NAME: _____ DATE: _____

Weeks 1–2 of Your Behavior Change Project

Complete this journal response by the end of the second week of your behavior change project.

Now that you've started trying to change your behavior, how do you feel about it? Has it been easier or harder to change than you expected? Why do you think that is? Have you achieved any goals or rewards yet? Have you encountered any obstacles? Which? If you've encountered an obstacle to changing your behavior, how will you avoid it in the future?