



Mental Health Revolution Progress Tracker

Instructions

This tracker helps you measure your mental health journey over time. Complete it when starting the book, then at regular intervals (monthly or quarterly) to observe your progress.

Part 1: Core Dimensions Assessment

Rate each dimension from 1-10 (1 = significant struggle, 10 = excellent)

Dimension	Baseline Date:_____	Month 1 Date:_____	Month 3 Date:_____	Month 6 Date:_____
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Emotional Regulation Ability to manage emotions without being overwhelmed

Stress Resilience Capacity to navigate stressors without prolonged disruption

Nervous System Regulation
Balance between calm and activated states

Mind-Body Connection
Awareness of physical-mental interactions

Self-Awareness Recognition of thoughts, emotions, patterns, and triggers

Mental Clarity Ability to think clearly and make decisions



Dimension	Baseline Date:_____	Month 1 Date:_____	Month 3 Date:_____	Month 6 Date:_____
Sleep Quality How restful and restorative your sleep feels				
Energy Level Overall vitality and sustainable energy				
Social Connection Quality of relationships and sense of belonging				
Self-Compassion Ability to treat yourself with kindness during challenges				

Part 2: Symptom Frequency Tracker

Rate how often you experience each symptom: 0 = Never, 1 = Rarely, 2 = Sometimes, 3 = Often, 4 = Very Often

Symptom	Baseline Date:_____	Month 1 Date:_____	Month 3 Date:_____	Month 6 Date:_____
Anxiety/Worry				
Low mood/Depression				
Irritability				
Emotional numbness				
Overwhelm				
Rumination				
Self-criticism				



Symptom	Baseline	Month 1	Month 3	Month 6
	Date:_____	Date:_____	Date:_____	Date:_____
Sleep difficulties				
Tension or pain				
Energy depletion				
Social withdrawal				
Difficulty with boundaries				

Part 3: Practice Implementation Tracker

Mark which practices you've implemented consistently for at least 2 weeks

Practice	Baseline	Month 1	Month 3	Month 6
	Date:_____	Date:_____	Date:_____	Date:_____
Breathwork				
Mindfulness/Meditation				
Body scanning				
Cognitive reframing				
Movement practice				
Sleep hygiene				
Nutritional approach				
Social connection				
Nature exposure				
Digital boundaries				



Practice	Baseline Date:_____	Month 1 Date:_____	Month 3 Date:_____	Month 6 Date:_____
Emotional processing				
Self-compassion				

Part 4: Qualitative Reflection

Most Significant Changes Noticed

What shifts have you observed in your thoughts, feelings, behaviors, or relationships?

Baseline: _____

Month 1: _____

Month 3: _____

Month 6: _____

Most Helpful Practices

Which specific approaches have been most beneficial for you?

Month 1: _____

Month 3: _____

Month 6: _____

Implementation Challenges

What obstacles have you encountered in applying these practices?

Month 1: _____

Month 3: _____



Month 6: _____

Next Focus Areas

Based on your progress, what aspects would you like to develop further?

Month 1: _____

Month 3: _____

Month 6: _____

Part 5: Victory Log

Record specific moments when you noticed positive changes or successfully applied practices

Date	Situation	What I Did	What I Noticed
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Reflection Guidelines

When completing this tracker:



1. Look for patterns rather than focusing on day-to-day fluctuations
2. Celebrate small improvements—they often precede larger shifts
3. View challenges as information rather than failures
4. Notice indirect benefits (e.g., improvements in areas you weren't directly targeting)
5. Be honest but compassionate in your self-assessment

Remember that mental health transformation isn't linear—periods of progress, plateaus, and temporary setbacks are all normal parts of the journey.