



the

4-WEEK MOOD TRACKER JOURNAL

A DAILY MENTAL HEALTH & WELLNESS DIARY
WITH PROMPTS TO HELP WITH ANXIETY,
DEPRESSION AND EMOTIONAL DYSREGULATION

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MOOD TRACKER JOURNAL

This 4-week guided daily Mood Tracker Journal will help you to track your mood, using prompts and exercises designed to help you identify patterns and triggers that may be adversely affecting your mental health.

HERE'S WHAT YOU'LL FIND INSIDE:

A 4 WEEK GUIDED JOURNAL WITH SPACE TO TRACK
YOUR MOOD EVERY DAY

PROMPTS AND EXERCISES TO HELP YOU IDENTIFY
AND COPE WITH NEGATIVE THOUGHTS AND
FEELINGS

TIPS AND RESOURCES FOR FURTHER HELP AND
SUPPORT

START TRACKING YOUR MOOD TODAY AND SEE HOW
THE 4 WEEK GUIDED DAILY MOOD TRACKER
JOURNAL CAN HELP YOU FEEL BETTER!

*Week
One*

YOU DESERVE THE
BEST THINGS &
BEST PEOPLE IN LIFE

DAY 1

date _____

3 THINGS I AM
GRATEFUL FOR

WHAT DID I DO TO TAKE
CARE OF MYSELF?

WATER INTAKE



TODAY
I FELT



Morning ☐ ☐ ☐ ☐ ☐

Afternoon ☐ ☐ ☐ ☐ ☐

Evening ☐ ☐ ☐ ☐ ☐

DID I HAVE
ENOUGH?



☐ FRUIT & VEG



☐ SLEEP



☐ EXERCISE



☐ FRESH AIR



☐ VITAMINS

MEDICATIONS
TAKEN?

☐ AM

☐ PM



ENERGY LEVEL

1 2 3 4 5 6 7 8 9 10

STRESS LEVEL

1 2 3 4 5 6 7 8 9 10

day 1

WHAT MADE YOU PICK TODAY'S NUMBER?

DAY 2

date _____

3 THINGS I AM GRATEFUL FOR 	WHAT DID I DO TO TAKE CARE OF MYSELF?
---	--

WATER INTAKE         TODAY I FELT      Morning ☐ ☐ ☐ ☐ ☐ Afternoon ☐ ☐ ☐ ☐ ☐ Evening ☐ ☐ ☐ ☐ ☐	DID I HAVE ENOUGH?  ☐ FRUIT & VEG  ☐ SLEEP  ☐ EXERCISE  ☐ FRESH AIR  ☐ VITAMINS	MEDICATIONS TAKEN? ☐ AM ☐ PM
		

ENERGY LEVEL	STRESS LEVEL
1 2 3 4 5 6 7 8 9 10	1 2 3 4 5 6 7 8 9 10

day 2

WHAT ARE THE MAIN THINGS THAT ARE MAKING YOU FEEL THIS WAY?

“

ACCEPT WHAT IS.
LET GO OF WHAT
WAS. BELIEVE IN
WHAT WILL BE



DAY 3

date _____

3 THINGS I AM
GRATEFUL FOR

WHAT DID I DO TO TAKE
CARE OF MYSELF?

WATER INTAKE



TODAY
I FELT



Morning ☐ ☐ ☐ ☐ ☐

Afternoon ☐ ☐ ☐ ☐ ☐

Evening ☐ ☐ ☐ ☐ ☐

DID I HAVE
ENOUGH?



☐ FRUIT & VEG



☐ SLEEP



☐ EXERCISE



☐ FRESH AIR



☐ VITAMINS

MEDICATIONS
TAKEN?

☐ AM

☐ PM



ENERGY LEVEL

1 2 3 4 5 6 7 8 9 10

STRESS LEVEL

1 2 3 4 5 6 7 8 9 10

day 3

WHAT ARE SOME THINGS THAT YOU CAN
DO TO MAKE YOURSELF FEEL BETTER?

