

DAY 30!! The LAST DAY OF THE CHALLENGE! Here's what I suggest:

- 1.) Take out that pen and write down your 10+ things for which you're grateful, focusing on the last four weeks we've been doing this challenge.
- 2.) Choose one or more of the other techniques we've done in the past month to do! Here's a reminder of all the things we've done:
- positive affirmations
- music
- funny videos
- doing something for someone else
- making food
- meditation
- yoga
- going outside
- drinking lots of water
- play a game
- 15+ minute walk
- 30+ second hugs
- power poses
- find a motto
- make something

- write a letter to someone explaining why you're grateful for them
- focus on each of your senses
- sing
- dance
- focus on the little things
- be a screen door
- · let go of guilt
- plan a trip, even if you can't take one
- fake it
- stop comparing
- stop fearing failure (do something that makes you nervous)
- 3.) Fill out the **SECOND ASSESSMENT FORM** (below) and then compare it to the first. NOTE: The second form is slightly different than the first, so just doing the first one again won't work. PLUS, DO NOT look at the first one again until you FINISH the second one!
- 4.) <u>CONTACT US</u> and let us know about what you thought of the challenge and how you're feeling!
- 5.) Consider if you'd like to pre-order Corrina's next book (publishing date TBD and link here: https://corrinathurston.com/shop/products/books-for-artists/how-to-crush-self-doubt-book/) to learn more about these tips and techniques we've looked at during this challenge and many more!

Emotional Health Self-Assessment #2

This assessment is for your own use. Please be honest. It is slightly different than the initial assessment we did. Please DON'T LOOK at your first assessment until AFTER you've completed this one. Thank you for participating!

Disclaimer: This tool is for your own use to see the difference during this experiment. This is not a medical assessment nor is it used to diagnose or treat any sort of medical illness. If you think you are suffering from a mental health condition like depression, anxiety, bipolar disorder, or are having suicidal thoughts, please reach out to your health care provider.

1.)	In the last t	the last two weeks, how often have you felt sad?										
Never	Rar	ely	Some	times		Fairl	y often		Almost all the time			
2.)	In the last t	wo weeks	, how of	ten hav	e you f	elt ange	r, rage, o	or frustra	ation?			
Never	Rar	ely	Some	times		Fairl	y often		Almost all the time			
3.)	In the last t	wo weeks	, have y	ou had	any sui	cidal the	oughts o	r though	ts of harming yourself?			
Never	Rar	ely	Some	times		Fairl	y often		Almost all the time			
4.)	In the last t	he last two weeks, how often have you felt overwhelmed?										
Never	Rar	ely	Some	times		Fairl	y often		Almost all the time			
5.)	In the last t	In the last two weeks, have you felt anxious or nervous?										
Never	Rar	ely	Some	times		Fairl	y often		Almost all the time			
6.)	In the last two weeks, have you felt jittery and/or had trouble focusing or getting yourself motivated?											
Never	Rarely		Sometimes			Fairl	y often		Almost all the time			
7.)	In the last t	the last two weeks, have you had any unexplained pain or achiness?										
Never	Rarely		Sometimes			Fairl	y often		Almost all the time			
8.)	If you've had unexplained pain, how painful is it on a scale from 1-10?							0?				
1	2 3	4	5	6	7	8	9	10				
9.)	In the last t	wo weeks	have yo	ou had t	rouble	enjoyin	g things	you usu	ally enjoy?			
Never	Rarely		Sometimes			Fairl	y often		Almost all the time			
10.)	In the last t	n the last two weeks have you felt self-doubt toward yourself, your body, or guilt/shame?										
Never	Rar	elv	Some	times		Fairl	v often		Almost all the time			

11.) during	Do you feel that this enthe last month?	notional health challen	ge had a positive impact o	on your mood
Yes, definitely	Somewhat	Hard to say	Not really	No
12.)	Compared to a month	ago, do you feel more g	rounded, calm, or less ove	erwhelmed?
Yes, definitely	Somewhat	Hard to say	Not really	No
13.) difficul	Compared to a month t situations?	ago, do you feel as thou	igh you are better prepare	ed to handle
Yes, definitely	Somewhat	Hard to say	Not really N	O
14.) doubt,			rwhelmed, anxious, or fill e did during the challenge	
Yes, definitely	Maybe	Not sure	Probably not	No
for wh	y positive impact on yo	ur perspective or outlo	things for which you're gr ok? (Did it get easier to th ou feel like you are less li	ink of things
Yes, definitely	Somewhat	Not sure	Not very much	No
NOW take ou	nt your provious solf-s	accessment and see if	your first 10 answers a	ro any

NOW, take out your previous self-assessment and see if your first 10 answers are any different. Did anything change?

THEN, please feel free to contact us with any questions or comments and let us know what you thought of the challenge! Let us know if your assessment was better the second time around. Let us know if there were techniques that particularly stood out for you as making you feel better. We want to know!

If you're interested in pre-ordering Corrina's next book, How To Crush Self-Doubt and Gain Real Confidence, feel free to go to this link https://corrinathurston.com/shop/products/books-for-artists/how-to-crush-self-doubt-book/

Thanks so much for participating in the challenge!! We hope it helped make you feel at least a little better. Best of luck with everything you do.