STRESS MANAGEMENT

Everyone at one point or another has felt stress in their life. Being unemployed, school deadlines, long work hours and family situations can great causes of stress. Unless we can manage the stress in our lives, we are setting ourselves up for serious health problems such as high blood pressure, hypertension, and greater risks for a heart attack or stroke. Try the following exercises and start reducing your stress now!

Decision Item

1. Place an “X” by any of these stress symptoms that apply to you:

___ Irritability (grouchiness)
___ Increased use of tobacco, alcohol or caffeine
___ Headaches, neckaches, backaches, tense muscles
___ Overeating
___ Sleep loss
___ Anger, bitterness
___ Confusion, a sense of being overloaded
___ Depression
___ Forgetting things
___ Less patient with others
___ Tired throughout the day

2. If you checked five or more, you have a problem with stress. There are three types of stress:

   Physical: from hunching over a desk for hours, clenching teeth as you sleep, etc.
   Mental: caused by boredom, concentrating too long
   Emotional: caused by depression, anxiety, etc.

What type of stress do you have?

3. What in your life is making you feel stressed? List here.

_________________________________
_________________________________
_________________________________

4. When do you feel “stressed-out” the most? During school? Work? At home with the family?

_________________________________
5. There are many steps you can take to keep your stress levels down. The steps you take can make your life easier and make you a healthier person. Look at the “stress exercises” list. Which 3 are the easiest for you to do?

_______________________________________________

_______________________________________________

_______________________________________________

(Note: any of this exercise can be done at any time)

6. Make commitment to yourself to do these exercises thirty minutes everyday for one week. Complete this sentence:
I began my stress exercises on ___________________.

7. Set aside a special time and place during each day to do these exercises.
The time(s) and places(s) I chose each day were:

Day #1 time: _______ place: _______
Day #2 time: _______ place: _______
Day #3 time: _______ place: _______
Day #4 time: _______ place: _______
Day #5 time: _______ place: _______
Day #6 time: _______ place: _______
Day #7 time: _______ place: _______

8. At the end of one week, have these exercises helped?
Yes_______ No_______
If yes, which worked the best? __________________
If no, try 3 different exercises for one more week. If you still feel stress, speak with a doctor or counselor.