DAY 4

date _____

3 THINGS I AM GRATEFUL FOR	WHAT DID I DO TO TAKE CARE OF MYSELF?
-----------------------------------	--

WATER INTAKE         TODAY I FELT      Morning ☐ ☐ ☐ ☐ ☐ Afternoon ☐ ☐ ☐ ☐ ☐ Evening ☐ ☐ ☐ ☐ ☐	DID I HAVE ENOUGH?  ☐ FRUIT & VEG  ☐ SLEEP  ☐ EXERCISE  ☐ FRESH AIR  ☐ VITAMINS	MEDICATIONS TAKEN? ☐ AM ☐ PM
		

ENERGY LEVEL	STRESS LEVEL
1 2 3 4 5 6 7 8 9 10	1 2 3 4 5 6 7 8 9 10

day 4

DID ANYTHING GOOD HAPPEN TODAY?

WHAT MADE YOU HAPPY?

HOW TO KNOW YOU NEED PROFESSIONAL HELP AND HOW TO FIND IT

If you're feeling really low and nothing seems to be helping, it may be time to seek professional help. A therapist can provide you with support and guidance to help you through this difficult time. Here are some signs that you may need professional help:

- You're having thoughts of harming yourself or others
- You're not able to eat or sleep
- You're not able to concentrate or focus
- You're feeling hopeless or helpless
- You're using alcohol or drugs to cope with your feelings

If you're experiencing any of these signs, it's important to seek professional help right away. You can talk to your doctor about finding a therapist in your area, or you could use an online directory such as www.counselling-directory.org.uk or www.psychologytoday.com.



DAY 5

date _____

3 THINGS I AM
GRATEFUL FOR

WHAT DID I DO TO TAKE
CARE OF MYSELF?

WATER INTAKE



TODAY
I FELT



Morning ☐ ☐ ☐ ☐ ☐

Afternoon ☐ ☐ ☐ ☐ ☐

Evening ☐ ☐ ☐ ☐ ☐

DID I HAVE
ENOUGH?



☐ FRUIT & VEG



☐ SLEEP



☐ EXERCISE



☐ FRESH AIR



☐ VITAMINS

MEDICATIONS
TAKEN?

☐ AM

☐ PM



ENERGY LEVEL

1 2 3 4 5 6 7 8 9 10

STRESS LEVEL

1 2 3 4 5 6 7 8 9 10

day 5

HOW DID YOU COPE WITH ANY NEGATIVE
THOUGHTS OR FEELINGS TODAY?

DAY 6

date _____

3 THINGS I AM
GRATEFUL FOR

WHAT DID I DO TO TAKE
CARE OF MYSELF?

WATER INTAKE



TODAY
I FELT



Morning ☐ ☐ ☐ ☐ ☐

Afternoon ☐ ☐ ☐ ☐ ☐

Evening ☐ ☐ ☐ ☐ ☐

DID I HAVE
ENOUGH?



☐ FRUIT & VEG



☐ SLEEP



☐ EXERCISE



☐ FRESH AIR



☐ VITAMINS

MEDICATIONS
TAKEN?

☐ AM

☐ PM



ENERGY LEVEL

1 2 3 4 5 6 7 8 9 10

STRESS LEVEL

1 2 3 4 5 6 7 8 9 10

day 6

WHAT ARE YOU LOOKING FORWARD TO
IN THE NEXT WEEK?



ALWAYS REMEMBER,
YOU ARE LOVED AND
WORTHWHILE



DAY 7

date _____

3 THINGS I AM GRATEFUL FOR	WHAT DID I DO TO TAKE CARE OF MYSELF?
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WATER INTAKE         TODAY I FELT      Morning ☐ ☐ ☐ ☐ ☐ Afternoon ☐ ☐ ☐ ☐ ☐ Evening ☐ ☐ ☐ ☐ ☐	DID I HAVE ENOUGH?  ☐ FRUIT & VEG  ☐ SLEEP  ☐ EXERCISE  ☐ FRESH AIR  ☐ VITAMINS	MEDICATIONS TAKEN? ☐ AM ☐ PM
		

ENERGY LEVEL	STRESS LEVEL
1 2 3 4 5 6 7 8 9 10	1 2 3 4 5 6 7 8 9 10

day 7

REVIEW YOUR WEEK. HOW DO YOU FEEL OVERALL? WHAT WERE THE HIGH AND LOW POINTS? WHAT DID YOU LEARN ABOUT YOURSELF?

