



# Trauma Processing Journal

Grounding Exercises and  
Mood Tracking Prompts

[laureloakstherapy.com](http://laureloakstherapy.com)

# Daily Planner

DATE \_\_\_\_\_



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 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

## **STEP 3: IDENTIFY THE TYPE OF NEGLECT YOU EXPERIENCED**

**Take a moment to identify the type of neglect you experienced growing up—whether it was a lack of love, care, compassion, or parental protection. Allow yourself to acknowledge that void and truly feel its impact.**

-----	<div style="border: 1px solid black; width: 100%; height: 100%;"></div>
-----	
-----	
-----	
-----	
-----	<div style="border: 1px solid black; width: 100%; height: 100%;"></div>
-----	
-----	
-----	
-----	
-----	<div style="border: 1px solid black; width: 100%; height: 100%;"></div>
-----	
-----	
-----	
-----	



# 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

## STEP5: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**

--

**FINANCE**

--

**FAMILY**

--

**HEALTH**

--

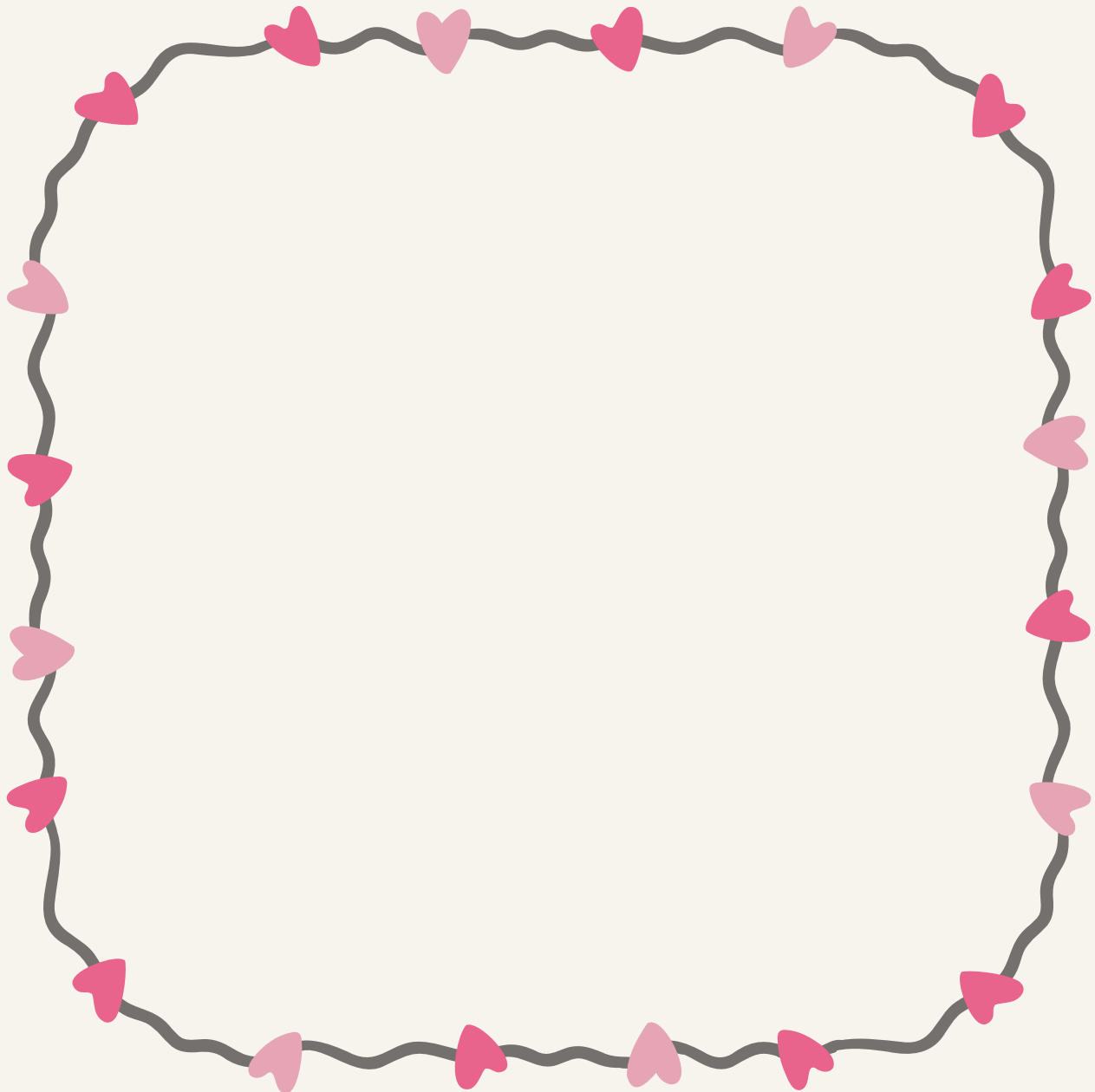
**FRIENDSHIP**

--

# 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.**



# Working Towards Healing

**WHAT TRAUMA DO I NEED TO HEAL FROM?**

**STEPS THAT I NEED TO TAKE TO HEAL**

**THINGS I HAVE HEALED FROM & HOW**

# 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

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

## 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?**

---

---

---

---

---

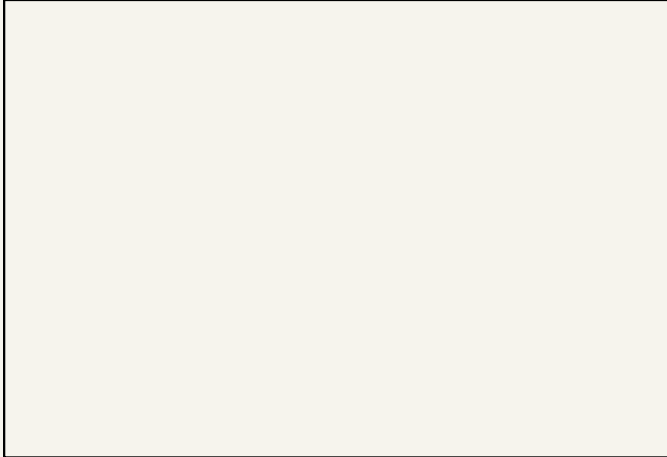
---

---

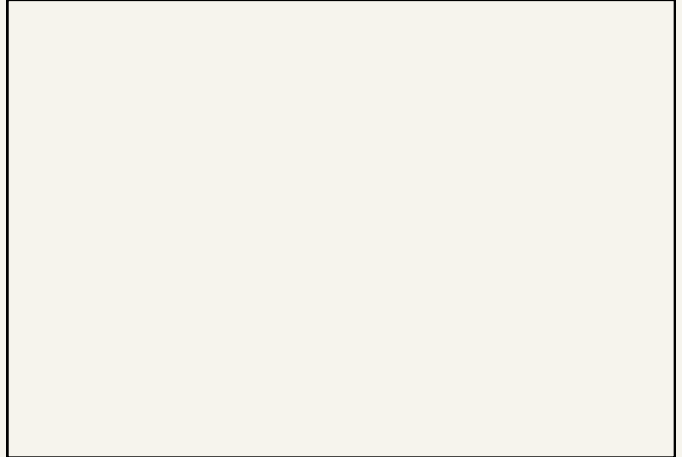
---

# Trigger Coping Cards

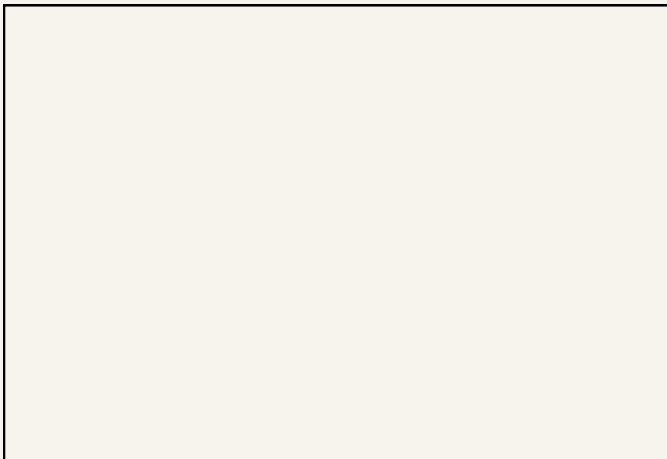
**Take Deep Breaths**

A large, empty rectangular box with a black border, intended for writing notes or instructions related to the coping strategy of taking deep breaths.

