| Name: | Date |
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## **Peer Wellness Plan**

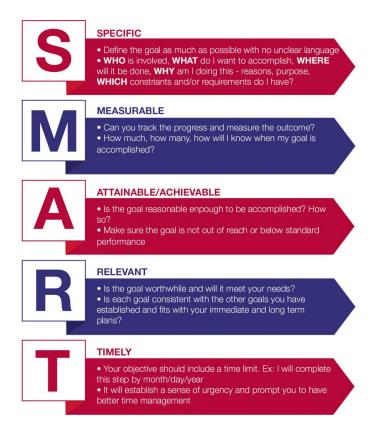
This plan is written, maintained, and kept by **you.** This is **your** plan. It can be helpful in guiding conversations between you and your peer support specialist as you think about improving your wellbeing. Check-in and update your goals regularly as wellness is an ongoing, life-long journey!

### What is my overall or long-term goal?

Example: I want to improve my wellness so that I can live a happier life, feel healthier, repair relationships, and get a new job.

It is often helpful to break down goals into categories as wellness is multidimensional. Under each category, you will find some questions to get you thinking. In some areas, you may be doing very well and not have any goals right now, while other areas may show a lot of room for growth. You don't need to create a goal for every single category right away. Focus on what feels more important right now.

Remember, goals should be **SMART**:  $\underline{S}$ pecific,  $\underline{M}$ easureable,  $\underline{A}$ chievable,  $\underline{R}$ elevant, and  $\underline{T}$ imely!





| Dimension #1: Physical Wellness   |
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| <ul> <li>Some topics to consider</li> <li>Do I eat a balanced diet?</li> <li>Do I exercise regularly and/or engage in fun movement (e.g. dancing, swimming)?</li> <li>Do I get enough sleep and rest when needed?</li> <li>Do I see doctors and dentists regularly and for emergency care?</li> <li>Do I have access to health insurance?</li> <li>Am I taking any medication that I've been prescribed?</li> <li>Do I maintain my physical hygiene?</li> <li>Are any health conditions I have well-managed?</li> </ul> |
| What I am already doing well in this category:  Example: I go to my doctor for an annual check-up, and I go for a walk three times a week.  |
| Do I want to focus on improving this area of wellness right now? Yes No   |
| My Overall Goal: Example: I want to start taking my medications again.  |
| What steps do I need to take to reach my goal?  Example: 1. Call my doctor. 2. Go to the pharmacy. 3. Set an alarm to remember to take them   |
| When do I want to have this goal accomplished?  Example: Call doctor by December 15. Go to the pharmacy by December 22.   |
| Additional Notes:   |

# **Dimension #2: Emotional Wellness** Some topics to consider.... Am I seeing a therapist/psychiatrist if I need one? Am I content, happy, or satisifed most days? Do I have people I can talk to about my emotions? • Do I have healthy coping skills to use when I am faced with difficult emotions? • Do I engage in fun activities and learn new things (e.g. art, sports, movies)? Do I recognize my own strengths and achievements?

- Am I able to make decisions and feel in control of my life?
- Do I have hope for the future and see a purpose for my life?
- Am I abstaining from substances or using them only in moderation?
- Are any mental health or substance use disorder conditions being well-managed?

| What I am alread | v doing we | ll in this | category: |
|------------------|------------|------------|-----------|
|------------------|------------|------------|-----------|

Example: I go to my doctor for an annual check-up, and I go for a walk three times a week.

Do I want to focus on improving this area of wellness right now? Yes No

#### My Overall Goal:

**Additional Notes:** 

Example: I want to improve my coping skills by trying mindfulness.

