

Self-Help Journal

This journal is for you to use to reflect upon how your experiences in self-help meetings affects your recovery. **Please complete one journal entry each time you attend a meeting.** At the end of each self-help meeting, be sure to get the meeting secretary's signature. Please bring this with you to your next treatment session.



*Honor America's veterans by providing
exceptional health care that improves their
health and well-being*

Date: _____

Name: _____

Did you attend a self-help group meeting today? YES NO

Signature of Meeting Secretary: _____

What I liked or disliked about the meeting I attended:

I plan to go to another meeting:

| | | |
|-----------|---------------------|---|
| TOMORROW | NEXT MONTH | I DON'T PLAN TO GO TO ANOTHER MEETING |
| NEXT WEEK | ALL OF THE ABOVE | |

If I do not plan to go to another meeting, these are my reasons:

Self-Help Treatment Plan:

I plan to attend the following meeting (s) next week:

My goals for self-help next week (use this space to write down what you hope to get out of the self-help meetings you plan to attend):

Date: _____

Name: _____

Did you attend a self-help group meeting today? YES NO

Signature of Meeting Secretary: _____

What I liked or disliked about the meeting I attended:

I plan to go to another meeting:

| | | |
|-----------|---------------------|---|
| TOMORROW | NEXT MONTH | I DON'T PLAN TO GO TO ANOTHER MEETING |
| NEXT WEEK | ALL OF THE ABOVE | |

If I do not plan to go to another meeting, these are my reasons:

Self-Help Treatment Plan:

I plan to attend the following meeting (s) next week:

My goals for self-help next week (use this space to write down what you hope to get out of the self-help meetings you plan to attend):

Date: _____

Name: _____

Did you attend a self-help group meeting today? YES NO

Signature of Meeting Secretary: _____

What I liked or disliked about the meeting I attended:

I plan to go to another meeting:

| | | |
|-----------|---------------------|---|
| TOMORROW | NEXT MONTH | I DON'T PLAN TO GO TO ANOTHER MEETING |
| NEXT WEEK | ALL OF THE ABOVE | |

If I do not plan to go to another meeting, these are my reasons:

Self-Help Treatment Plan:

I plan to attend the following meeting (s) next week:

My goals for self-help next week (use this space to write down what you hope to get out of the self-help meetings you plan to attend):

Date: _____

Name: _____

Did you attend a self-help group meeting today? YES NO

Signature of Meeting Secretary: _____

What I liked or disliked about the meeting I attended:

I plan to go to another meeting:

| | | |
|-----------|---------------------|---|
| TOMORROW | NEXT MONTH | I DON'T PLAN TO GO TO ANOTHER MEETING |
| NEXT WEEK | ALL OF THE ABOVE | |

If I do not plan to go to another meeting, these are my reasons:

Self-Help Treatment Plan:

I plan to attend the following meeting (s) next week:

My goals for self-help next week (use this space to write down what you hope to get out of the self-help meetings you plan to attend):