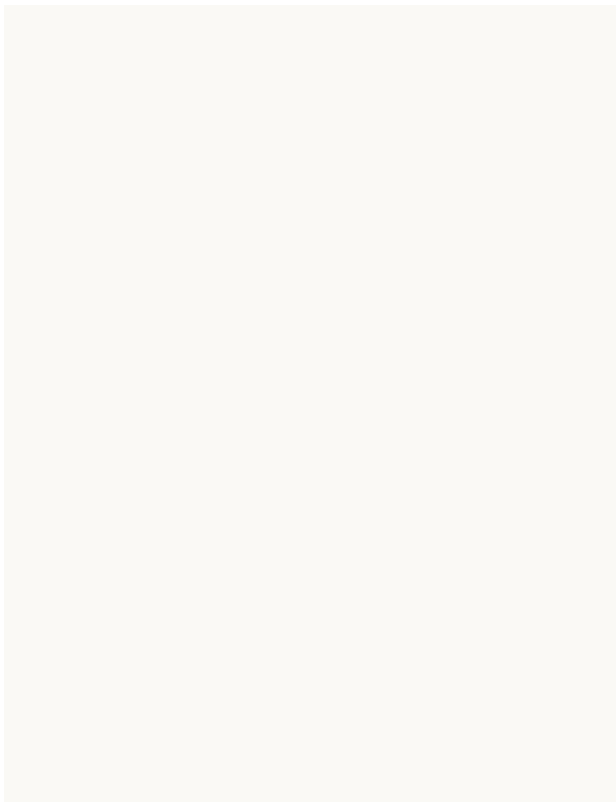
How I feel about this month?



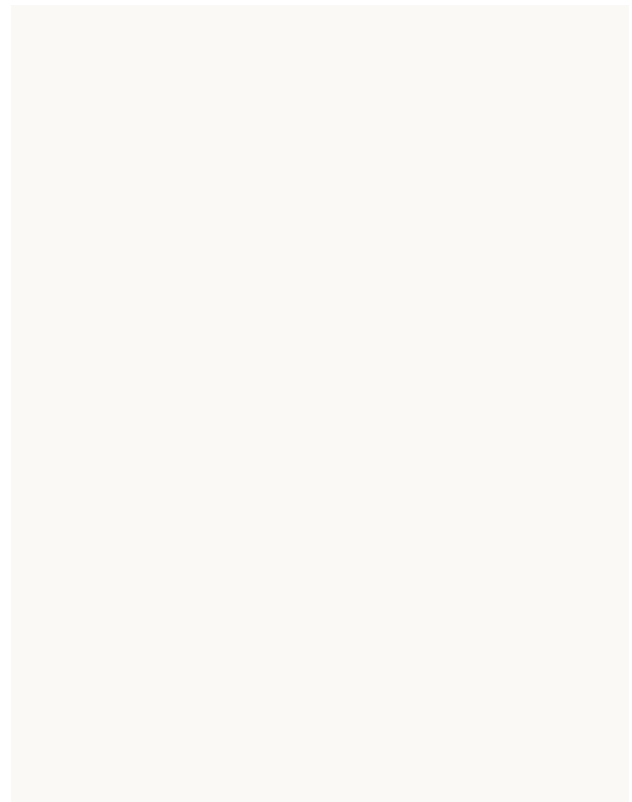
What changed since last month?



My accomplishments this month


















What I want to improve next month?



# Monthly Planner

Mon	Tue	Wed	Thu	Notes

# Monthly Planner

Fri	Sat	Sun	Notes
			
			
			
			
			

# S.T.O.P. technique

**S** - stop. Interrupt your thoughts with the command 'stop!' and pause whatever you're doing. Remain calm, and analyze the situation.

If you can't stop your most stressful thoughts, list them. This will remind you that these are thoughts, not something that will happen.

Then physically stop. Don't do anything else, don't move. Just stop wherever you are.

**T** - take a breath. Breathe in slowly through the nose, expanding the belly, and exhale slowly and deeply through pursed lips. You can even say to yourself "in" as you're breathing in and "out" as you're breathing out if that helps with concentration. Allow your attention to rest on the movement of your breath. It is useful for anchoring your attention on the present moment.