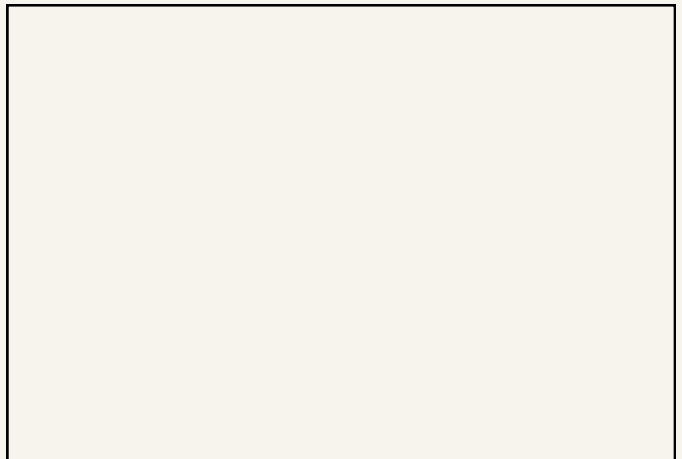
**Become Aware of Your Triggers**

A large, empty rectangular box with a black border, intended for writing notes or instructions related to the coping strategy of becoming aware of triggers.

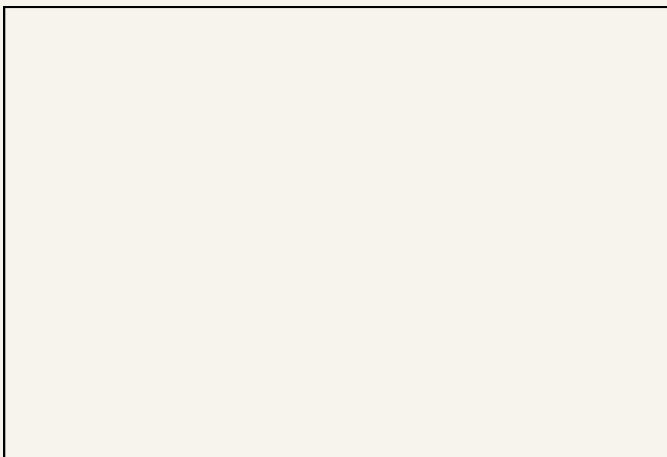
**Plan a Coping Strategy for your Triggers**

A large, empty rectangular box with a black border, intended for writing notes or instructions related to the coping strategy of planning a coping strategy for triggers.

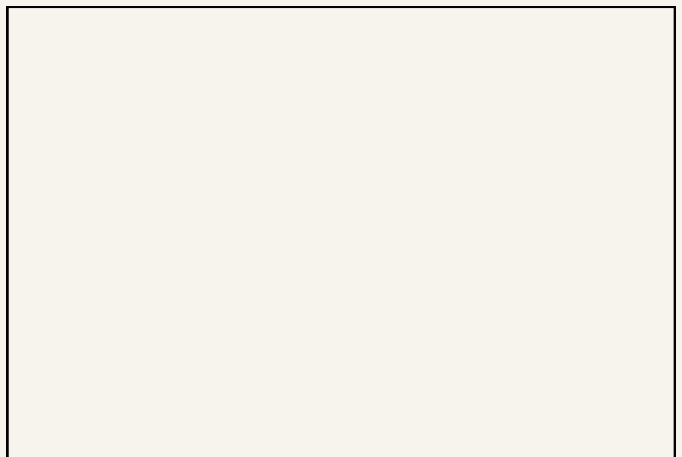
**Practice Regular Meditation**

A large, empty rectangular box with a black border, intended for writing notes or instructions related to the coping strategy of practicing regular meditation.