Week Two

YOU CAN FIND THE
COURAGE TO LET GO
OF WHAT YOU
CANNOT CHANGE

DAY 1

date _____

3 THINGS I AM GRATEFUL FOR 	WHAT DID I DO TO TAKE CARE OF MYSELF?
---	--

WATER INTAKE TODAY I FELT Morning ☐ ☐ ☐ ☐ ☐ Afternoon ☐ ☐ ☐ ☐ ☐ Evening ☐ ☐ ☐ ☐ ☐	DID I HAVE ENOUGH? ☐ FRUIT & VEG ☐ SLEEP ☐ EXERCISE ☐ FRESH AIR ☐ VITAMINS	MEDICATIONS TAKEN? ☐ AM ☐ PM
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ENERGY LEVEL	STRESS LEVEL
1 2 3 4 5 6 7 8 9 10	1 2 3 4 5 6 7 8 9 10

day 1

WHAT MADE YOU PICK TODAY'S NUMBER?

DAY 2

date _____

3 THINGS I AM
GRATEFUL FOR

WHAT DID I DO TO TAKE
CARE OF MYSELF?

WATER INTAKE



TODAY
I FELT



Morning ☐ ☐ ☐ ☐ ☐

Afternoon ☐ ☐ ☐ ☐ ☐

Evening ☐ ☐ ☐ ☐ ☐

DID I HAVE
ENOUGH?



☐ FRUIT & VEG



☐ SLEEP



☐ EXERCISE



☐ FRESH AIR



☐ VITAMINS

MEDICATIONS
TAKEN?

☐ AM

☐ PM



ENERGY LEVEL

1 2 3 4 5 6 7 8 9 10

STRESS LEVEL

1 2 3 4 5 6 7 8 9 10

day 2

WHAT ARE THE MAIN THINGS THAT
ARE MAKING YOU FEEL THIS WAY?



IT'S TIME TO
FORGIVE OTHERS...
AND YOURSELF



DAY 3

date _____

3 THINGS I AM
GRATEFUL FOR

WHAT DID I DO TO TAKE
CARE OF MYSELF?

WATER INTAKE



TODAY
I FELT



Morning ☐ ☐ ☐ ☐ ☐

Afternoon ☐ ☐ ☐ ☐ ☐

Evening ☐ ☐ ☐ ☐ ☐

DID I HAVE
ENOUGH?



☐ FRUIT & VEG



☐ SLEEP



☐ EXERCISE



☐ FRESH AIR



☐ VITAMINS

MEDICATIONS
TAKEN?

☐ AM

☐ PM



ENERGY LEVEL

1 2 3 4 5 6 7 8 9 10

STRESS LEVEL

1 2 3 4 5 6 7 8 9 10

day 3

WHAT ARE SOME THINGS THAT YOU CAN
DO TO MAKE YOURSELF FEEL BETTER?

HERE ARE 5 EMERGENCY TIPS FOR DAYS WHEN YOU'RE FEELING REALLY LOW

- Get out of bed: It may be the last thing you want to do, but getting out of bed and getting dressed can help improve your mood.
- Take a break from social media: social media can often make us compare our lives to others and feel worse about ourselves. If you're feeling low, take a break from social media and focus on what's going on in your own life.
- Talk to someone: talking to a friend or family member can help you feel better and provide much-needed support.
- Do something nice for yourself: treat yourself to your favourite food, take a relaxing bath, or buy yourself a new book. Doing something nice for yourself can help improve your mood and make you feel good about yourself.
- Seek professional help: if you're feeling really low and nothing seems to be helping, it may be time to seek professional help. A therapist can provide you with support and guidance to help you through this difficult time.



DAY 4

date _____

3 THINGS I AM GRATEFUL FOR 	WHAT DID I DO TO TAKE CARE OF MYSELF?
---	--

WATER INTAKE TODAY I FELT Morning ☐ ☐ ☐ ☐ ☐ Afternoon ☐ ☐ ☐ ☐ ☐ Evening ☐ ☐ ☐ ☐ ☐	DID I HAVE ENOUGH? ☐ FRUIT & VEG ☐ SLEEP ☐ EXERCISE ☐ FRESH AIR ☐ VITAMINS	MEDICATIONS TAKEN? ☐ AM ☐ PM
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ENERGY LEVEL	STRESS LEVEL
1 2 3 4 5 6 7 8 9 10	1 2 3 4 5 6 7 8 9 10

day 4

DID ANYTHING GOOD HAPPEN TODAY?

WHAT MADE YOU HAPPY?

DAY 5

date _____

3 THINGS I AM
GRATEFUL FOR

WHAT DID I DO TO TAKE
CARE OF MYSELF?

