

My Calm My Capacity Individual Workbook

A gentle way to use this resource

Begin anywhere. Read one section at a time, choose only what fits, and skip, adapt, pause, or stop as needed. Try one practice before adding another. Reflection is an invitation, not a requirement.

Created by Michelle D. Elder, MSW, LMHC | My Reflective Collective

Educational wellness material. Not therapy, diagnosis, medical advice, crisis care, or a substitute for individualized professional support.

Before you begin

Take a moment to notice where you are starting. There is no correct answer and no requirement to complete every prompt.

What is most present?	What would feel supportive?
[ ] Tension or restlessness [ ] Heavy emotion [ ] Numbness or shutdown [ ] Racing thoughts [ ] Low energy [ ] Something else: _____	[ ] More steadiness [ ] More clarity [ ] Comfort or rest [ ] A practical next step [ ] Connection or support [ ] Something else: _____

A simple rhythm

1. Notice	Name what is happening without judging it.
2. Choose	Select one prompt or practice that fits your energy and circumstances.
3. Try	Use it gently for a clear amount of time. Smaller still counts.
4. Check	Notice whether you feel even slightly steadier, clearer, safer, or less alone.

Low-energy option

Read only the headings. Circle or note one sentence that feels useful. Then choose one action that takes five minutes or less. You can return later; stopping is allowed.

A trauma-informed educational wellness worksheet for reflection, choice, self-care, and support.

Use this at your own pace. Skip, adapt, pause, or stop. You are allowed to choose what fits your body, culture, privacy, energy, safety, access needs, and real-life limits today.

A printable reflection and practice resource

MY CALM, MY CAPACITY

A Trauma-Informed Workbook for Emotional Regulation, Overwhelm & Nervous-System

Care

A compassionate Regulation does not mean being calm, agreeable, productive, or positive all the time. aim It means having enough safety and flexibility to notice what is happening, care for your body, choose among available responses, and recover after stress.

This workbook offers options rather than commands. Breathwork, stillness, eye closure, body awareness, touch, and visualization do not help everyone. You remain the expert on what feels supportive, neutral, inaccessible, or unsafe.

NOTICE - ORIENT - SUPPORT - RECOVER

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PART FOUNDATION

Regulation Without Blame

Your nervous system is constantly interpreting cues of safety, danger, demand, connection, and uncertainty.

Responses may happen

before conscious thought.

NOT A CHARACTER Fight, flight, freeze, shutdown, appease, attach, and submit responses are attempts to FLAW protect. They can make sense in context and still have impacts you want to address.

Core permissions

-] I may need time. [ ] I may use movement.
-] I may avoid eye closure. [ ] I may decline touch.
-] I may need less input. [ ] I may ask for company.
-] I may stop an exercise. [ ] I may seek professional care.

I was taught that strong emotion meant:

A protective response I want to understand:

Regulation would help me have more choice around:

THERAPEUTIC PAUSE FOR SELF-REFLECTION

Choice first: You may write, draw, sit quietly, skip this prompt, or return later. You do not need to force insight or disclosure.

1. Orient: If comfortable, notice the room, the support beneath you, and one

neutral or pleasant detail. Let your breathing be natural.

2. Notice: What state am I in right now, and how certain am I?

3. Respond with care: Try: "My body is responding for a reason, even if I do not

know the reason yet."

4. Choose: Choose the least demanding supportive option available.

Remember: Growth can include resting, grieving, asking for help, changing direction, and recognizing what you have already survived.

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PART 1

My Workable Window

Within a workable window, emotion and stress are present but you retain some access to language, perspective, connection, and choice.

ABOVE THE Possible signs: racing heart, panic, anger, urgency, rapid speech, agitation, tunnel WINDOW vision, sensory sensitivity, or feeling driven to act.

BELOW THE Possible signs: numbness, heaviness, blank mind, disconnection, collapse, few words, WINDOW slowed movement, or feeling far away.

WITHIN THE Possible signs: flexible attention, enough body connection, ability to pause, curiosity, WINDOW access to words or another communication method, and capacity to consider options.

My above-window signs:

My below-window signs:

My workable-window signs:

THERAPEUTIC PAUSE FOR SELF-REFLECTION

2. Notice: Where might I be now: above, below, within, moving between, or

unsure?

3. Respond with care: Say: "Naming a state is information, not a judgment."

4. Choose: Select support for the state you may be in; reassess rather than

demanding an instant shift.