**O** - observe. Become the observer of your thoughts, emotions, and physical reactions. There are a few things you'll want to pay attention to here: sounds, sight, sensation. Notice any emotions present and how they're being expressed in the body. You can reflect on what is on your mind and also notice that thoughts are not facts, and they are not permanent.

**P** - proceed. Mindfully consider how you'd like to respond. Figure out the next best course of action. If you're still not feeling good, then proceed with something that will support you at the moment: talk to a friend, rub your shoulders, have a cup of tea. You'll have been more mindful of how you feel and may find that this changes what you doing going forward.

# Fighting Fear

What makes you feel nervous or scared?

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What can be done?

- Go for a walk
- Take deep breaths
- Eat wholesome meals
- Exercise
- Pray or meditate
- Visit a friend
- Turn off the news feed

What do you think about when you are nervous or scared?

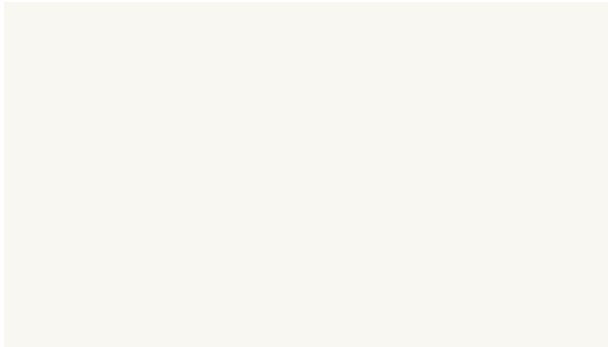
What's something you can do to feel better next time?



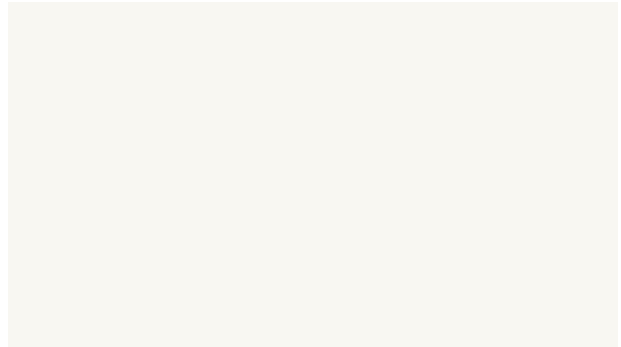
# Gratitude List

I'm grateful for:

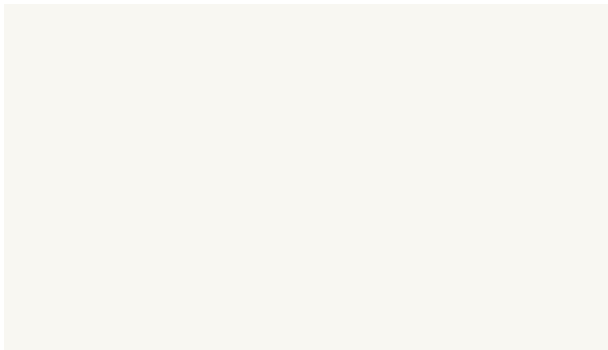
my family because...



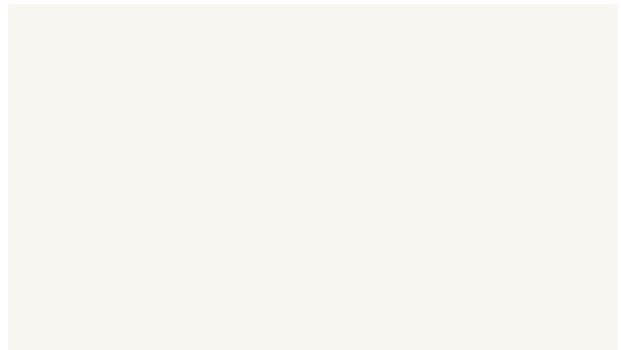
my friends because...



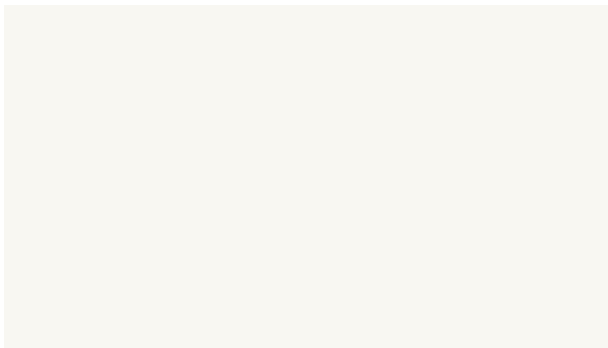
my body because...



