



PTSD & Trauma Processing Workbook

This Book Belongs To

Daily Planner

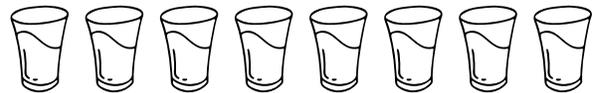
DATE

(S) (M) (T) (W) (T) (F) (S)

TODAYS GOALS

- _____
- _____
- _____
- _____

WATER INTAKE



FRUIT / VEGETABLE



MOOD



TODAYS APPOINTMENT

- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____

TODAY I AM GRATEFUL FOR

THINGS TO GET DONE TODAY

Weekly Planner

Weekly priorities

- _____
- _____
- _____
- _____
- _____

Notes

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

Checklist

- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____

Appointment

Reminder

Monthly Planner

MONTH:

YEAR:

MON	TUE	WED	THU	FRI	SAT	SUN

GOALS

NOTES

My Traumas

USE THE SPACE BELOW TO DESCRIBE YOUR TRAUMAS. THE FIRST STEP TOWARDS HEALING IS TO ACKNOWLEDGE YOUR TRAUMAS.

A large, empty rectangular area with a light pink background, intended for writing about traumas. The area is completely blank, providing a space for the user to describe their experiences.

My Traumas

USE THE SPACE BELOW TO DRAW YOUR TRAUMAS IF YOU'RE HAVING A HARD TIME DESCRIBING THEM WITH WORDS.



Trauma Worksheet

What Am I Traumatized About?

What Can I Do To Overcome It?

My Action Plan

A Promise My Self

Working On Your Triggers

WHAT'D HAPPENED RECENTLY?

WHAT'D HAPPENED IN THE PAST?

HOW DID I FEEL WHEN THE EVENT FIRST HAPPENED IN THE PAST?

HOW AM I FEELING NOW JOURNALING ABOUT IT?

WHAT I NEEDED IN THE MOMENT THAT I DIDN'T GET OR DO?

WHAT SELF CARE ACTIVITIES CAN I ENGAGE IN TO SELF SOOTHE?
Examples: try a meditation class, take a relaxing hot bath, get a mani/pedicure, etc.

Trigger Processing

DESCRIBE WHAT'D HAPPENED

WHAT MENTAL, VERBAL OR PHYSICAL RESPONSE OCCURRED?

WHY DID YOU RESPOND THE WAY YOU DID?

WHAT EMOTIONS DID YOU FEEL?

BREAK DOWN THE COMMENT, ACT, OR EXPERIENCE THAT TRIGGERED YOU

Working on patterns

**WHAT PATTERNS DO YOU SEE REPEATING
THEMSELVES IN YOUR LIFE?**

**HOW HAD THESE PATTERNS AFFECTED YOU AND/OR
PEOPLE AROUND YOU?**

**WHICH PATTERNS DID YOU PICK UP FROM
YOUR CAREGIVERS?**

**WHAT ACTIONS CAN YOU TAKE
TO BREAK THESE PATTERNS?**

Learn to respond not react

**Reactions tend to go like this: An event happens.
You panic. Then you proceed.
Responses tend to go like this: An event happens.
You Pause. You Process. You Plan. Then you proceed.**

**STEP 1
BECOME AWARE THAT
YOUR THOUGHTS ARE
NOT YOU**

**Observe your thoughts in the moment.
Take a step back to create a mental space
between you and your thoughts.
Acknowledge all the thoughts that surface
up but become aware that your thoughts
are not you.**

**STEP 2
COME BACK TO YOUR
BODY & THE PRESENT
MOMENT**

**When facing a trigger that makes you
more reactive than usual, choose to
pause & take a few deep breaths. Bring
your attention back to your body and
the present moment.**

**STEP 3
REAFFIRM TO
YOURSELF
" I LOVE YOU"&
"YOU'RE SAFE"**

**Place your right palm over your chest at
the heart center and tell yourself " I love
you" & "you're safe." This simple act helps
to soothe and comfort yourself. Once
you've successfully
self-soothed yourself, then plan on how
you can best handle the situation.**

I'm aware that my thoughts are not me

WRITE DOWN WHAT MAKES YOU FEEL WORRIED, SAD, SCARED, DEPRESSED, ANGRY, AND/OR ANXIOUS

Use the questions below to examine and break down the thought. Ask yourself:

Is my thought based on a feeling or an actual fact?

Is it possible for my thought to come true?

What's the worst that can happen if it does come true?

Will it still matter to me tomorrow or in the future?

What can I do handle the situation in a positive why?

Heal your inner child in 7 steps

STEP4:EMBRACE YOUR EMOTIONS

As you work on healing your inner child, a variety of emotions may arise. Allow yourself to sit with these feelings, acknowledge them, and fully experience them instead of avoiding or running away from them.

