

## My Relapse Planner

How confident are you that you'll keep up your *physical activity* goal during the next three months?

Not confident at all \_\_\_\_\_  
Not very confident \_\_\_\_\_  
Somewhat confident \_\_\_\_\_  
Confident \_\_\_\_\_  
Very confident \_\_\_\_\_

How confident are you that you'll keep up your *healthy eating* goal during the next three months?

Not confident at all \_\_\_\_\_  
Not very confident \_\_\_\_\_  
Somewhat confident \_\_\_\_\_  
Confident \_\_\_\_\_  
Very confident \_\_\_\_\_

1. Have you ever had trouble sticking with your physical activity or healthy eating goals before?

Write down reasons why

---

---

---

---

---

---

---

2. If you had trouble, what has helped you get back on track? (i.e. support from friends, a class, setting goals)

---

---

---

---

---

---

---

3. Perhaps you have trouble identifying past strategies that worked for you. What new strategies are you willing to try that may help you keep on track (i.e. support from friends, a class, setting goals)

---

---

---

---

---

---

---

4. Plan for tough situations that may interfere with your goals:

<b>High risk situations or potential barriers to my healthy eating and physical activity goals</b>	<b>Solutions (coping mechanisms &amp; resources)</b>