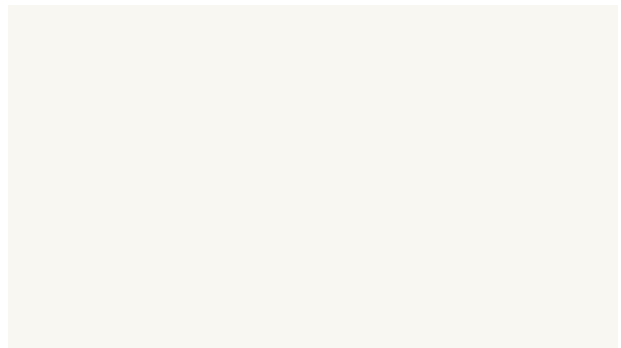
my past because...



access to...



love of...











# Mood Tracker

Day	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Color Codes
1													<input type="checkbox"/> happy
2													<input type="checkbox"/> content
3													<input type="checkbox"/> tired
4													<input type="checkbox"/> scared
5													<input type="checkbox"/> stressed
6													<input type="checkbox"/> bored
7													<input type="checkbox"/> anxious
8													<input type="checkbox"/> motivated
9													<input type="checkbox"/> sick
10													<input type="checkbox"/> relaxed
11													<input type="checkbox"/> sad
12													<input type="checkbox"/> active
13													<input type="checkbox"/> lonely
14													<input type="checkbox"/> dull
15													<input type="checkbox"/> normal
16													<input type="checkbox"/> angry
17													<input type="checkbox"/> numb
18													<input type="checkbox"/> good
19													<input type="checkbox"/>
20													<input type="checkbox"/>
21													<input type="checkbox"/>
22													<input type="checkbox"/>
23													<input type="checkbox"/>
24													<input type="checkbox"/>
25													<input type="checkbox"/>
26													<input type="checkbox"/>
27													<input type="checkbox"/>
28													<input type="checkbox"/>
29													<input type="checkbox"/>
30													<input type="checkbox"/>
31													<input type="checkbox"/>

Notes

# Monthly Mood Tracker

Month

DAY 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31

Mood

## Color Codes

<input type="checkbox"/> happy	<input type="checkbox"/> scared	<input type="checkbox"/> anxious	<input type="checkbox"/> relaxed	<input type="checkbox"/> _____
<input type="checkbox"/> content	<input type="checkbox"/> stressed	<input type="checkbox"/> motivated	<input type="checkbox"/> sad	<input type="checkbox"/> _____
<input type="checkbox"/> tired	<input type="checkbox"/> bored	<input type="checkbox"/> sick	<input type="checkbox"/> active	<input type="checkbox"/> _____
<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____

# Daily Reflection

Good things that happened today

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Things that were hard or stressful today

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What can I do to make tomorrow great

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# Worry Exploration

page 1

What are you worried about?

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What are some clues that your worry will not come true?

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If your worry does not come true, what will probably happen instead?

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The worst that can happen is...

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# Worry Exploration

page 2

If your worry does come true, how will you handle it?

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The best that can happen is...

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When will (in timeframe) the worry will likely happen?

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What can you do now to ensure the most positive outcome?

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# Thought Log

Date

I'm feeling today



What was on my mind today?

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What evidence do I have that my negative thoughts are true?

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What evidence do I have that my negative thoughts are false?