Things/Events/People That Make me feel sad

--

Things/Events/People That Make me feel Angry

--

Things/Events/People That Make me feel Anxious

--

Things/Events/People That Make me feel Scared

--

Heal your inner child in 7 steps

STEP 5: IDENTIFY CURRENT MANIFESTATIONS OF PAST HURTS

Take time to identify areas in your life where past childhood wounds may have led to self-sabotaging behaviors. Be honest with yourself—acknowledgment is the first step toward healing and adopting healthier habits.

LOVE

--

CAREER

--

FINANCE

--

FAMILY

--

HEALTH

--

FRIENDSHIP

--

Heal your inner child in 7 steps

STEP 6: TAKE STEPS TO FILL THE GAP

As a child, you lacked the means and power to provide yourself with essentials like love, care, money, protection, and quality time. However, as an adult, you now have the ability to identify your needs and fulfill them. Take the time to discover what can fill your cup of happiness and fulfillment.

LOVE

--

CAREER

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FINANCE

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FAMILY

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HEALTH

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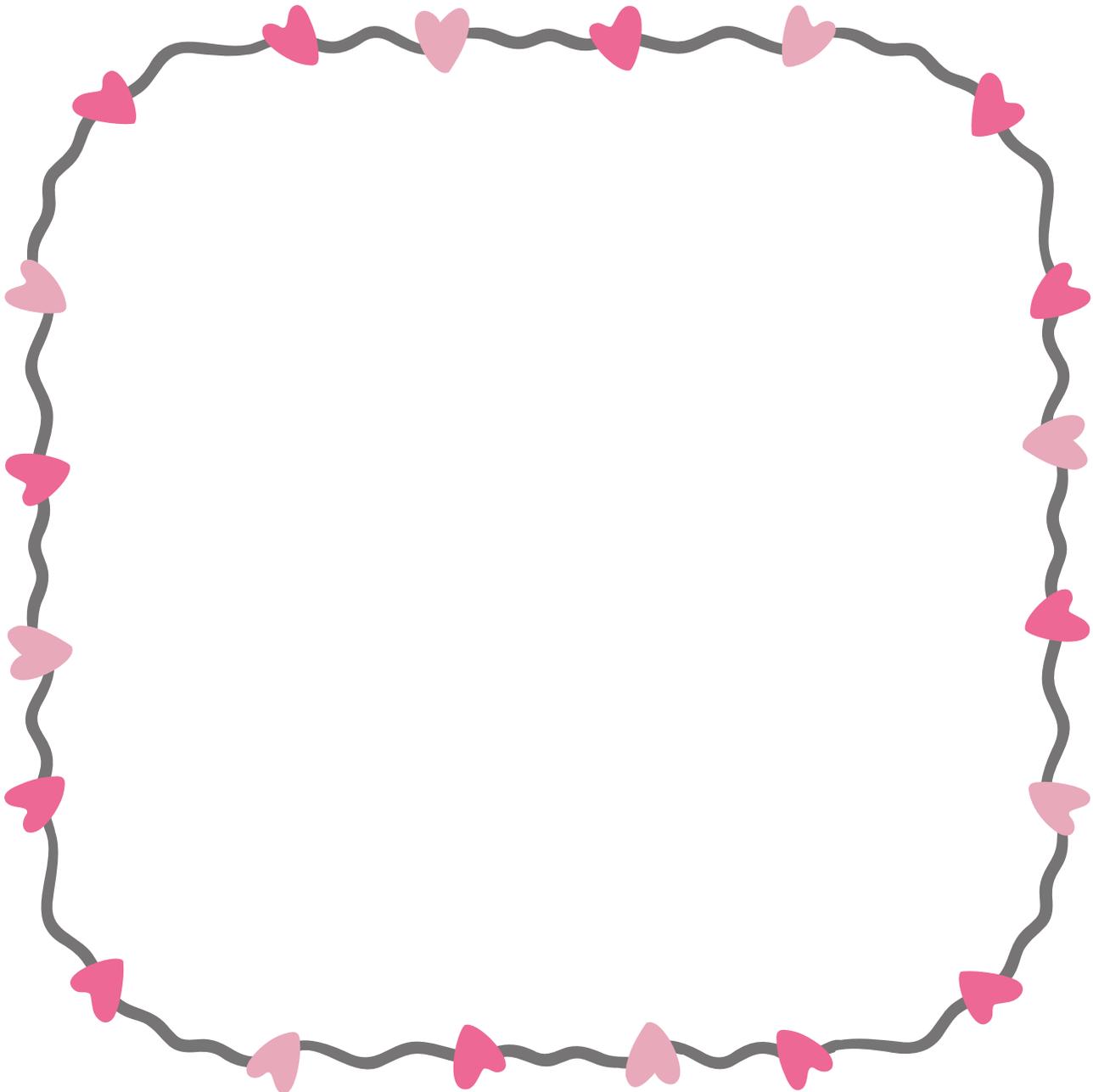
FRIENDSHIP

--

Heal your inner child in 7 steps

STEP 7: MAKE PEACE WITH THE PAST BY HELPING OTHERS

You cannot go back to the past to change what happened to you. However, there are ways you can help change the present and future for someone currently experiencing what you once went through. Use the space below to brainstorm steps you can take to lend a helping hand to someone in need.