#### What steps do I need to take to reach my goal?

Example: 1. I will download a mindfulness app on my phone. 2. I will put a sticky note near my bed to remind me to meditate for five minutes each morning. 3. I will tell my friend about my goals for support. 4. Meditate three times per week this month.

| When do I want to have this goal accomplished?  Example: I will do the first three steps today and meditate three times per week. |  |
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| Dimension #3: Social Wellness  |
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| <ul> <li>Some topics to consider</li> <li>Do I have contact on a regular basis with people who are positive for me?</li> <li>Am I involved in support or social groups?</li> <li>Do I feel connected and a sense of belonging?</li> <li>Do I keep in touch with distant friends and family?</li> <li>Do I have time to meet new people?</li> <li>Do I have healthy relationships?</li> </ul> |
| What I am already doing well in this category: Example: I go to my doctor for an annual check-up, and I go for a walk three times a week.  |
| Do I want to focus on improving this area of wellness right now? Yes No  |
| My Overall Goal: Example: I want to increase my involvement in the community by attending support groups.  |
| What steps do I need to take to reach my goal?  Example: 1. Find the dates of the support groups from the local recovery center. 2. Write them on my calendar. 3. Ask a friend to go with me. 4. Set an alarm so I remember.   |
| When do I want to have this goal accomplished? Example: I will attend two groups by the end of this month.   |
| Additional Notes:  |

| Difficitision #4. Spiritual Weilliess   |
|---|
| <ul> <li>Some topics to consider</li> <li>Am I connected with my spirituality?</li> <li>Do I pray, mediate, journal, or spend time in nature?</li> <li>Do I attend religious services or events?</li> <li>Do I find meaning and purpose in life?</li> <li>Do I act according to my morals, values, and any religious teachings I follow?</li> <li>Do I participate in causes that are important to me?</li> </ul> |
| What I am already doing well in this category: Example: I meet weekly with my Rabbi, and I have a sense of purpose in my life.  |
| Do I want to focus on improving this area of wellness right now? Yes No   |
| My Overall Goal:<br>Example: I want to attend more religious events.  |
| What steps do I need to take to reach my goal?  Example: 1. I need to find a synagogue close to my home. 2. I will find out the dates and times of services. 3. I will ask my friend to attend with. Me.  |
| When do I want to have this goal accomplished? Example: I will attend my first event by the end of the month.   |
| Additional Notes:   |

| Dimension #5: Financial/Occupational Wellness  |
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| <ul> <li>Some topics to consider</li> <li>Do I have stable income that is sufficient to meet my needs?</li> <li>Do I have a safe and stable living environment?</li> <li>Do I have consistent access to food, healthcare, and transportation?</li> <li>If I am working: am I happy and fulfilled in my current job, do I have positive relationships with my colleagues, and do I have time for professional growth?</li> <li>Do I take time off from work, school, and other obligations periodically to rest?</li> <li>Do I take time away from distractions (e.g. phone, email)?</li> </ul> |
| What I am already doing well in this category:  Example: I have a stable job, and I like the work I do.  |
| Do I want to focus on improving this area of wellness right now? Yes No  |
| My Overall Goal: Example: I need to improve my budgeting skills.   |
| What steps do I need to take to reach my goal?  Example: 1. I will sign up for a financial wellness class at the local adult education center. 2. I will attend the class and review the materials. 3. I will complete a sample budget and share it with my peer support specialist. 4. I will download a money spending app to add my expenses  |
| When do I want to have this goal accomplished?   |

Example: I will sign up for the course by December 15, complete a budget by January 1, and track all of my spending during the month of January.

**Additional Notes:** 

| Additional Areas of Wellness  |     |    |
|---|-----|----|
| Is there anything else important to my wellness that hasn't been covered yet? | Yes | No |
| Additional Goals:   |     |    |
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| What steps do I need to take to reach my goals?                               |     |    |
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| When do I want to have these goals accomplished?                              |     |    |
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| Additional Notes:   |     |    |
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| Summary  |
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| Top three areas of wellness that I am focusing on right now:    Physical   Emotional   Social   Spiritual   Occupational/Financial   Other |
| My next steps are:   |
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| Potential obstacles I may face and how I will respond:   |
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| People who can support me in reaching my goals:  |
| Notes:   |
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| Notes Continued: |
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