

**Common Distressing Symptoms / Issues / Problem Chart**  
 During the last 6 months, check all that you have or are currently experiencing

Emotions (E)	Somatic (S)	Cognition (C)	Behaviors (D) (Defense Response)	Negative Beliefs (NB)
<input type="checkbox"/> Irritation <input type="checkbox"/> Frustration <input type="checkbox"/> Annoyed <input type="checkbox"/> Anger <input type="checkbox"/> Rage <input type="checkbox"/> Confused <input type="checkbox"/> Excessive Worry <input type="checkbox"/> Overwhelm <input type="checkbox"/> Fearful <input type="checkbox"/> Scared <input type="checkbox"/> Anxious <input type="checkbox"/> Panic <input type="checkbox"/> Guilt <input type="checkbox"/> Shame <input type="checkbox"/> Remorse <input type="checkbox"/> Despair <input type="checkbox"/> Depressed <input type="checkbox"/> Sad <input type="checkbox"/> Hopeless <input type="checkbox"/> Helpless <input type="checkbox"/> Lonely <input type="checkbox"/> Insecure <input type="checkbox"/> Alone/ isolated <input type="checkbox"/> Resentful <input type="checkbox"/> Abandoned <input type="checkbox"/> Indifferent <input type="checkbox"/> Alone <input type="checkbox"/> Contempt <input type="checkbox"/> Weak <input type="checkbox"/> Bored <input type="checkbox"/> Numb <input type="checkbox"/> Detached <input type="checkbox"/> Jealous <input type="checkbox"/> Envious <input type="checkbox"/> Dismissive <input type="checkbox"/> Disgust <input type="checkbox"/> Repulsed <input type="checkbox"/> Embarrassed <input type="checkbox"/> Revolted	<input type="checkbox"/> Heart Palpitations <input type="checkbox"/> Chest Pain <input type="checkbox"/> Choking feeling, feeling smothered <input type="checkbox"/> Lack of appetite <input type="checkbox"/> Chronic back pain <input type="checkbox"/> Drained <input type="checkbox"/> Panic Attacks <input type="checkbox"/> On-edge <input type="checkbox"/> Muscle tension <input type="checkbox"/> Panic Attacks <input type="checkbox"/> Hypervigilant On alert <input type="checkbox"/> Easily startled <input type="checkbox"/> Shaking Trembling <input type="checkbox"/> Sweating <input type="checkbox"/> Difficulty breathing <input type="checkbox"/> Overly energized <input type="checkbox"/> Low energy <input type="checkbox"/> Restlessness <input type="checkbox"/> Inability to sit still <input type="checkbox"/> Stomach aches <input type="checkbox"/> Headaches <input type="checkbox"/> Migraines <input type="checkbox"/> Weight loss <input type="checkbox"/> Weight gain <input type="checkbox"/> Difficult with falling asleep or staying asleep <input type="checkbox"/> Nightmares <input type="checkbox"/> Flashbacks <input type="checkbox"/> Auto-immune <input type="checkbox"/> Unexplained medical issues <input type="checkbox"/> Chronic Pain <input type="checkbox"/> Nausea, vomiting <input type="checkbox"/> Digestive Issues <input type="checkbox"/> Low energy <input type="checkbox"/> Shut down <input type="checkbox"/> Decreased need for sleep	<input type="checkbox"/> Poor Attention / prob with focus <input type="checkbox"/> Memory loss /lapse <input type="checkbox"/> Racing thoughts <input type="checkbox"/> Confusion <input type="checkbox"/> Intrusive thoughts <input type="checkbox"/> Difficulty with concentration <input type="checkbox"/> Difficulty making decisions <input type="checkbox"/> Memory problems / lapse <input type="checkbox"/> Chronic self-criticism <input type="checkbox"/> Over thinking <input type="checkbox"/> Distrust of others <input type="checkbox"/> Forgetfulness <input type="checkbox"/> Intrusive memories <input type="checkbox"/> Rumination <input type="checkbox"/> Phobias <input type="checkbox"/> Low