Experience Breakdown

WHAT'D HAPPENED TODAY?

WHAT I FELT ABOUT IT

I GOT TRIGGERED BECAUSE..

THE ENVIRONMENT I WAS IN

THE PEOPLE I WAS WITH

MY THOUGHTS AND REFLECTION

Acknowledge your Thoughts & feelings

MY THOUGHTS

I'M FEELING SAD	
0	10
<hr/>	
I'M FEELING ANXIOUS	
0	10
<hr/>	
I'M FEELING SCARED	
0	10
<hr/>	
I'M FEELING ANGRY	
0	10
<hr/>	
I'M FEELING FRUSTRATED	
0	10
<hr/>	

HOW AM I FEELING TODAY?

Facilitating Healing

WHAT'D HAPPENED IN THE PAST THAT IS STILL CAUSING ME SO MUCH PAIN?

WHAT TRAUMA AM I WORKING ON HEALING FROM?

**WHAT THINGS HAVE I HEALED FROM ALREADY ?
HOW?**

MY ACTION PLAN TO FACILITATE HEALING

Self Blame

WHAT ARE THE SELF BLAME THOUGHTS THAT FREQUENTLY OCCUR IN YOUR HEAD?

DO YOU FEEL RESPONSIBLE FOR YOUR TRAUMA? HOW SO?

**DO YOU FEEL LIKE WHAT'D HAPPENED TO YOU COULD BE AVOIDED/PREVENTED?
HOW SO?**

DO YOU FEEL LIKE NOBODY TRULY UNDERSTANDS HOW YOU FEEL? EXPLAIN:

**DO YOU ALWAYS FEEL LIKE YOU SHOULD HAVE/COULD HAVE DONE SOMETHING
TO STOP WHAT'D HAPPENED? EXPLAIN:**

DO YOU FEEL LIKE YOU COULD NEVER TRUST ANYONE AGAIN?EXPLAIN?

DO YOU QUESTION WHY THIS HAD HAPPENED TO YOU? HOW SO?

DO YOU AVOID TALKING ABOUT IT? EXPLAIN:

DO YOU AVOID SEEKING HELP WHEN NEEDED? EXPLAIN:

DO YOU FEEL LIKE YOU DESERVED IT? EXPLAIN:

Self Acceptance

WHAT ARE YOUR STRENGTHS?

WHAT ARE YOUR WEAKNESSES?

WHAT MAKE YOU UNIQUE & SPECIAL?

WHAT ARE THE IMPERFECTIONS THAT MAKE YOU UNIQUE?

WHAT CHARACTERISTICS, QUALITIES, TALENTS, SKILL AND ABILITIES DO YOU POSSES THAT YOU ADMIRE IN YOURSELF

Self Compassion

WHAT DO YOU OFTEN CRITICIZE YOURSELF ABOUT?

WHAT DO YOU FEEL MOST ASHAMED ABOUT YOURSELF?

WHAT EMOTIONS ARE YOU FEELING WHILE CRITICIZING YOURSELF

WHAT TONE, PHRASES AND WORDS ARE YOU USING?

IF YOU WERE TO CONFRONT YOUR INNER CRITIC, WHAT WOULD YOU SAY?