WATER INTAKE



TODAY
I FELT



Morning ☐ ☐ ☐ ☐ ☐

Afternoon ☐ ☐ ☐ ☐ ☐

Evening ☐ ☐ ☐ ☐ ☐

DID I HAVE
ENOUGH?



☐ FRUIT & VEG



☐ SLEEP



☐ EXERCISE



☐ FRESH AIR



☐ VITAMINS

MEDICATIONS
TAKEN?

☐ AM

☐ PM



ENERGY LEVEL

1 2 3 4 5 6 7 8 9 10

STRESS LEVEL

1 2 3 4 5 6 7 8 9 10

day 5

HOW DID YOU COPE WITH ANY NEGATIVE
THOUGHTS OR FEELINGS TODAY?



START EACH DAY
WITH A POSITIVE
THOUGHT AND A
GRATEFUL HEART



DAY 6

date _____

3 THINGS I AM
GRATEFUL FOR

WHAT DID I DO TO TAKE
CARE OF MYSELF?

WATER INTAKE



TODAY
I FELT



Morning ☐ ☐ ☐ ☐ ☐

Afternoon ☐ ☐ ☐ ☐ ☐

Evening ☐ ☐ ☐ ☐ ☐

DID I HAVE
ENOUGH?



☐ FRUIT & VEG



☐ SLEEP



☐ EXERCISE



☐ FRESH AIR



☐ VITAMINS

MEDICATIONS
TAKEN?

☐ AM

☐ PM



ENERGY LEVEL

1 2 3 4 5 6 7 8 9 10

STRESS LEVEL

1 2 3 4 5 6 7 8 9 10

day 6

WHAT ARE YOU LOOKING FORWARD TO
IN THE NEXT WEEK?

DAY 7

date _____

3 THINGS I AM GRATEFUL FOR 	WHAT DID I DO TO TAKE CARE OF MYSELF?
---	--

WATER INTAKE TODAY I FELT Morning ☐ ☐ ☐ ☐ ☐ Afternoon ☐ ☐ ☐ ☐ ☐ Evening ☐ ☐ ☐ ☐ ☐	DID I HAVE ENOUGH? ☐ FRUIT & VEG ☐ SLEEP ☐ EXERCISE ☐ FRESH AIR ☐ VITAMINS	MEDICATIONS TAKEN? ☐ AM ☐ PM
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ENERGY LEVEL	STRESS LEVEL
1 2 3 4 5 6 7 8 9 10	1 2 3 4 5 6 7 8 9 10

day 7

REVIEW YOUR WEEK. HOW DO YOU FEEL OVERALL? WHAT WERE THE HIGH AND LOW POINTS? WHAT DID YOU LEARN ABOUT YOURSELF?

Week Three

YOU DESERVE THE
BEST THINGS &
BEST PEOPLE IN LIFE

DAY 1

date _____

3 THINGS I AM
GRATEFUL FOR

WHAT DID I DO TO TAKE
CARE OF MYSELF?

WATER INTAKE



TODAY
I FELT



Morning ☐ ☐ ☐ ☐ ☐

Afternoon ☐ ☐ ☐ ☐ ☐

Evening ☐ ☐ ☐ ☐ ☐

DID I HAVE
ENOUGH?



☐ FRUIT & VEG



☐ SLEEP



☐ EXERCISE



☐ FRESH AIR



☐ VITAMINS

MEDICATIONS
TAKEN?

☐ AM

☐ PM



ENERGY LEVEL

1 2 3 4 5 6 7 8 9 10

STRESS LEVEL

1 2 3 4 5 6 7 8 9 10

day 1

WHAT MADE YOU PICK TODAY'S NUMBER?

DAY 2

date _____

3 THINGS I AM
GRATEFUL FOR

WHAT DID I DO TO TAKE
CARE OF MYSELF?

WATER INTAKE



TODAY
I FELT



Morning ☐ ☐ ☐ ☐ ☐

Afternoon ☐ ☐ ☐ ☐ ☐

Evening ☐ ☐ ☐ ☐ ☐

DID I HAVE
ENOUGH?



☐ FRUIT & VEG



☐ SLEEP



☐ EXERCISE



☐ FRESH AIR



☐ VITAMINS

MEDICATIONS
TAKEN?

