# Managing Co-Occurring Disorders: A Personal Worksheet

Name:

Date of Birth:

Mental Health Practitioner:

#### **Self-Reflection**

How do you typically cope with stress in your life?
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Have you noticed any changes in your mental health when using substances?
How does your mental health impact your daily life, relationships, and overall well-being?
How might substance use contribute to or alleviate these effects?

## **Identifying Triggers**

What situations tend to trigger your substance use?
Are there specific events that can worsen your mental health significantly?
Do these issues you have identified relate to your past?
Do you notice any patterns to your substance use or mental health issues?

#### **Goal Setting**

List three goals that you would like to achieve within your substance use and mental health concerns. Goal #1 Goal #2 Goal #3

### **Support System**

Here you can list the people around you who are supporting you through this.

Person #1	
Name:	
Phone:	
Email:	
Relationship:	
Person #2	
Name:	
Phone:	
Email:	
Relationship:	
Person #3	
Name:	
Phone:	
Email:	
Relationship:	
Person #4	
Name:	
Phone:	
Email:	
Relationship:	
Person #5	
Name:	
Phone:	
Email:	
Relationship:	

# Coping Skills

What are your current coping skills?
How do your current coping skills impact your daily life?
How would you like to overcome these challenges?
What coping skills would you like to try?

#### Reflection

<ul> <li>Here is a space for you to write down any reflection notes you have during this time.</li> </ul>	
<ul> <li>In this section you can write down how you're feeling, any concerns, any journal notes you might want to share and any questions for your mental health practitioner.</li> </ul>	