Processing Nightmares

**WHAT TYPE OF REOCCURRING NIGHTMARES DO YOU USUALLY HAVE?
WHAT ARE THEY ABOUT?**

**HOW IS HAVING NIGHTMARES
AFFECTING
YOUR SLEEP AT NIGHT?**

**HOW DO YOU FEEL THE
NEXT MORNING AFTER
HAVING A NIGHTMARE
THE NIGHT BEFORE?**

**WHAT ARE YOUR
NIGHTMARES
TELLING YOU?**

**WHAT UNDERLYING TRAUMA IS ASSOCIATED
WITH YOUR NIGHTMARES?**

Self Worth

SELF WORTH POSITIVE AFFIRMATION

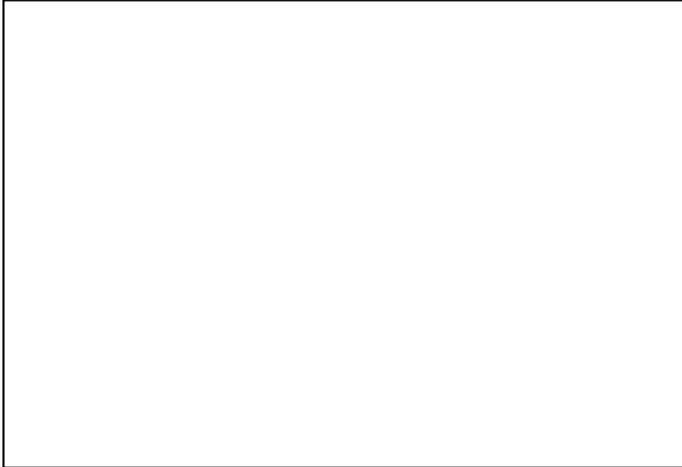
WHAT HARSH CRITICISM DO YOU OFTEN TELL YOURSELF WHILE PERFORMING TASKS/CHORES?

WHY DO YOU THINK YOU ARE OFTEN HARSH ON YOURSELF?

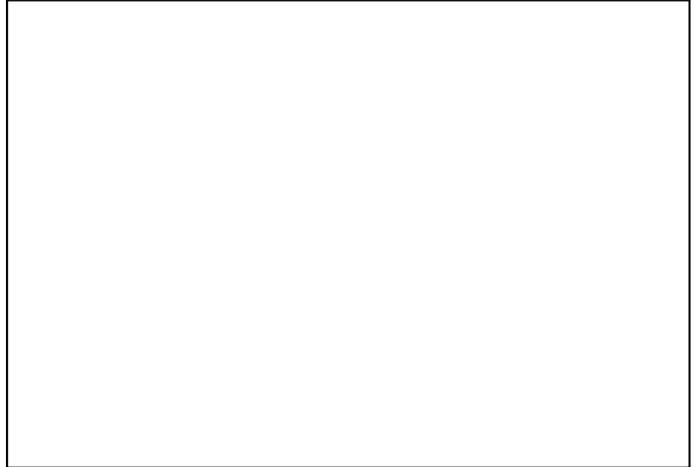
WHAT ARE YOUR GREATEST STRENGTHS?WHAT DO YOU MOST ADMIRE ABOUT YOURSELF?

Trigger Coping Cards

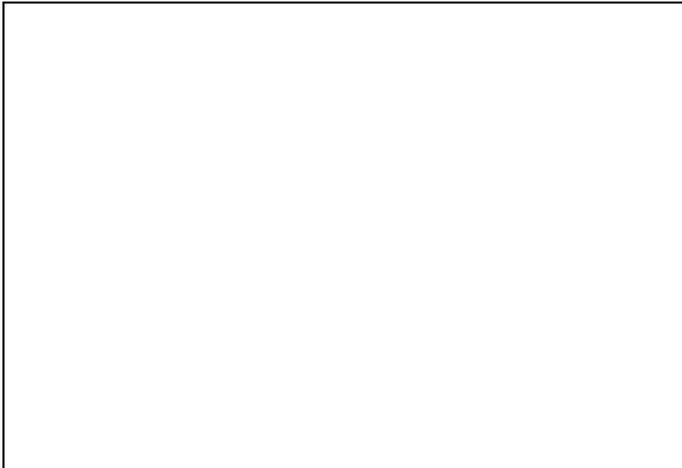
Take Deep Breaths



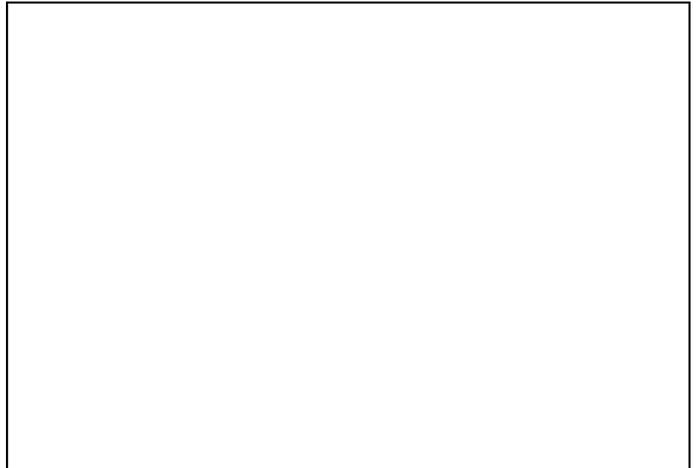
Become Aware of Your Triggers



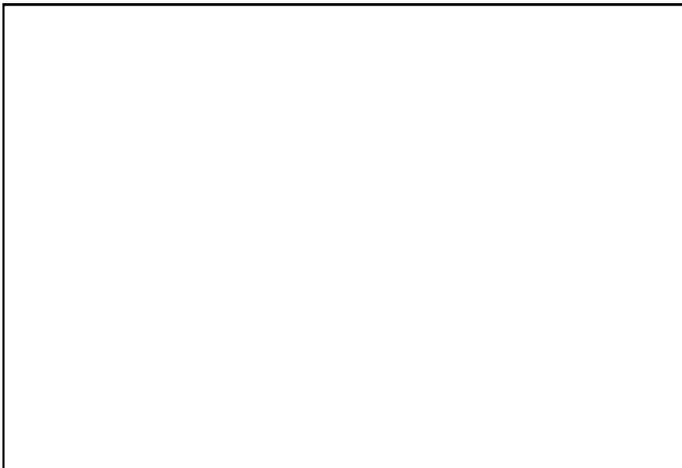
Plan a Coping Strategy for your Triggers