PART 2

Triggers, Stressors & Vulnerability Factors

A response may be influenced by the current cue plus sleep, pain, hunger, hormones, sensory load, trauma reminders, discrimination, illness, conflict, or accumulated demands.

Factors that lower my capacity

-] Poor sleep [ ] Hunger/dehydration
-] Pain/illness [ ] Hormonal changes
-] Sensory overload [ ] Uncertainty
-] Conflict [ ] Time pressure
-] Crowds [ ] Substances/withdrawal
-] Trauma reminders [ ] Bias or exclusion
-] Caregiving [ ] Too many decisions

A common cue or trigger:

What increases its impact:

What I tend to believe in that moment:

What helps me recognize present-day context:

CONTEXT MATTERS Reducing vulnerability is not always possible. The goal is to understand load, make accommodations where available, and avoid blaming yourself for having limits.

THERAPEUTIC PAUSE FOR SELF-REFLECTION

2. Notice: What was already in my "stress cup" before this moment?

3. Respond with care: Offer: "This response has context. I can respond to the full

load, not only the final trigger."

4. Choose: Address one basic need, reduce one demand, or add one support.

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PART 3

Orienting to the Present

Orienting uses present-day sensory information to help the brain update where and when you are. It should be invitational, not forced.

Options to experiment with

-] Look for exits and doors [ ] Name the date/location

-] Notice three colors [ ] Find one neutral object

-] Feel chair or floor support [ ] Listen for near/far sounds

-] Hold a familiar item [ ] Read a grounding card

-] Turn on a light [ ] Ask a trusted person to orient you

A neutral or pleasant detail I can notice:

Present-day facts that help me:

An object, phrase, or image that supports orientation:

What makes sensory grounding harder:

IF SENSORY FOCUS Stop. Open your eyes if closed. Move, change rooms, use practical tasks, talk with INCREASES someone safe, or choose an external activity. Grounding is not one-size-fits-all.

DISTRESS

THERAPEUTIC PAUSE FOR SELF-REFLECTION

2. Notice: Can I locate one present-day cue without searching for calm?

3. Respond with care: Say: "I am here enough to notice ___."

4. Choose: Try one external cue for 10-30 seconds, then decide whether to

continue.

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PART 4

Breathing, Movement & Physical Regulation

The body may need discharge, rhythm, pressure, rest, or medical care. A slower breath is only one option.

Breathing options - only if helpful

-] Natural breath observation [ ] Longer exhale

-] Humming [ ] Pursed-lip exhale

-] Counted breathing [ ] No breath focus Movement and pressure options

-] Walk [ ] Shake hands/arms

-] Stretch [ ] Push against wall

-] Carry something safe [ ] Rock/sway

-] Dance [ ] Weighted blanket

-] Self-hold if comfortable [ ] Progressive release

Movement that feels organizing:

Pressure or touch that helps - or does not:

Medical, pain, mobility, or access considerations:

SAFETY NOTE Stop if an exercise causes dizziness, pain, numbness, panic, breathing difficulty, or other concerning symptoms. Use options appropriate to your health and seek medical guidance when needed.

THERAPEUTIC PAUSE FOR SELF-REFLECTION

2. Notice: Does my body want activation, settling, protection, space, or support?

3. Respond with care: Try: "I do not need to make my body perform calm."

4. Choose: Choose a comfortable dose and stop while it still feels manageable.

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PART 5

Emotions Are Information

Emotions can signal meaning, needs, boundaries, losses, threats, injustice, connection, or change. They are not commands and do not need to disappear before you act wisely.

Emotion check

-] Anger [ ] Fear

-] Sadness [ ] Shame

-] Guilt [ ] Joy

-] Relief [ ] Disgust

-] Loneliness [ ] Overwhelm

-] Numbness [ ] Uncertainty

The emotion or absence of emotion I notice:

What happened before it:

What it may be communicating:

What action urge comes with it:

A response aligned with my values:

VALIDATE, THEN "It makes sense that I feel ___ given ___." Validation acknowledges experience.

CHOOSE Choice asks, "What response protects my values, safety, and longer-term needs?"

_____

_____

THERAPEUTIC PAUSE FOR SELF-REFLECTION

2. Notice: Can this feeling be present without becoming my whole identity or

deciding my next action?