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Positive thoughts or affirmations

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# Self-Esteem Worksheet

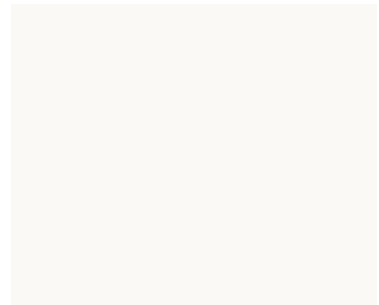
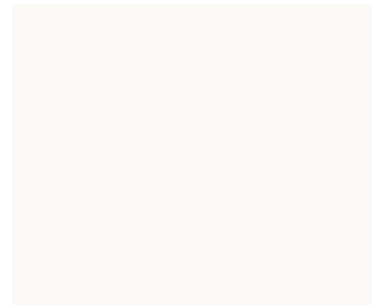
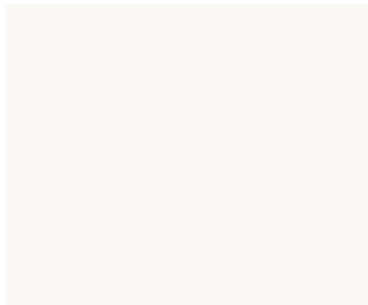
Date 

My Accomplishments today

1

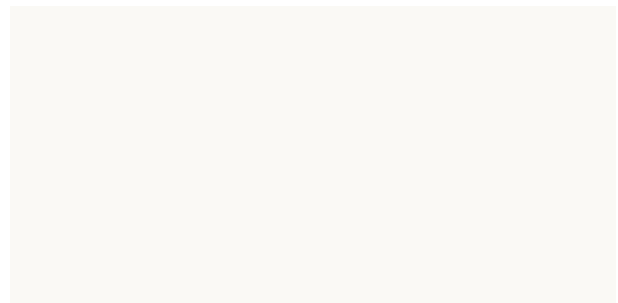
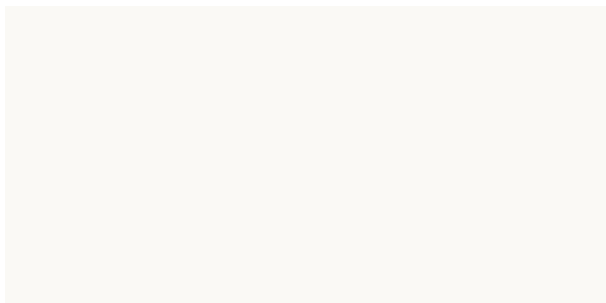
2

3

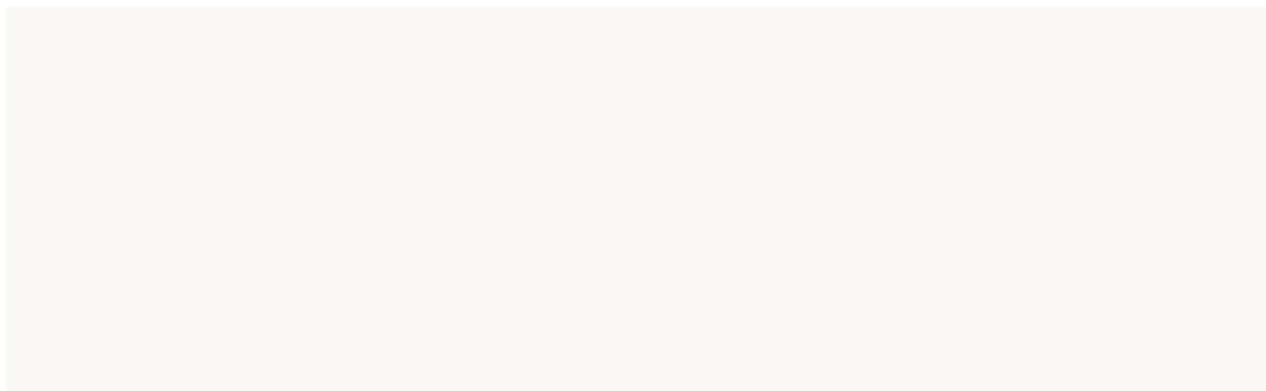


I felt proud when...

A positive thing I  
witnessed...



Something that made me happy today...





# Goal Setting

Goal	Motivation
Start date	Due date

Action steps	Possible obstacles
	How to overcome these obstacles?
	Milestones

# My Main Goals

Mental Health

--

Physical Health

--

Education

--

Work or projects

--

Volunteering or  
contributions

--

Finances

--

Home environment

--

# My Main Goals

Leisure

Family

Friends

Describe how your life will be different when you accomplish your goals



# A Reminder To Myself

I like the fact that I ...

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My skills and strengths are ...

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I love being myself when ...

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I feel great when ...

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The best moment in my life was when ...