**Keep a Journal**

A large, empty rectangular box with a black border, intended for writing notes or instructions related to the coping strategy of keeping a journal.

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

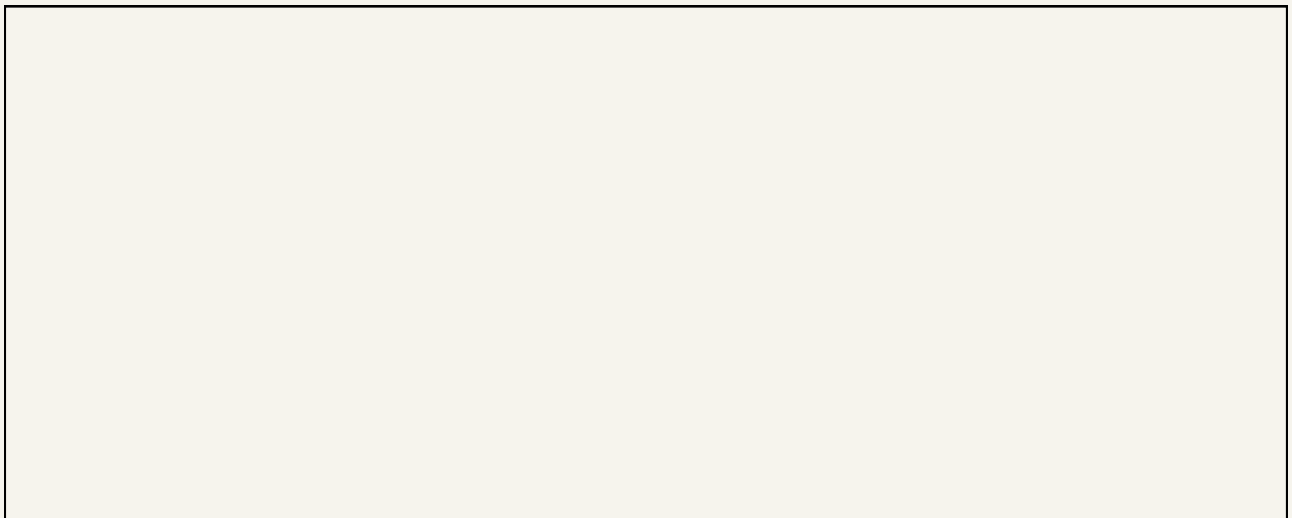
A large, empty rectangular box with a black border, intended for writing notes or instructions related to the coping strategy of sharing feelings with a friend, partner, or therapist.