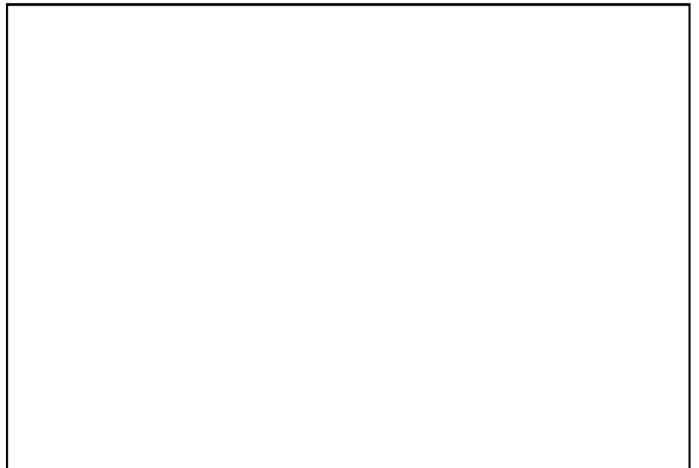
Practice Regular Meditation



Keep a Journal



Share Your Feelings with a friend/Partner/Therapist



Coping with Grief and Loss

**WHAT TYPE OF LOSS ARE
YOU TRYING TO HEAL FROM?**

**HOW DO YOU FEEL
ABOUT WHAT HAPPENED?**

**WHAT WORDS, EVENTS, ITEMS, PEOPLE CAN TRIGGER YOUR FEELING OF GRIEF
AND LOSS? HOW SO?**



Daily Reflection

DATE: _____

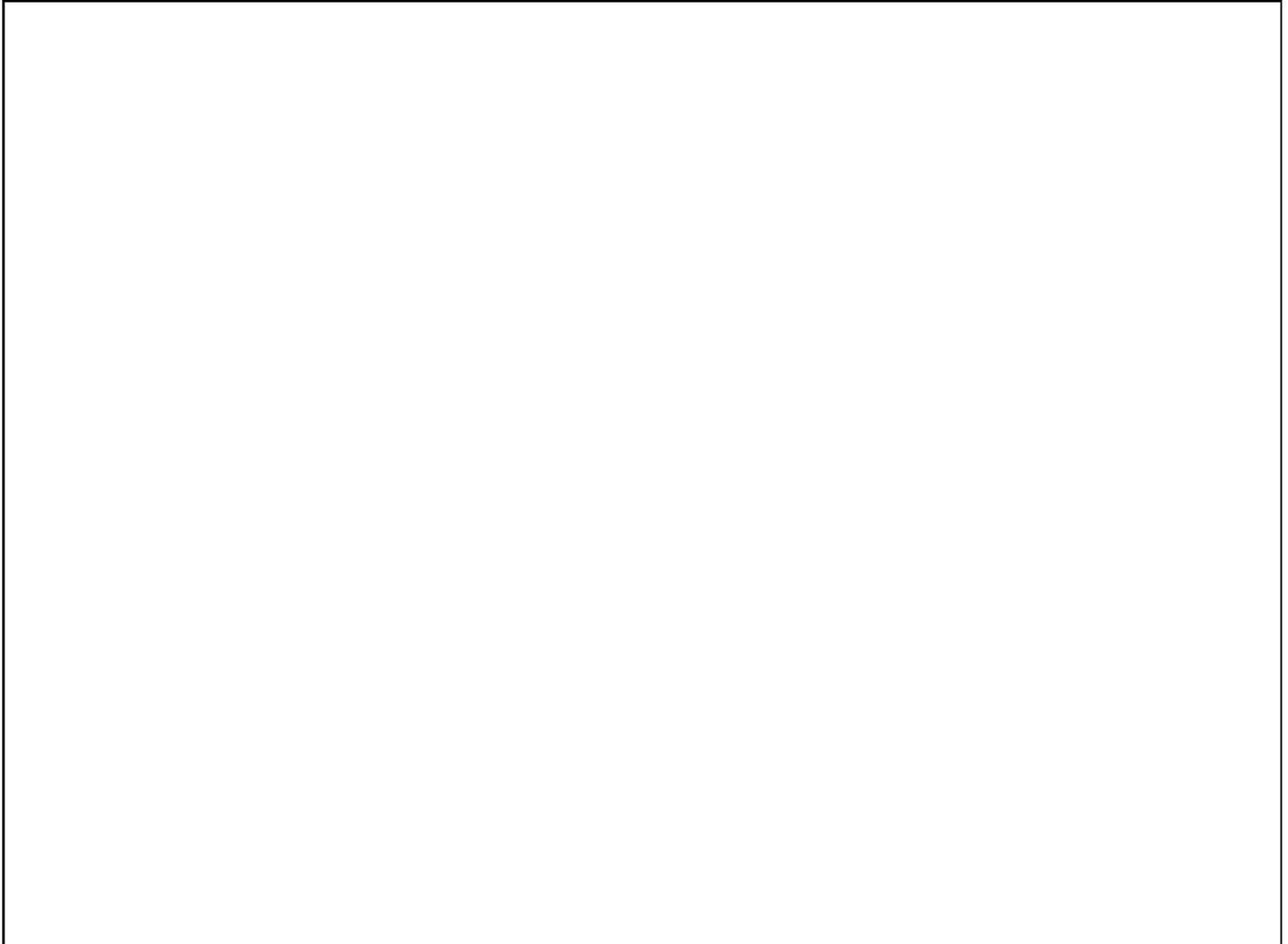
5 things that made me feel happy today

5 small successes I had today were

Today I had fun when

Trigger Processing

**WHEN TRIGGERED, WHERE ARE YOU
HOLDINGS STRESS AND TENSION?**

A large, empty rectangular box with a thin black border, intended for the user to write their response to the question above.

PHYSICAL SYMPTOMS MANIFESTED BECAUSE OF MY EMOTIONAL STRESS

A large, empty rectangular box with a thin black border, intended for the user to write their response to the question above.