☐ AM

☐ PM



ENERGY LEVEL

1 2 3 4 5 6 7 8 9 10

STRESS LEVEL

1 2 3 4 5 6 7 8 9 10

day 2

WHAT ARE THE MAIN THINGS THAT
ARE MAKING YOU FEEL THIS WAY?

“

YOU ARE ENOUGH,
JUST AS YOU ARE



DAY 3

date _____

3 THINGS I AM
GRATEFUL FOR

WHAT DID I DO TO TAKE
CARE OF MYSELF?

WATER INTAKE



TODAY
I FELT



Morning ☐ ☐ ☐ ☐ ☐

Afternoon ☐ ☐ ☐ ☐ ☐

Evening ☐ ☐ ☐ ☐ ☐

DID I HAVE
ENOUGH?



☐ FRUIT & VEG



☐ SLEEP



☐ EXERCISE



☐ FRESH AIR



☐ VITAMINS

MEDICATIONS
TAKEN?

☐ AM

☐ PM



ENERGY LEVEL

1 2 3 4 5 6 7 8 9 10

STRESS LEVEL

1 2 3 4 5 6 7 8 9 10

day 3

WHAT ARE SOME THINGS THAT YOU CAN
DO TO MAKE YOURSELF FEEL BETTER?

DAY 4

date _____

3 THINGS I AM
GRATEFUL FOR

WHAT DID I DO TO TAKE
CARE OF MYSELF?

WATER INTAKE



TODAY
I FELT



Morning ☐ ☐ ☐ ☐ ☐

Afternoon ☐ ☐ ☐ ☐ ☐

Evening ☐ ☐ ☐ ☐ ☐

DID I HAVE
ENOUGH?



☐ FRUIT & VEG



☐ SLEEP



☐ EXERCISE



☐ FRESH AIR



☐ VITAMINS

MEDICATIONS
TAKEN?

☐ AM

☐ PM



ENERGY LEVEL

1 2 3 4 5 6 7 8 9 10

STRESS LEVEL

1 2 3 4 5 6 7 8 9 10

day 4

DID ANYTHING GOOD HAPPEN TODAY?
WHAT MADE YOU HAPPY?

HERE ARE 10 REMINDERS FOR DAYS WHEN YOU'RE FEELING REALLY LOW

- You are not alone: there are millions of people who have experienced what you're going through.
- Whatever you're going through, it's not your fault. You didn't do anything to deserve this.
- It may not feel like it now, but things can and will get better. There is hope for a better future.
- If you're feeling really low, there is help available. You don't have to go through this alone.
- Whatever you're feeling, it is valid. There is no right or wrong way to feel.
- Your mental illness does not define you as a person. You are so much more than your illness.
- Unfortunately, there is still a lot of stigma surrounding mental illness. It's important to talk about your experiences and help fight the stigma.
- Recovery from mental illness is possible. You can get better and live a full and meaningful life.
- Seeking help for your mental illness is not a weakness. It takes a lot of courage to seek help and you should be proud of yourself for doing so.
- No matter what you're going through, you are worthy of love and respect. You deserve to be treated with compassion and understanding.



DAY 5

date _____

3 THINGS I AM
GRATEFUL FOR

WHAT DID I DO TO TAKE
CARE OF MYSELF?

WATER INTAKE



TODAY
I FELT



Morning ☐ ☐ ☐ ☐ ☐

Afternoon ☐ ☐ ☐ ☐ ☐

Evening ☐ ☐ ☐ ☐ ☐

DID I HAVE
ENOUGH?



☐ FRUIT & VEG



☐ SLEEP



☐ EXERCISE



☐ FRESH AIR



☐ VITAMINS

MEDICATIONS
TAKEN?

☐ AM

☐ PM



ENERGY LEVEL

1 2 3 4 5 6 7 8 9 10

STRESS LEVEL

1 2 3 4 5 6 7 8 9 10

day 5

HOW DID YOU COPE WITH ANY NEGATIVE
THOUGHTS OR FEELINGS TODAY?

DAY 6

date _____

3 THINGS I AM
GRATEFUL FOR

WHAT DID I DO TO TAKE
CARE OF MYSELF?

WATER INTAKE



TODAY
I FELT



Morning ☐ ☐ ☐ ☐ ☐

Afternoon ☐ ☐ ☐ ☐ ☐

Evening ☐ ☐ ☐ ☐ ☐

DID I HAVE
ENOUGH?



