

Salud Y Vida

DSME Class Session 5



Weekly Action Plan

Name: _____

Date: _____

This week I promise to:

____ Talk to somebody about my feeling towards diabetes/hypertension.

____ Manage my stress by _____.

____ Ask _____ for support to help to _____.

____ Develop a stress relieving habit.

____ Borrow, rent or go to the library to get a diabetes video and watch it with my family.

____ Teach my family about _____.

____ Maintain a healthy lifestyle and manage my diabetes/hypertension
By stopping smoking.

____ Other: _____

When I achieve my goal, I will reward myself with:

Signature: _____

Date: _____

Witness: _____