Weekly Self Care

Week Of: _____

Mon

Tue

Wed

Thu

Fri

Sat

Sun

Anger Management

DETERMINE WHETHER YOUR ANGER STEMS FROM PAST TRAUMA, UNRESOLVED EMOTIONAL, ISSUES, MENTAL, ILLNESS, OR AN UNHEALTHY SITUATION THAT NEEDS CHANGING

WHEN YOUR TEMPER BEGIND TO FLARE, MENTALLY CHALLENGE YOURSELF BEFORE BY ASKING THESE QUESTIONS:

WHAT IS THE SOURCE OF MY IRRITATION?

WHAT IS THE DEGREE OF MY ANGER?

WHAT IS THE OTHER PERSONS ACTUAL ROLE IN THIS SITUATION?

Overcoming Fear

HOW IS THIS HOLDING YOU BACK IN LIFE?

WHAT IS YOUR GREATEST FEAR?

HOW WAS THIS FEAR DEVELOPED?

LIST OLD FEARS YOU ARE READY TO PUT BEHIND

Self Love

SELF LOVE POSITIVE AFFIRMATION

WHAT DO YOU HATE SO MUCH ABOUT YOURSELF? WHAT IS THE REASON BEHIND THE HATRED?

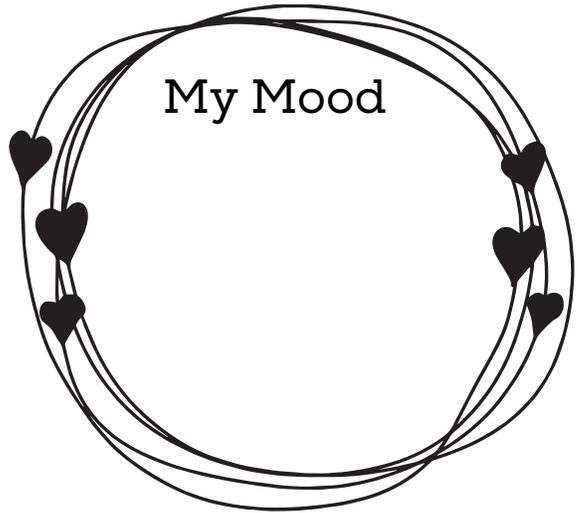
CAN THAT FEELING BE CHANGED ? HOW?