3. Respond with care: Say: "This feeling is real, temporary or changing, and worthy of care."

4. Choose: Name one need and one values-aligned response.

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PART 6

Overwhelm & Capacity Triage

When capacity is low, prioritizing can be more therapeutic than adding coping tasks.

_____

_____

Sort the load

MUST - safety, medication, food, urgent care, essential deadline:

SHOULD - important but adjustable:

CAN WAIT:

CAN BE SHARED, SIMPLIFIED, OR DROPPED:

Low-capacity supports

-] Reduce decisions [ ] Use prepared food
-] Cancel nonessential task [ ] Ask for practical help
-] Lower household standard [ ] Use written communication
-] Silence notifications [ ] Protect sleep
-] Seek urgent/professional support [ ] Do one next thing

THERAPEUTIC PAUSE FOR SELF-REFLECTION

2. Notice: What is the true priority, and what pressure only feels urgent?

3. Respond with care: Offer: "Capacity is a condition, not a moral score."

4. Choose: Choose no more than three actions and identify what will not happen today.

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PART 7

Shutdown, Freeze & Going Blank

Shutdown can affect speech, memory, movement, emotion, and connection. Pressure to explain may deepen the response.

My shutdown signs

-] Blank mind [ ] Few/no words
-] Heavy body [ ] Numbness
-] Looking away [ ] Extreme fatigue
-] Unable to decide [ ] Feeling unreal/far away
-] Compliance without engagement [ ] Memory gaps

What tends to happen before shutdown:

What others may misunderstand:

What helps:

What makes it worse:

Communication cards

-] "I cannot talk yet." [ ] "Please ask one question."
-] "I need quiet company." [ ] "No touch."
-] "Please write it down." [ ] "I will return at ___." SUPPORT Use fewer words, slower pacing, predictable choices, warmth without pressure, SHUTDOWN WITH reduced sensory input, water/food if appropriate, and time. Do not demand eye LESS DEMAND contact or immediate disclosure.

THERAPEUTIC PAUSE FOR SELF-REFLECTION

2. Notice: What is the smallest sign of presence or choice available?

3. Respond with care: Say: "Not speaking does not mean I do not care."

4. Choose: Choose one communication cue or environmental adjustment.

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PART 8

Anger, Activation & Safe Discharge

Anger may protect dignity, boundaries, grief, fear, or injustice. It deserves validation and safe limits.

My early anger signals:

What anger may be protecting:

My unsafe or harmful urges:

Actions that discharge without harm:

Safer options

-] Leave and name return time [ ] Fast walk/run if appropriate
-] Push wall [ ] Rip scrap paper
-] Cold water [ ] Write without sending
-] Call safe support [ ] Reduce access to weapons/items
-] Seek crisis support [ ] Repair after regulation ANGER IS VALID; Feelings do not justify threats, intimidation, reckless driving, coercion, property HARM IS NOT destruction, stalking, or violence. Create distance and seek immediate support when safety is at risk.

THERAPEUTIC PAUSE FOR SELF-REFLECTION

2. Notice: What boundary, hurt, fear, or injustice is underneath the heat?

3. Respond with care: Offer: "My anger matters, and I am responsible for what I

do with it."

4. Choose: Choose distance, safe discharge, support, or emergency intervention

based on risk.

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PART 9

Anxiety, Panic & Uncertainty

Anxiety can overestimate threat and underestimate coping, while also responding to real uncertainty or danger.

What anxiety does

-] Scans for danger [ ] Demands certainty
-] Rehearses outcomes [ ] Avoids sensations
-] Seeks reassurance [ ] Rushes decisions
-] Checks repeatedly [ ] Narrows attention

The feared outcome:

What is known vs. unknown:

What is within my control:

What support would help me tolerate uncertainty:

PANIC SUPPORT Orient externally, loosen restrictive clothing, use a comfortable breath rather than forcing deep breaths, reduce stimulation, remind yourself that symptoms can crest and change, and seek medical care for new or concerning symptoms.

THERAPEUTIC PAUSE FOR SELF-REFLECTION

2. Notice: Am I solving a present problem, preparing reasonably, or trying to

eliminate all uncertainty?

3. Respond with care: Say: "I can take the next appropriate step without knowing

everything."

4. Choose: Choose one action, one limit on checking, and one recovery activity.

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PART 10

Sensory Needs, Neurodiversity & Accessibility

Regulation strategies should respect neurotype, disability, communication access, culture, pain, and sensory profile.

