

WEEKLY HEALTHY AGING PATTERNS WORKSHEET

Review movement, nutrition, sleep, recovery, connection, and well-being to identify patterns that support healthy aging.

Week of: _____

to: _____

How to use: Record a few key observations each day or complete the worksheet at the end of the week. Look for connections between your habits and how you feel - not a perfect score.

1. Weekly Healthy Aging Snapshot

Day	Movement	Strength	Nutrition	Sleep	Stress 1-10	Energy 1-10
Mon		■		____ hrs	____	____
Tue		■		____ hrs	____	____
Wed		■		____ hrs	____	____
Thu		■		____ hrs	____	____
Fri		■		____ hrs	____	____
Sat		■		____ hrs	____	____
Sun		■		____ hrs	____	____

For Nutrition, use a simple note such as Good / Fair / Needs Attention.

2. Movement & Strength Patterns

Days physically active: ____ / 7

Strength sessions: ____

Mobility days: ____

Balance days: ____

Days with prolonged sitting: ____

I tended to move more when:

I tended to sit more when:

Movement that made me feel best:

Did activity seem related to my energy or mood?

■ Yes

■ No

■ Unsure

What did I notice?

3. Nutrition & Hydration Patterns

This week I regularly included:

■ Protein-rich foods

■ Vegetables

■ Fruit

■ Whole grains

■ Legumes

■ Nuts and seeds

■ Healthy fats

■ Adequate fluids

Meals that left me feeling best:

Times I tended to skip or delay meals:

Did hydration appear to affect my energy or well-being?

■ Yes

■ No

■ Unsure

Pattern I noticed:

4. Sleep & Recovery Patterns

Day	Sleep Duration	Sleep Quality 1-10	Morning Energy 1-10
Mon	____ hrs	____	____
Tue	____ hrs	____	____
Wed	____ hrs	____	____
Thu	____ hrs	____	____
Fri	____ hrs	____	____
Sat	____ hrs	____	____
Sun	____ hrs	____	____

Most restorative night: _____ Least restorative night: _____

What was different?

Did better sleep seem connected with better energy, movement, or mood the next day?

■ Yes

■ No

■ Unsure

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Find the patterns you can carry into next week.

5. Stress & Recovery

My stress was generally:

☐ Low

☐ Moderate

☐ High

☐ Variable

I made time for recovery or relaxation:

☐ Rarely

☐ Some days

☐ Most days

☐ Daily

Recovery activities I used:

☐ Walking

☐ Quiet time

☐ Breathing / relaxation

☐ Stretching or mobility

☐ Time outdoors

☐ Hobbies

☐ Social time

☐ Other: _____

What helped me recover best?

What seemed to increase stress or fatigue?

6. Social Connection & Purpose

☐ Meaningful time with family or friends

☐ Social or community activity

☐ Learned or practiced something new

☐ Talked with someone I care about

☐ Made time for a hobby

☐ Did something meaningful or purposeful

Activity or interaction that made me feel best:

Did social connection affect my mood or energy?

7. Outdoor Time & Daily Routine

Days with meaningful outdoor time: ____ / 7

Days with morning/daytime light: ____ / 7

My daily routine felt:

☐ Very consistent

☐ Mostly consistent

☐ Variable

☐ Very irregular

When did I generally feel my best?

☐ Morning

☐ Afternoon

☐ Evening

☐ Varied

What was usually happening on my better days?

8. My Weekly Pattern Review

Strongest healthy-aging habits - choose up to three:

☐ Regular movement

☐ Nutritious meals

☐ Stress management

☐ Outdoor time

☐ Strength training

☐ Hydration

☐ Recovery

☐ Learning / purpose

☐ Mobility / balance

☐ Consistent sleep

☐ Social connection

Areas needing more attention:

☐ Movement

☐ Strength

☐ Mobility / balance

☐ Nutrition

☐ Hydration

☐ Sleep

☐ Stress

☐ Recovery

☐ Social connection

☐ Outdoor time

9. Connections I Noticed

When I slept better, I noticed:

When I moved more, I noticed:

When my stress was higher, I noticed:

When I ate and hydrated consistently, I noticed:

When I spent time with others or doing something meaningful, I noticed:

10. My Biggest Insight This Week

The most important pattern I noticed was:

11. My Focus for Next Week

One habit I want to maintain:

One habit I want to improve:

One thing I want to do less often:

One realistic action I will take next week:

My priority:

☐ Move more

☐ Build strength

☐ Improve mobility

☐ Eat more consistently

☐ Hydrate better

☐ Protect sleep

☐ Manage stress

☐ Prioritize recovery

☐ Connect with others

☐ Spend more time outdoors

Important: This worksheet is for general education and personal wellness tracking. It is not designed to diagnose health conditions or determine biological age, longevity, or disease risk. Healthy-aging needs vary according to age, health status, medications, physical ability, medical history, and other individual factors. Discuss significant health concerns or changes with an appropriate healthcare professional.

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