motivation <input type="checkbox"/> Brain fog  <b>Behaviors (D) (Defense Response)</b> <input type="checkbox"/> Excessive exercising <input type="checkbox"/> Overly agreeable <input type="checkbox"/> Wanting to run away <input type="checkbox"/> Procrastination <input type="checkbox"/> Communication problems <input type="checkbox"/> Neglect on self care <input type="checkbox"/> Difficulty saying no <input type="checkbox"/> Unhealthy boundaries <input type="checkbox"/> Avoiding conflicts <input type="checkbox"/> Unhealthy or toxic relationships <input type="checkbox"/> Parenting difficulties <input type="checkbox"/> Relationship difficulties <input type="checkbox"/> Marital discord <input type="checkbox"/> Physically harming others	<input type="checkbox"/> Anger Outbursts <input type="checkbox"/> Yelling / Screaming <input type="checkbox"/> Excessive alcohol use <input type="checkbox"/> Excessive gambling <input type="checkbox"/> Drug use <input type="checkbox"/> Excessive shopping / spending <input type="checkbox"/> Overly caring for others <input type="checkbox"/> Avoiding certain people, places, situations, or topics <input type="checkbox"/> Work-a-holic <input type="checkbox"/> Overachieving <input type="checkbox"/> Uncontrollable emotions <input type="checkbox"/> Withdrawal / Isolation <input type="checkbox"/> Making insulting comments <input type="checkbox"/> Making excuses for behaviors <input type="checkbox"/> Inability to ask for help <input type="checkbox"/> Needing validation from others <input type="checkbox"/> Spying on someone <input type="checkbox"/> Difficulty to hear others opinions <input type="checkbox"/> Cutting, skin picking, hair pulling <input type="checkbox"/> Suicidal threats or gestures <input type="checkbox"/> Sexual difficulties <input type="checkbox"/> Hoarding <input type="checkbox"/> People pleasing <input type="checkbox"/> Co-dependent "clingy" <input type="checkbox"/> Sabotaging relationships <input type="checkbox"/> Excessive social media <input type="checkbox"/> Food purging <input type="checkbox"/> Zoning Out	<input type="checkbox"/> I am a bad person <input type="checkbox"/> It's not okay to be me <input type="checkbox"/> I'm damaged <input type="checkbox"/> I'm worthless (unworthy) <input type="checkbox"/> I'm insignificant (unimportant) <input type="checkbox"/> I deserve to die <input type="checkbox"/> I deserve bad things <input type="checkbox"/> I am stupid <input type="checkbox"/> I am ugly <input type="checkbox"/> I am different/ I don't belong <input type="checkbox"/> I am unlovable <input type="checkbox"/> I did something wrong <input type="checkbox"/> I should have known better <input type="checkbox"/> I should have done something <input type="checkbox"/> I am to blame (it's my fault) <input type="checkbox"/> I cannot trust myself <input type="checkbox"/> I cannot be trusted <input type="checkbox"/> I cannot trust my judgment <input type="checkbox"/> I am in danger <input type="checkbox"/> I am not safe <input type="checkbox"/> I'm going to die <input type="checkbox"/> I cannot protect myself <input type="checkbox"/> I cannot stand up for myself <input type="checkbox"/> I am not in control <input type="checkbox"/> I have to be perfect (please everyone) <input type="checkbox"/> I cannot succeed <input type="checkbox"/> I cannot get what I want <input type="checkbox"/> I am inadequate <input type="checkbox"/> I am trapped <input type="checkbox"/> I am a failure <input type="checkbox"/> I will fail <input type="checkbox"/> I cannot connect <input type="checkbox"/> I don't belong <input type="checkbox"/> I am invisible <input type="checkbox"/> I am alone