# 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**

---

---

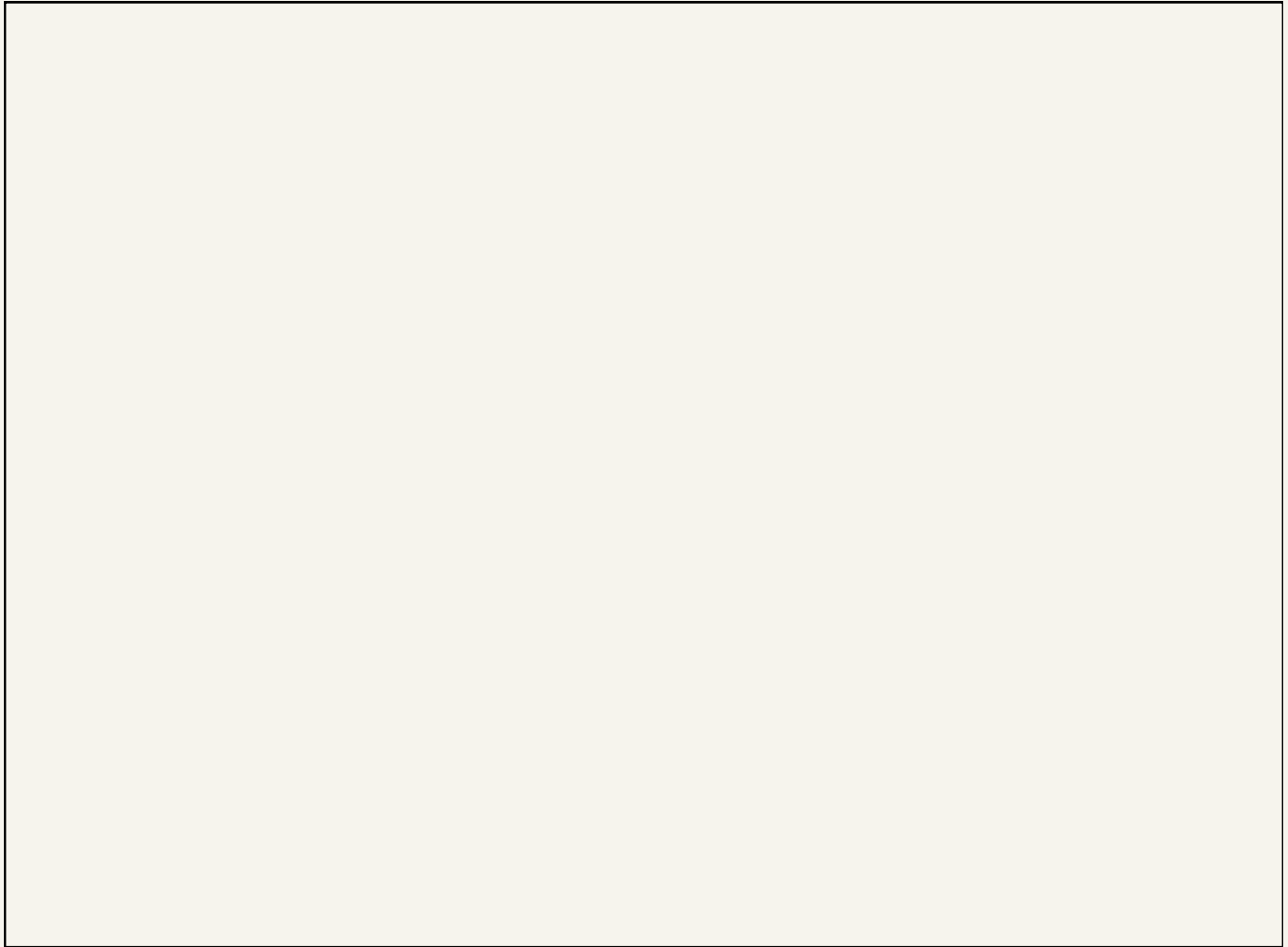
---

---

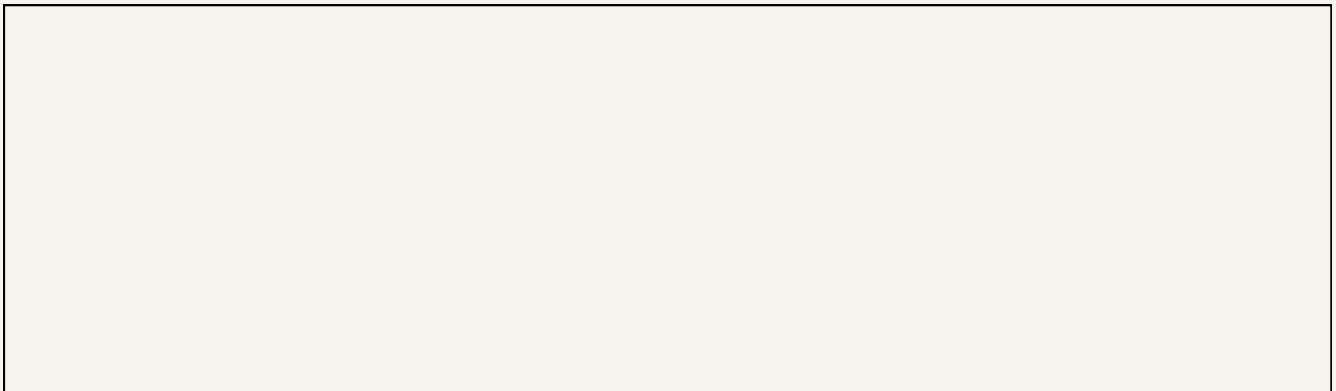


# Trigger Processing

**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: \_\_\_\_\_

<b>Mon</b>	
<b>Tue</b>	
<b>Wed</b>	
<b>Thu</b>	
<b>Fri</b>	
<b>Sat</b>	
<b>Sun</b>	