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# Important Contacts List

Name	
Email	
Phone	
Address	

Name	
Email	
Phone	
Address	

Name	
Email	
Phone	
Address	

Name	
Email	
Phone	
Address	

Name	
Email	
Phone	
Address	

Name	
Email	
Phone	
Address	

# Medications List

Medication	
Dose	
Frequency	
AM/PM	
With Food?	
Start/End Date	
Notes	

Medication	
Dose	
Frequency	
AM/PM	
With Food?	
Start/End Date	
Notes	

# Doctor Visits

Date: \_\_\_\_\_

Doctor: \_\_\_\_\_

Tests	Results	Next steps

Prescriptions and notes





# To Do List

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# Managing My Anxiety

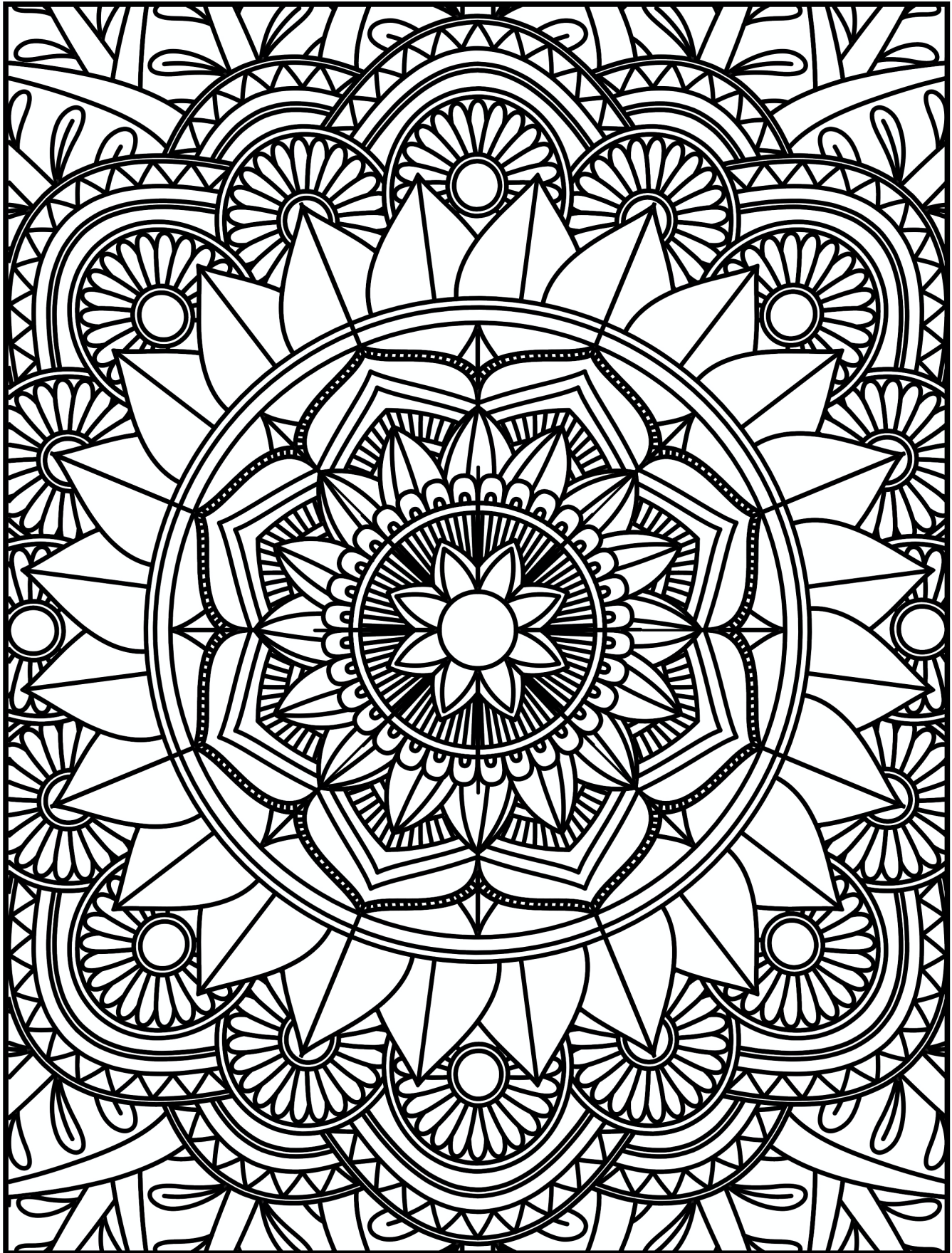
What is stressing me out?