WRITE A LETTER TO YOURSELF TO EXPRESS THE UNCONDITIONAL LOVE YOU'VE IN STORE FOR YOURSELF

Mood Tracker

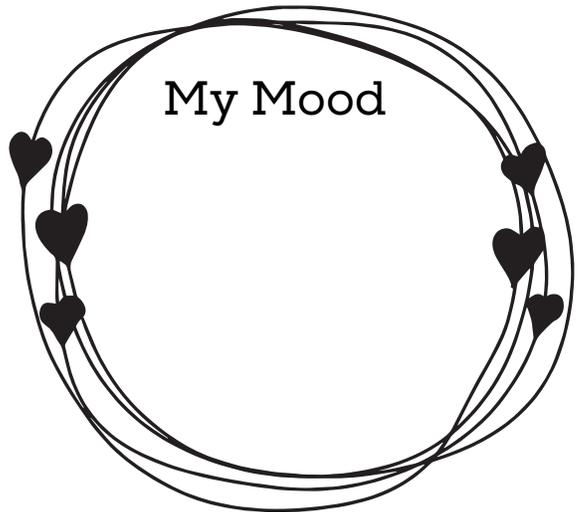
Date: _____

Time: _____



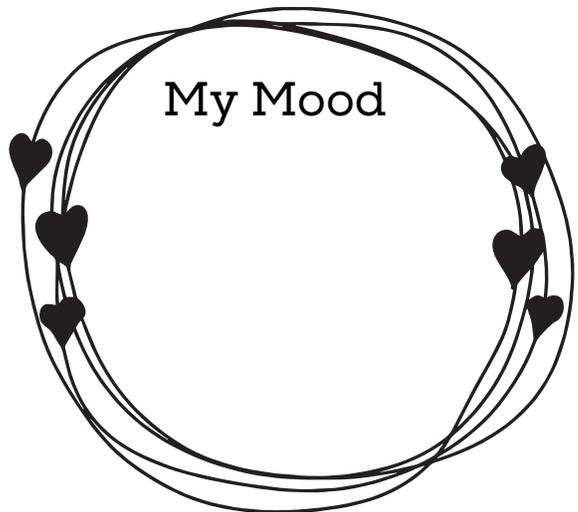
Date: _____

Time: _____



Date: _____

Time: _____



Decatastrophizing

WORKSHEET

What "catastrophe" is bothering you?

What is the likelihood of the catastrophe occurring?

In the past, has this ever happened before?

How frequently does this occur in real life?

How terrible would it be if your catastrophe really occurred?

What would the worst possible outcomes look like?

If the worst happens, what will you do?

Who or what could help you?

What could you do in advance to prepare you?

What skills do you already have that can help you through it?