☐ FRUIT & VEG



☐ SLEEP



☐ EXERCISE



☐ FRESH AIR



☐ VITAMINS

MEDICATIONS
TAKEN?

☐ AM

☐ PM



ENERGY LEVEL

1 2 3 4 5 6 7 8 9 10

STRESS LEVEL

1 2 3 4 5 6 7 8 9 10

day 6

WHAT ARE YOU LOOKING FORWARD TO
IN THE NEXT WEEK?

DAY 7

date _____

3 THINGS I AM GRATEFUL FOR 	WHAT DID I DO TO TAKE CARE OF MYSELF?
---	--

WATER INTAKE         TODAY I FELT      Morning ☐ ☐ ☐ ☐ ☐ Afternoon ☐ ☐ ☐ ☐ ☐ Evening ☐ ☐ ☐ ☐ ☐	DID I HAVE ENOUGH?  ☐ FRUIT & VEG  ☐ SLEEP  ☐ EXERCISE  ☐ FRESH AIR  ☐ VITAMINS	MEDICATIONS TAKEN? ☐ AM ☐ PM 
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ENERGY LEVEL

STRESS LEVEL

1 2 3 4 5 6 7 8 9 10

1 2 3 4 5 6 7 8 9 10

day 7 REVIEW YOUR WEEK. HOW DO YOU FEEL OVERALL? WHAT WERE THE HIGH AND LOW POINTS? WHAT DID YOU LEARN ABOUT YOURSELF?

*Week
Four*

YOU DESERVE THE
BEST THINGS &
BEST PEOPLE IN LIFE

DAY 1

date _____

3 THINGS I AM
GRATEFUL FOR

WHAT DID I DO TO TAKE
CARE OF MYSELF?

WATER INTAKE



TODAY
I FELT



Morning ☐ ☐ ☐ ☐ ☐

Afternoon ☐ ☐ ☐ ☐ ☐

Evening ☐ ☐ ☐ ☐ ☐

DID I HAVE
ENOUGH?



☐ FRUIT & VEG



☐ SLEEP



☐ EXERCISE



☐ FRESH AIR



☐ VITAMINS

MEDICATIONS
TAKEN?

☐ AM

☐ PM



ENERGY LEVEL

1 2 3 4 5 6 7 8 9 10

STRESS LEVEL

1 2 3 4 5 6 7 8 9 10

day 1

WHAT MADE YOU PICK TODAY'S NUMBER?

DAY 2

date _____

3 THINGS I AM
GRATEFUL FOR

WHAT DID I DO TO TAKE
CARE OF MYSELF?

WATER INTAKE



TODAY
I FELT



Morning ☐ ☐ ☐ ☐ ☐

Afternoon ☐ ☐ ☐ ☐ ☐

Evening ☐ ☐ ☐ ☐ ☐

DID I HAVE
ENOUGH?



☐ FRUIT & VEG



☐ SLEEP



☐ EXERCISE



☐ FRESH AIR



☐ VITAMINS

MEDICATIONS
TAKEN?

☐ AM

☐ PM



ENERGY LEVEL

1 2 3 4 5 6 7 8 9 10

STRESS LEVEL

1 2 3 4 5 6 7 8 9 10

day 2

WHAT ARE THE MAIN THINGS THAT
ARE MAKING YOU FEEL THIS WAY?

DAY 3

date _____

3 THINGS I AM
GRATEFUL FOR

WHAT DID I DO TO TAKE
CARE OF MYSELF?

WATER INTAKE



TODAY
I FELT



Morning ☐ ☐ ☐ ☐ ☐

Afternoon ☐ ☐ ☐ ☐ ☐

Evening ☐ ☐ ☐ ☐ ☐

DID I HAVE
ENOUGH?



☐ FRUIT & VEG



☐ SLEEP



☐ EXERCISE



☐ FRESH AIR



☐ VITAMINS

MEDICATIONS
TAKEN?

☐ AM

☐ PM



ENERGY LEVEL

1 2 3 4 5 6 7 8 9 10

STRESS LEVEL

1 2 3 4 5 6 7 8 9 10

day 3

WHAT ARE SOME THINGS THAT YOU CAN
DO TO MAKE YOURSELF FEEL BETTER?