What can I do about it?	Good ways to distract myself
	People I can ask for help
	What helps me when I feel this way?





# Stress Relief Coloring Page





Listen

TO YOUR

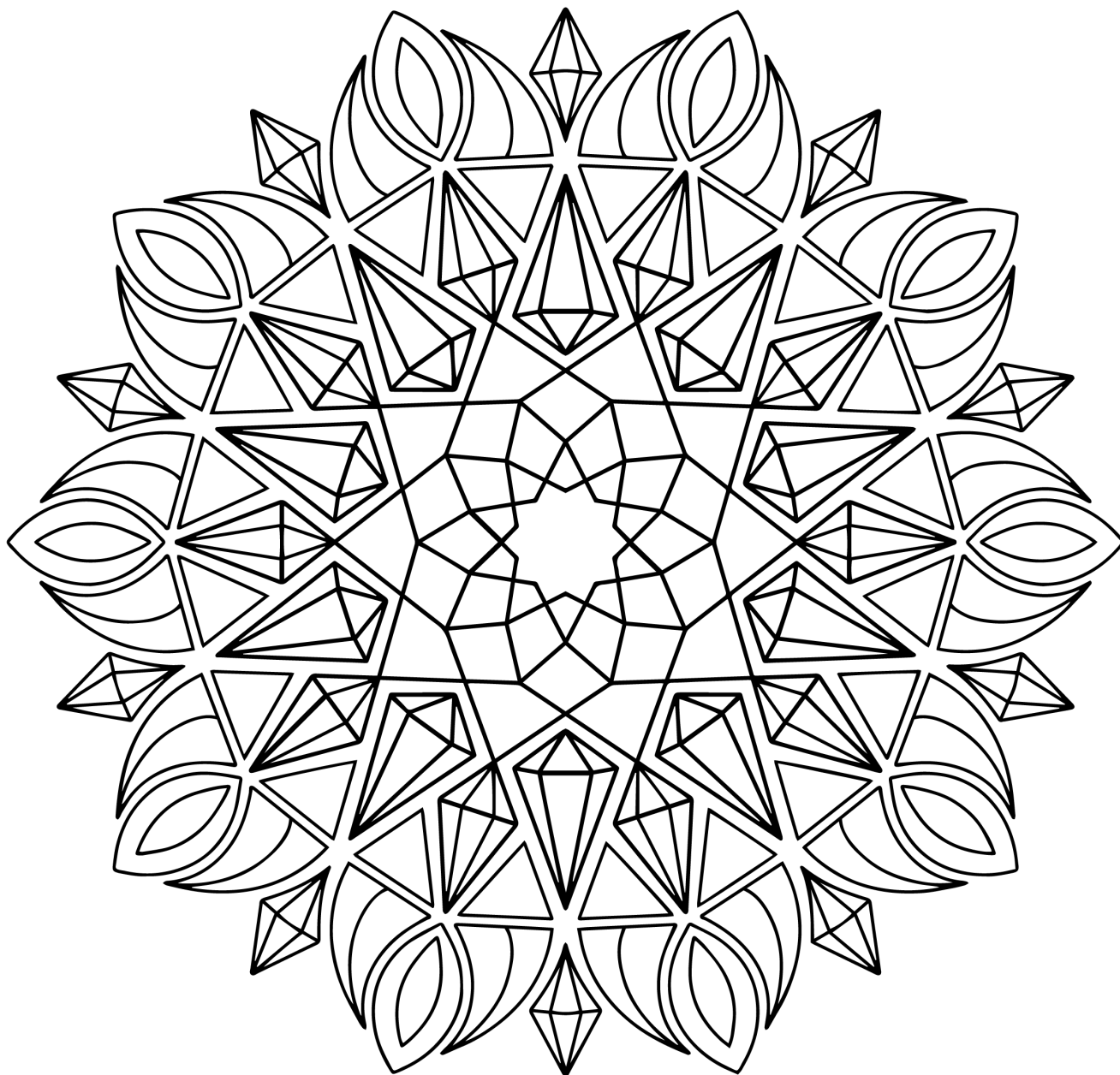