**Nervous System Stress Response - Emotions**

<b>Ventral Vagal</b> Social Connection Safe, social, relaxed Finds safety in connection  <b>Parasympathetic Nervous System</b>	<b>Flight - Sympathetic-mobilization</b> Need a greater sense of safety - escape Seeks safety via action  <b>Sympathetic Nervous System</b>	<b>Fight - Sympathetic-mobilization</b> Need something to move or change - conflict Seeks safety via action  <b>Sympathetic Nervous System</b>	<b>Freeze/Fawn- Dorsal Vagal - immobilization</b>  Need connection to self, and others but seeks safety via disconnection  <b>Parasympathetic Nervous System</b>
<input type="checkbox"/> <b>Happy</b>	<input type="checkbox"/> <b>Fear</b>	<input type="checkbox"/> <b>Anger</b>	<input type="checkbox"/> <b>Sad</b>
<input type="checkbox"/> <b>Joyful</b> <input type="checkbox"/> Ecstatic <input type="checkbox"/> Liberated <input type="checkbox"/> <b>Proud</b> <input type="checkbox"/> Confident <input type="checkbox"/> Important <input type="checkbox"/> <b>Optimistic</b> <input type="checkbox"/> Open <input type="checkbox"/> Inspired <input type="checkbox"/> <b>Peaceful</b> <input type="checkbox"/> Hopeful <input type="checkbox"/> Loving <input type="checkbox"/> Calm <input type="checkbox"/> Creative <input type="checkbox"/> Grateful <input type="checkbox"/> Supported <input type="checkbox"/> Contentment  <input type="checkbox"/> <b>Surprised</b> <input type="checkbox"/> <b>Confused</b> <input type="checkbox"/> Disillusioned <input type="checkbox"/> <b>Startled</b> <input type="checkbox"/> Shocked <input type="checkbox"/> Dismayed <input type="checkbox"/> <b>Amazed</b> <input type="checkbox"/> Astonished <input type="checkbox"/> Awe <input type="checkbox"/> <b>Excited</b> <input type="checkbox"/> Eager <input type="checkbox"/> Energetic	<input type="checkbox"/> <b>Scared - fearful</b> <input type="checkbox"/> Helpless <input type="checkbox"/> Frightened <input type="checkbox"/> <b>Anxious</b> <input type="checkbox"/> Overwhelmed <input type="checkbox"/> Excessive Worrying <input type="checkbox"/> <b>Insecure</b> <input type="checkbox"/> Inadequate <input type="checkbox"/> Inferior <input type="checkbox"/> <b>Weak</b> <input type="checkbox"/> Worthless <input type="checkbox"/> Insignificant <input type="checkbox"/> <b>Rejected</b> <input type="checkbox"/> Excluded <input type="checkbox"/> Insecure <input type="checkbox"/> <b>Threatened</b> <input type="checkbox"/> Nervous <input type="checkbox"/> Exposed	<input type="checkbox"/> <b>Hurt</b> <input type="checkbox"/> Betrayed <input type="checkbox"/> Resentful <input type="checkbox"/> <b>Humiliated</b> <input type="checkbox"/> Disrespected <input type="checkbox"/> Ridiculed <input checked="" type="checkbox"/> <del>Mad</del> <input type="checkbox"/> Furious <input type="checkbox"/> Jealous / Envious <input type="checkbox"/> Resentful <input type="checkbox"/> Suspicious <input type="checkbox"/> Vulnerable <input type="checkbox"/> <b>Aggressive</b> <input type="checkbox"/> Provoked <input type="checkbox"/> Hostile <input type="checkbox"/> <b>Frustrated</b> <input type="checkbox"/> Infuriated <input type="checkbox"/> Annoyed <input type="checkbox"/> <b>Distant</b> <input type="checkbox"/> Withdrawn <input type="checkbox"/> <b>Critical</b> <input type="checkbox"/> Skeptical <input type="checkbox"/> Dismissive  <input type="checkbox"/> <b>Disgust</b> <input type="checkbox"/> <b>Disapproving</b> <input type="checkbox"/> Judgmental <input type="checkbox"/> Embarrassed <input type="checkbox"/> <b>Disappointed</b> <input type="checkbox"/> Appalled <input type="checkbox"/> Revolted <input type="checkbox"/> <b>Awful</b>	<input type="checkbox"/> <b>Hurt</b> <input type="checkbox"/> Embarrassed <input type="checkbox"/> Disappointed <input type="checkbox"/> <b>Depressed</b> <input type="checkbox"/> Inferior <input type="checkbox"/> Empty <input type="checkbox"/> <b>Guilty</b> <input type="checkbox"/> Remorseful <input type="checkbox"/> Ashamed / Shame <input type="checkbox"/> <b>Despair</b> <input type="checkbox"/> Grief <input type="checkbox"/> Powerless <input type="checkbox"/> Helplessness <input type="checkbox"/> <b>Vulnerable</b> <input type="checkbox"/> Victimized <input type="checkbox"/> Victim as identity <input type="checkbox"/> Fragile <input type="checkbox"/> <b>Lonely</b> <input type="checkbox"/> Isolated <input type="checkbox"/> Empty <input type="checkbox"/> Numbness <input type="checkbox"/> Unworthiness <input type="checkbox"/> Hopeless <input type="checkbox"/> Abandoned <input type="checkbox"/> <b>Bored</b> <input type="checkbox"/> Apathetic <input type="checkbox"/> Indifferent <input type="checkbox"/> Inhibited anger <input type="checkbox"/> Utter aloneness

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**Nervous System Stress Responses - Somatic**