HERE ARE 5 TIPS FOR IMPROVING YOUR MOOD ON A DAILY BASIS

- Get enough sleep. Most people need around 7-8 hours of sleep per night. Consider going to bed and waking up at the same time each day to help regulate your body's natural sleep cycle.
- Eat a healthy diet. Eating nutritious foods helps your body function at its best. Make sure you include plenty of fruits, vegetables, and whole grains in your diet.
- Get regular exercise. Exercise releases endorphins, which have mood-boosting effects. A moderate amount of exercise is the key to maintaining your mental health.
- Spend time with loved ones. Spending time with people who make you happy can help improve your mood. Whether it's a family member, friend, or pet, spending time with those you love can help chase away the blues.
- Do something you enjoy. Make sure to schedule in some time for activities that make you happy. This could be anything from reading your favourite book to going for a walk in nature.



DAY 4

date _____

3 THINGS I AM
GRATEFUL FOR

WHAT DID I DO TO TAKE
CARE OF MYSELF?

WATER INTAKE



TODAY
I FELT



Morning ☐ ☐ ☐ ☐ ☐

Afternoon ☐ ☐ ☐ ☐ ☐

Evening ☐ ☐ ☐ ☐ ☐

DID I HAVE
ENOUGH?



☐ FRUIT & VEG



☐ SLEEP



☐ EXERCISE



☐ FRESH AIR



☐ VITAMINS

MEDICATIONS
TAKEN?

☐ AM

☐ PM



ENERGY LEVEL

1 2 3 4 5 6 7 8 9 10

STRESS LEVEL

1 2 3 4 5 6 7 8 9 10

day 4

DID ANYTHING GOOD HAPPEN TODAY?
WHAT MADE YOU HAPPY?

DAY 5

date _____

3 THINGS I AM
GRATEFUL FOR

WHAT DID I DO TO TAKE
CARE OF MYSELF?

WATER INTAKE



TODAY
I FELT



Morning ☐ ☐ ☐ ☐ ☐

Afternoon ☐ ☐ ☐ ☐ ☐

Evening ☐ ☐ ☐ ☐ ☐

DID I HAVE
ENOUGH?



☐ FRUIT & VEG



☐ SLEEP



☐ EXERCISE



☐ FRESH AIR



☐ VITAMINS

MEDICATIONS
TAKEN?

☐ AM

☐ PM



ENERGY LEVEL

1 2 3 4 5 6 7 8 9 10

STRESS LEVEL

1 2 3 4 5 6 7 8 9 10

day 5

HOW DID YOU COPE WITH ANY NEGATIVE
THOUGHTS OR FEELINGS TODAY?

“

YOU WILL NEVER
HAVE THIS DAY
AGAIN, MAKE IT
COUNT



DAY 6

date _____

3 THINGS I AM
GRATEFUL FOR

WHAT DID I DO TO TAKE
CARE OF MYSELF?

WATER INTAKE



TODAY
I FELT



Morning ☐ ☐ ☐ ☐ ☐

Afternoon ☐ ☐ ☐ ☐ ☐

Evening ☐ ☐ ☐ ☐ ☐

DID I HAVE
ENOUGH?



☐ FRUIT & VEG



☐ SLEEP



☐ EXERCISE



☐ FRESH AIR



☐ VITAMINS

MEDICATIONS
TAKEN?

☐ AM

☐ PM



ENERGY LEVEL

1 2 3 4 5 6 7 8 9 10

STRESS LEVEL

1 2 3 4 5 6 7 8 9 10

day 6

WHAT ARE YOU LOOKING FORWARD TO
IN THE NEXT WEEK?

DAY 7

date _____

3 THINGS I AM GRATEFUL FOR 	WHAT DID I DO TO TAKE CARE OF MYSELF?
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WATER INTAKE TODAY I FELT Morning ☐ ☐ ☐ ☐ ☐ Afternoon ☐ ☐ ☐ ☐ ☐ Evening ☐ ☐ ☐ ☐ ☐	DID I HAVE ENOUGH? ☐ FRUIT & VEG ☐ SLEEP ☐ EXERCISE ☐ FRESH AIR ☐ VITAMINS	MEDICATIONS TAKEN? ☐ AM ☐ PM
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ENERGY LEVEL	STRESS LEVEL
1 2 3 4 5 6 7 8 9 10	1 2 3 4 5 6 7 8 9 10

day 7

REVIEW YOUR WEEK. HOW DO YOU FEEL OVERALL? WHAT WERE THE HIGH AND LOW POINTS? WHAT DID YOU LEARN ABOUT YOURSELF?



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