heart



# Stress Relief Coloring Page

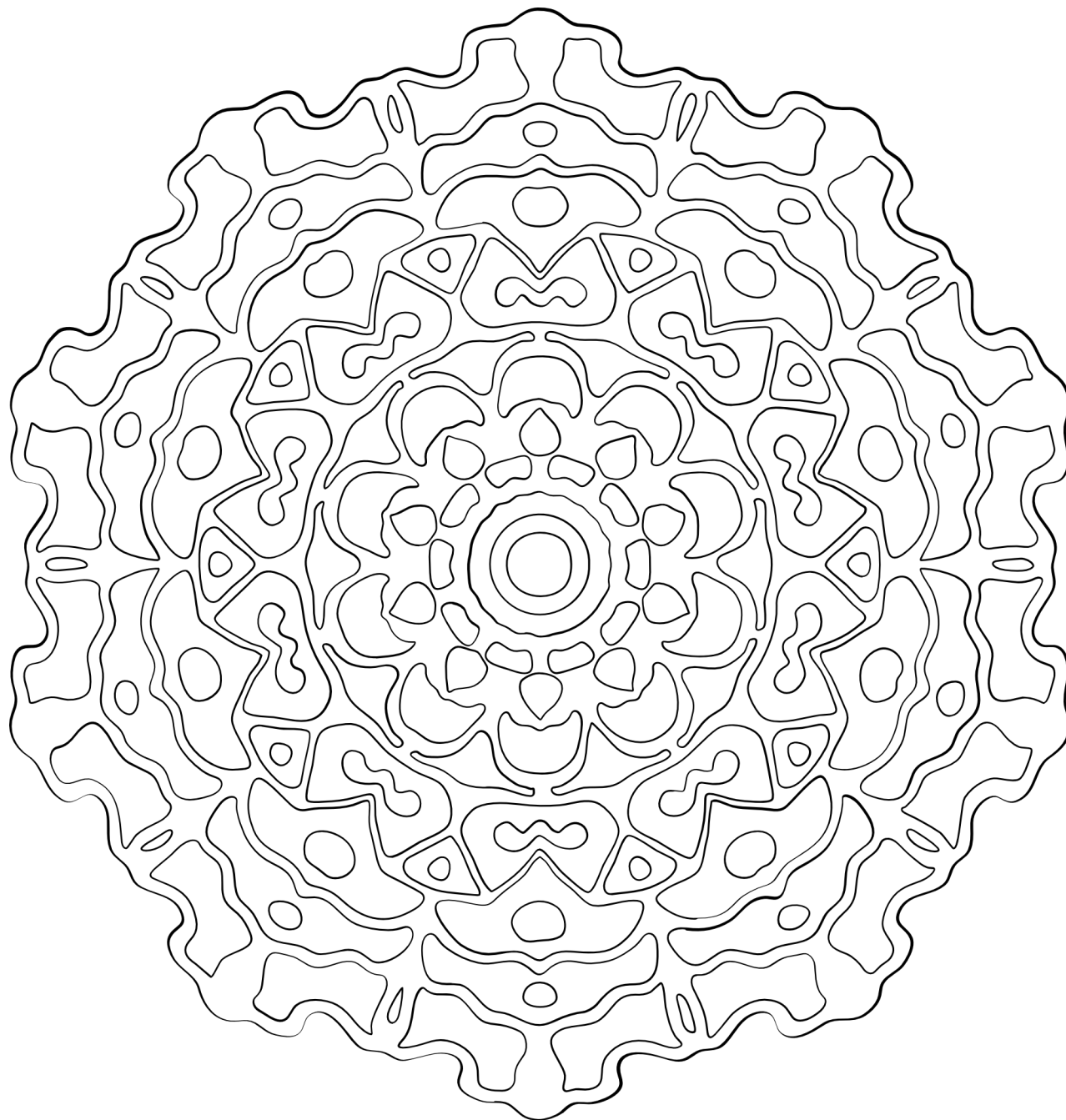


# Stress Relief Coloring Page





# Stress Relief Coloring Page



# Stress Relief Coloring Page