<b>Ventral Vagal</b> Social Connection Safe, social, relaxed  Generally in head and neck	<b>Sympathetic - Fear</b> Need a greater sense of safety - escape  Generally in chest	<b>Sympathetic - Anger</b> Need something to move or change - conflict  Generally in chest	<b>Dorsal Vagal</b> Need connection to self, others  Generally in gut
<input type="checkbox"/> Calm heart rate	<input type="checkbox"/> Heart Palpitations / increased heart rate/chest pain	<input type="checkbox"/> Low energy	
<input type="checkbox"/> Grounded	<input type="checkbox"/> Panic attacks	<input type="checkbox"/> Fatigue	
<input type="checkbox"/> At ease	<input type="checkbox"/> Muscle tension / on-edge / jumpy	<input type="checkbox"/> Detached / Disconnected	
<input type="checkbox"/> Deep regular breathing	<input type="checkbox"/> Physically / mentally checking out	<input type="checkbox"/> Breathing problems	
<input type="checkbox"/> Open body language	<input type="checkbox"/> Hypervigilant / On alert	<input type="checkbox"/> Hollow	
<input type="checkbox"/> Rhythmic variation of vocal tone	<input type="checkbox"/> Shaking / Trembling / sweating	<input type="checkbox"/> Heavy	
<input type="checkbox"/> Other _____	<input type="checkbox"/> Difficulty Breathing / shortness of breath	<input type="checkbox"/> Difficult with sleep / over or under	
<input type="checkbox"/> Other _____	<input type="checkbox"/> Overly energized	<input type="checkbox"/> Chronic fatigue	
	<input type="checkbox"/> Restlessness / Inability to sit still	<input type="checkbox"/> Loss or gain weight	
	<input type="checkbox"/> Stomach ache	<input type="checkbox"/> Auto-immune	
	<input type="checkbox"/> Headache/ Migraine	<input type="checkbox"/> Unexplained physical symptoms	
	<input type="checkbox"/> Loss or gain weight	<input type="checkbox"/> Numb	
	<input type="checkbox"/> Difficult with sleep	<input type="checkbox"/> Brain fog	
	<input type="checkbox"/> Nightmares / Flashbacks	<input type="checkbox"/> Shut down	
	<input type="checkbox"/> Auto-immune	<input type="checkbox"/> Slouched posture	
	<input type="checkbox"/> Unexplained physical / medical issues		
	<input type="checkbox"/> Nausea, vomiting		
	<input type="checkbox"/> Digestive issues		

**Places we store unwanted emotions**

<input type="checkbox"/> <b>Lower back</b> - Anger <input type="checkbox"/> <b>Head and Chest</b> - Hurt <input type="checkbox"/> <b>Neck and Shoulders</b> - Burdens and Responsibilities <input type="checkbox"/> <b>Voice and Throat</b> - Oppression <input type="checkbox"/> <b>Insomnia</b> - Loss of Self	<input type="checkbox"/> <b>Stomach and Intestines</b> - Fears <input type="checkbox"/> <b>Headache</b> - Loss of Control <input type="checkbox"/> <b>Fatigue</b> - Resentments <input type="checkbox"/> <b>Numbness</b> - Trauma
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**Nervous System Stress Response - Behavioral Defenses**