Sensory inventory

-] Light [ ] Sound

-] Smell [ ] Texture

-] Temperature [ ] Crowding

-] Movement [ ] Interoception

-] Eye contact [ ] Touch

-] Language load [ ] Transitions

Input I seek:

Input I avoid or need less of:

A sensory support that helps:

A communication accommodation:

An environment change I can request:

ACCESS IS NOT A Headphones, movement, reduced light, written instructions, breaks, predictable REWARD transitions, AAC, interpretation, or fewer simultaneous demands may support participation and dignity.

THERAPEUTIC PAUSE FOR SELF-REFLECTION

2. Notice: Have I mistaken an access need for weakness, rudeness, or failure?

3. Respond with care: Offer: "My nervous system does not have to look typical to

deserve support."

4. Choose: Identify one accommodation to use or request.

PART 11

Co-Regulation & Support From Others

Humans often regulate in relationship. Co-regulation is offered with consent; it is not rescuing, controlling, or requiring closeness.

Support menu

-] Quiet presence [ ] Practical help
-] Reflective listening [ ] Reassurance
-] Space with return plan [ ] Walk together
-] Food/water [ ] Reduced demands
-] Help orienting [ ] Professional support
-] No touch [ ] Asked-before touch

When activated, I want others to:

Please do not:

Words that feel validating:

How I signal I need help:

How I signal I need space:

ASK BEFORE "Would you like company, space, practical help, listening, grounding, or something HELPING else?" A person may decline a technique without rejecting the relationship.

THERAPEUTIC PAUSE FOR SELF-REFLECTION

2. Notice: Do I want connection, distance, or help deciding?

3. Respond with care: Say: "I can receive support without surrendering choice."

4. Choose: Share one preference with a safe-enough person or prepare a support

card.

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PART 12

Coping: Helpful, Costly & Harm-Reducing

Most coping strategies meet a need. Understanding function helps build alternatives without shame.

Strategies I may use

-] Avoidance [ ] Overworking

-] Food restriction/overeating [ ] Substances

-] Scrolling/gaming [ ] Isolation

-] Shopping [ ] Self-criticism

-] People-pleasing [ ] Exercise

-] Creative expression [ ] Connection

The strategy and what it helps me escape, feel, or control:

Short-term benefit:

Longer-term cost or risk:

A safer or less costly alternative serving the same function:

Support I may need:

HARM REDUCTION Change can begin by increasing safety, reducing frequency or intensity, avoiding dangerous combinations, adding support, and preparing for emergencies. Seek qualified help for substance use, eating concerns, self-harm, or other high-risk coping.

THERAPEUTIC PAUSE FOR SELF-REFLECTION

2. Notice: What need is this coping strategy faithfully trying to meet?

3. Respond with care: Try: "I can reduce harm without waiting for perfect

readiness."

4. Choose: Choose one realistic safety step and one source of support.

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PART 13

Recovery After a Hard Moment

Recovery may take minutes, hours, or longer. Aftercare helps the system complete stress and rebuild safety.

Aftercare options

-] Hydration/food [ ] Sleep/rest

-] Shower/change clothes [ ] Movement

-] Quiet [ ] Connection

-] Medical care [ ] Repair impact

-] Reduce decisions [ ] Journal briefly

-] Comfort item [ ] Return to routine

What happened - without self-attack:

What my system needed:

What helped:

What impact may need repair:

What I want available next time:

POST-STRESS The period after activation is not the best time for a full character review. Stabilize COMPASSION first. Reflect when enough capacity returns.

THERAPEUTIC PAUSE FOR SELF-REFLECTION

2. Notice: What would recovery look like if it were care rather than punishment?

3. Respond with care: Offer: "I had a hard response; I am still worthy of support

and responsible repair."

4. Choose: Choose one body need, one practical need, and one relational need.

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PART 14

My Personalized Regulation Menu

Create options for different states and levels of capacity.

WHEN ACTIVATED - external grounding, movement, space, support:

WHEN SHUT DOWN - gentle activation, low demand, communication:

WHEN ANXIOUS - uncertainty support, limits on checking:

WHEN ANGRY - distance, safe discharge, boundary:

WHEN OVERWHELMED - triage and reduced demands:

WHEN RECOVERING - rest, nourishment, repair:

Avoid or use carefully

Techniques, settings, people, or cues that increase distress:

Medical/access considerations:

THERAPEUTIC PAUSE FOR SELF-REFLECTION

2. Notice: Does this menu offer genuine choices for my different states?

3. Respond with care: Say: "A strategy that does not help is information, not

failure."

