



WHAT DO I NEED RIGHT NOW?

DATE _____

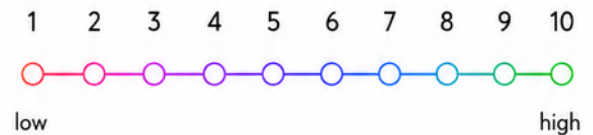
TIME _____

Check in with yourself. Be honest. Start with one real need.

1. WHAT AM I FEELING RIGHT NOW?

- | | | |
|---------------------------------------|----------------------------------|--------------------------------------|
| ☐ Calm | ☐ Anxious | ☐ Frustrated |
| ☐ Sad | ☐ Numb | ☐ Overwhelmed |
| ☐ Angry | ☐ Lonely | |
| ☐ Other: _____ | | |

2. ENERGY LEVEL



3. WHAT FEELS HEAVY RIGHT NOW?

4. WHAT DO I NEED MOST?

- | | | | |
|-----------------------------------|----------------------------------|--------------------------------|--------------------------------------|
| ☐ Rest | ☐ Food | ☐ Water | ☐ Quiet |
| ☐ Movement | ☐ Comfort | ☐ Space | ☐ Reassurance |
| ☐ Sleep | ☐ Support | | |

5. WHO OR WHAT COULD HELP?

6. WHAT IS REALISTIC FOR ME RIGHT NOW?

7. ONE THING I CAN GIVE MYSELF NEXT



Your needs are valid, even when they are simple.



LET'S HEAL TOGETHER!

Nova Wellness Collection Inc.

For reflection and self-support; not a substitute for professional care.