# 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? WHAR 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**

---

---

---

---

---

---

---

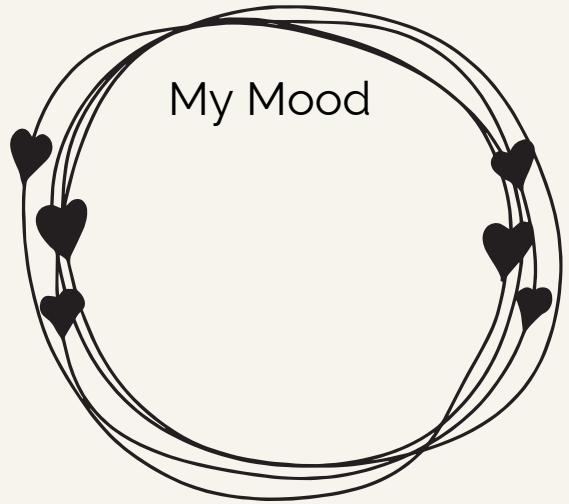




# Mood Tracker

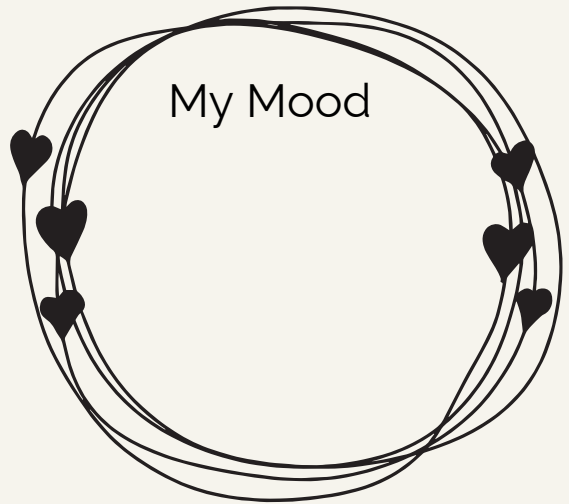
Date: \_\_\_\_\_

Time: \_\_\_\_\_



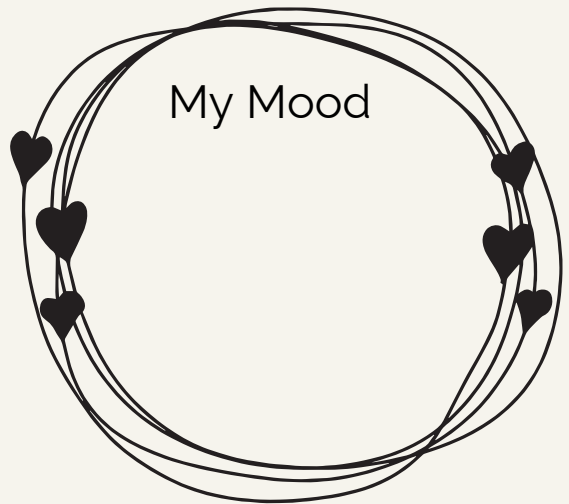
Date: \_\_\_\_\_

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**

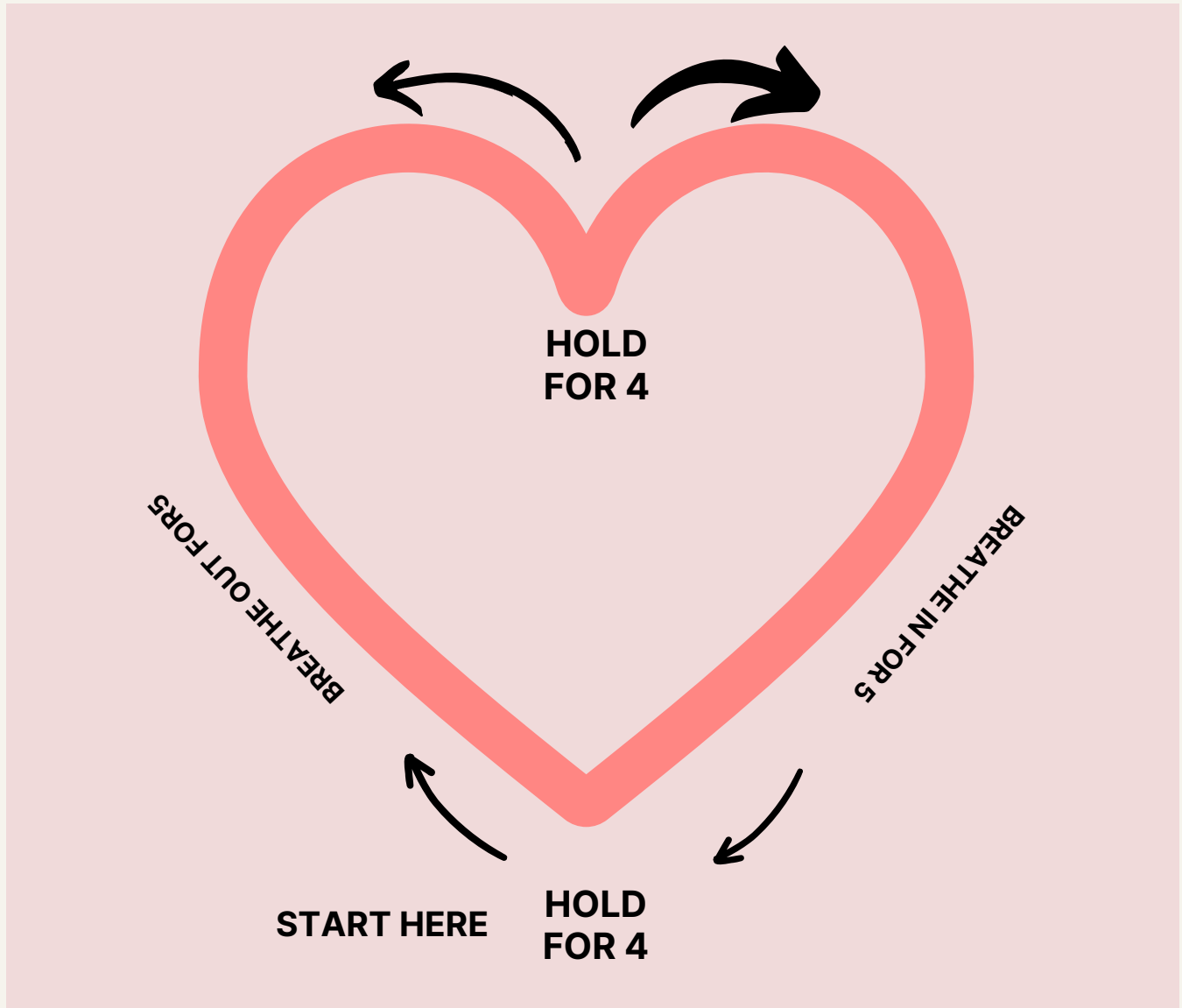
**Go to Your Favorite Place**

**Journal Your Thoughts**

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

# Heart Breathing

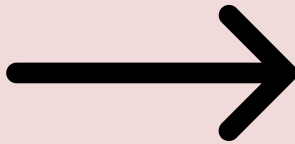
**USE THIS BREATHWORK TECHNIQUE TO  
HELP YOU COPE WITH TRIGGERS**



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

# The Balloon Mental Exercise

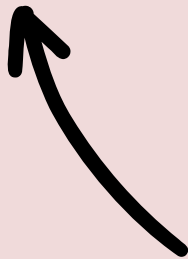
**For When you Start Feel Worried or Anxious**



**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

--