4. Choose: Place a short version somewhere accessible and share only with

chosen supports.

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PART 15

My Capacity & Care Plan

A flexible plan for early recognition, support, safety, and recovery.

My earliest signs:

My high-risk signs:

What I can do independently:

Who I can contact:

Professional or crisis resources:

What I want supporters to know:

PERSONAL I will practice listening to capacity before it becomes collapse. I will use choice rather COMMITMENT than force, seek support when needed, repair harm without self-destruction, and remember that regulation is a practice - not a measure of worth.

THERAPEUTIC PAUSE FOR SELF-REFLECTION

2. Notice: What support am I more willing to allow after completing this

workbook?

3. Respond with care: Thank your nervous system for its effort, even where you

want new options.

4. Choose: Choose one accessible practice and one person or resource to add to

your plan.

Signature: _____ Date: _____

Educational-wellness disclaimer

If you or someone else is in immediate danger, call 911. In the United States, call or text 988 for the Suicide & Crisis Lifeline.

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SAFETY, PRIVACY & EDUCATIONAL USE

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If there is immediate danger or a medical emergency: Call 911 in the United States or use your local emergency number. For U.S. suicide or mental-health crisis support, call or text 988. For relationship-safety support, contact the National Domestic Violence Hotline at 800-799-7233, text START to 88788, or visit TheHotline.org from a safer device when possible. _____ _____ Privacy and safer searching If someone may monitor your device, accounts, internet connection, location, downloads, or browser activity, consider using a safer device and a trusted network. Private browsing may reduce locally saved history but does not make activity invisible. Clearing history can also be noticed. A website Quick Exit button changes the page; it cannot erase browser, download, router, account, employer, school, carrier, or device records. Choose only steps that feel safer in your situation.

Do not store identifying or safety-sensitive answers where another person may find them.

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It does not replace care from a licensed clinician, healthcare professional, attorney, trained advocate, emergency service, or other qualified professional. Laws, court procedures, services, and risks vary by location and circumstance.

Choice, pacing, and inclusion You may skip, change, discuss, dictate, draw, pause, or stop any activity. No exercise can determine what you experienced, diagnose a condition, prove a legal claim, guarantee safety, or tell you whether to stay, leave, report, reconcile, forgive, or pursue court action. Adapt language and activities for culture, identity, disability, neurotype, age, literacy, sensory needs, and personal preference. Automatic translation can make mistakes; confirm legal, medical, emergency, and safety-critical wording with a qualified person.

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EDUCATIONAL RESOURCE - NOT THERAPY OR INDIVIDUALIZED CARE

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Supportive practices and reminders

Trauma-informed choice

You are in charge of pace, privacy, and participation. Keep your eyes open if that feels safer. Change the words, position, movement, or environment. Skip any prompt that increases distress. You never have to describe a traumatic experience to benefit from grounding or reflection.

A one-minute mindfulness pause

Notice one point of support beneath you. Look around and name three neutral things you see. Notice one sound and one body sensation without trying to change either. Ask, 'What would support me in the next few minutes?' Choose the smallest workable response.

Believable affirmations

Choose language your mind can accept. Try: 'I can take one step at a time.' 'My needs and boundaries matter.' 'I am allowed to pause.' 'I can ask for support.' 'This moment is difficult, and it will not always feel exactly like this.' Edit any statement until it feels honest and respectful.

Practical tips

Pair reflection with water, food, movement, rest, medication as prescribed, or contact with a safe person when needed. Save the most helpful page where it is easy to find. Revisit the resource when you are relatively steady so the choices feel familiar during harder moments.

When more support is appropriate

A worksheet cannot provide emergency care, diagnosis, or individualized treatment. Consider a qualified health or mental-health professional when distress is intense, persistent, worsening, affecting daily functioning, or connected with safety concerns. In immediate danger, contact local emergency services or a crisis service available in your country.

Integrate and choose your next step

Pause after reading. More information is not always more helpful; the goal is to leave with one choice you can actually use.

What stood out?

_____

_____

What is one kind, realistic next step?

_____

_____

What support, boundary, or adaptation would help?

_____

_____

If this did not help

You did not fail. Try making the step smaller, changing from a thinking practice to a body or sensory practice, checking basic needs, or involving a safe person. Strong, persistent, or worsening distress may need professional or crisis support beyond a worksheet.