Discover My Authentic Self

**I AM SPEAKING MY OPINIONS
HONESTLY IN A HEALTHY WAY**

**I ALLOW MYSELF TO BE
VULNERABLE & OPEN HEARTED**

**I AM LISTENING TO THE INNER
VOICE GUIDING ME FORWARDS**

**I AM FULLY PRESENT WHEN
I WORK OR GO THROUGH
LIFE EXPERIENCES**

I AM PURSUING MY PASSIONS

**I AM MAKING DECISIONS THAT
ARE ALIGNED WITH MY PRINCIPLES,
VALUES AND BELIEFS**

**I SET MY BOUNDARIES
AND I REPECT THEM**

**I WALK AWAY FROM TOXIC
SITUATIONS & RELATIONSHIPS**

Physical Coping skills for anger management

DO YOGA

PUSH WALL

BOUNCE BALL

**PRESS DOWN ON
MY SEAT**

**SQUEEZE A
STRESS BALL**

**STRETCH
MY BODY**

PUNCH A PILLOW

**PRESS MY PALMS
TOGETHER**

**RIP PAPER INTO
SMALL PIECES**

Worry Coping Cards

Take Deep Breaths

**Be in the
Present Moment**

Draw Your Worries

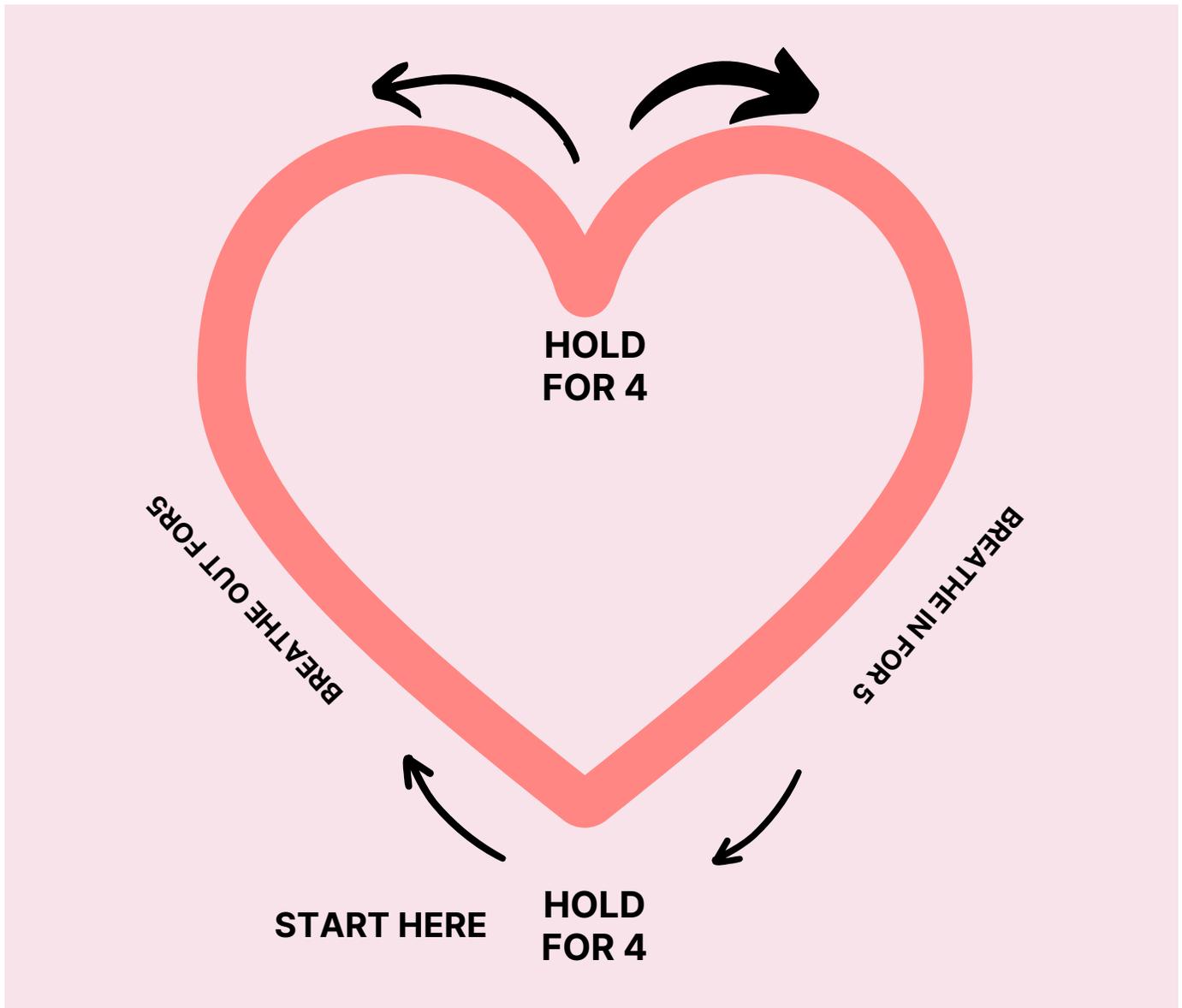
Go to Your Favorite Place

Journal Your Thoughts

**Share Your Thoughts with
a friend/Partner/Therapist**

Hearth Breathing

**USE THIS BREATHWORK TECHNIQUE TO
HELP YOU COPE WITH TRIGGERS**



**THINK OF SOMEONE OR SOMETHING YOU LOVE
WHILE PRACTICING THIS BREATHING TECHNIQUE**

The Balloon Mental Exercise

For When you Start Feel Worried or Anxious

Step 1 :
Write down
what
worries
you in
the
balloons



Step2 :
Close
your
eyes &
imagine
them
floating
away

Step 3:

Come back to your breaths and
repeat steps 1 and 2 as needed

Building My Dream Life

REGARDLESS OF WHAT HAD HAPPENED, YOU DESERVE TO LIVE A LIFE FULL OF LOVE, JOY, PEACH, HEALTH, ABUNDANCE AND HAPPINESS

MY NEW MORNING ROUTINE I AM COMMITTING TO

MY NEW EVENING ROUTINE I AM COMMITTING TO

WHAT ASPECTS OF MY CURRENT LIFE DO I WANT TO LEAVE BEHIND AS I MOVE INTO THE FUTURE?

My Vision Board

HEALTH

FAMILY

FINANCE

FRIENDSHIP

LOVE

CAREER

KNOWLEDGE

TRAVEL

HOBBIES

Monthly Reflections

HOW WAS THIS MONTH?



AREAS OF IMPROVMENT

CHALLENGES

**MY FAVORITE MOMENT
OF THIS MONTH**

WHAT WENT WELL

HOW TO SET UP FOR SUCCESS NEXT MONTH

Monthly Goal Planning

GOALS

--

REWARDS FOR ACHIEVING MY GOALS

--

WHY IS ACHIEVING THESE GOALS IMPORTANT TO ME?

--

WHAT STEPS DO I NEED TO TAKE TO ACCOMPLISH MY GOALS?

--

Weekly Task Planning

TASKS THAT NEED TO GET DONE

TASK DEADLINES

STEPS THAT NEED TO BE TAKEN

REWARDS FOR COMPLETING THE TASKS

PLANS FOR NEXT WEEK

My Good Habits

GOOD HABITS TO MAINTAIN OR DEVELOP

--

BAD HABITS TO REDUCE OR ELIMINATE

--

ACTION PLAN TO MAINTAIN/DEVELOP MY GOOD HABITS

--

REWARDS FOR MAINTAINING MY GOOD HABITS

--