<b>Ventral Vagal</b> Social Connection Safe, social, relaxed	<b>Flight - Sympathetic-mobilization</b> Need a greater sense of safety - escape	<b>Fight - Sympathetic-mobilization</b> Need something to move or change - conflict	<b>Freeze/Fawn- Dorsal Vagal - immobilization</b> Need connection to self, others (freeze = combo of sympathetic and dorsal)
<b>Behaviors "I can"</b>	<b>Behaviors - Hyper-arousal "I must now" "I need to run"</b>	<b>Behaviors - Hyper-arousal "I must now" "I need to fight back"</b>	<b>Behaviors- Hypo-arousal "I can't" "I can't cope"</b>
<ul style="list-style-type: none"> <li><input type="checkbox"/> Calm</li> <li><input type="checkbox"/> Engaged and Curious</li> <li><input type="checkbox"/> Compassionate</li> <li><input type="checkbox"/> Connected to people</li> <li><input type="checkbox"/> Able to make decisions</li> <li><input type="checkbox"/> Loving and empathetic</li> <li><input type="checkbox"/> Mindful</li> <li><input type="checkbox"/> Caring</li> <li><input type="checkbox"/> Nurturing</li> <li><input type="checkbox"/> Communicate well</li> <li><input type="checkbox"/> Ready to learn</li> <li><input type="checkbox"/> Able to problem-solve</li> <li><input type="checkbox"/> Able to self-regulate</li> <li><input type="checkbox"/> Able to express needs</li> <li><input type="checkbox"/> Able to keep healthy boundaries</li> <li><input type="checkbox"/> Able to self-soothe</li> <li><input type="checkbox"/> Stable mood</li> <li><input type="checkbox"/> Deeper relationship connections</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Relationship discord</li> <li><input type="checkbox"/> Emotional reactivity - defensiveness</li> <li><input type="checkbox"/> Avoidance behaviors</li> <li><input type="checkbox"/> Phobias</li> <li><input type="checkbox"/> Fears of failing</li> <li><input type="checkbox"/> Impulsivity</li> <li><input type="checkbox"/> Fixing / controlling/micromanaging</li> <li><input type="checkbox"/> Self-sabotaging behaviors</li> <li><input type="checkbox"/> Emotional overwhelm/feeling out of control</li> <li><input type="checkbox"/> Perfectionism</li> <li><input type="checkbox"/> Extreme attention to detail</li> <li><input type="checkbox"/> Wanting to hide or run or quit</li> <li><input type="checkbox"/> Performance / social anxiety</li> <li><input type="checkbox"/> Overthinking/rumination</li> <li><input type="checkbox"/> Over preparing</li> <li><input type="checkbox"/> Poor concentration</li> <li><input type="checkbox"/> Preoccupied</li> <li><input type="checkbox"/> Procrastination</li> <li><input type="checkbox"/> Constantly on the go, fidgety, always busy</li> <li><input type="checkbox"/> Self-critical</li> <li><input type="checkbox"/> Inability to ask for help</li> <li><input type="checkbox"/> Overachiever / workaholic</li> <li><input type="checkbox"/> Difficulty relaxing</li> <li><input type="checkbox"/> Social Avoidance</li> <li><input type="checkbox"/> Overeating / Binge eating</li> <li><input type="checkbox"/> Undereating/restrictive eating</li> <li><input type="checkbox"/> Purging food</li> <li><input type="checkbox"/> Overspending</li> <li><input type="checkbox"/> Excessive Alcohol /drug use</li> <li><input type="checkbox"/> Difficulty organizing tasks</li> <li><input type="checkbox"/> Risky behaviors</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Impulsive</li> <li><input type="checkbox"/> Relationship Discord</li> <li><input type="checkbox"/> Emotional Reactivity</li> <li><input type="checkbox"/> Difficulty forgiving</li> <li><input type="checkbox"/> Overly assertive</li> <li><input type="checkbox"/> Communication problems</li> <li><input type="checkbox"/> Insult, blame, mistreat</li> <li><input type="checkbox"/> Aggression / Bullying</li> <li><input type="checkbox"/> Showing off / clown</li> <li><input type="checkbox"/> Getting defensive</li> <li><input type="checkbox"/> Picking a fight</li> <li><input type="checkbox"/> Saying mean or unkind things</li> <li><input type="checkbox"/> Demanding /dominating</li> <li><input type="checkbox"/> Uncontrollable yelling / Screaming</li> <li><input type="checkbox"/> Hitting or throwing objects</li> <li><input type="checkbox"/> Controlling behaviors</li> <li><input type="checkbox"/> Not listening</li> <li><input type="checkbox"/> Blaming / Criticizing</li> <li><input type="checkbox"/> Withdrawing trust / suspicious</li> <li><input type="checkbox"/> Difficulty relaxing</li> <li><input type="checkbox"/> Omitting/withholding information</li> <li><input type="checkbox"/> Attempts to hurt others</li> <li><input type="checkbox"/> Legal problems</li> <li><input type="checkbox"/> Feeling trapped</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Unhealthy or unstable relationships</li> <li><input type="checkbox"/> Self-harming / self-injury</li> <li><input type="checkbox"/> Catastrophic thinking</li> <li><input type="checkbox"/> Avoiding conflict</li> <li><input type="checkbox"/> Communication problems</li> <li><input type="checkbox"/> Difficulty with problem-solving / indecisiveness</li> <li><input type="checkbox"/> Lack of identity</li> <li><input type="checkbox"/> Chronic suicidal preoccupation</li> <li><input type="checkbox"/> Letting others take control</li> <li><input type="checkbox"/> Loss of interest in activities</li> <li><input type="checkbox"/> Isolation (freeze)</li> <li><input type="checkbox"/> Couch potato (freeze)</li> <li><input type="checkbox"/> Dissociate (freeze)</li> <li><input type="checkbox"/> Diminished sex drive</li> <li><input type="checkbox"/> Difficulty with boundaries</li> <li><input type="checkbox"/> Difficulty standing up for self (freeze)</li> <li><input type="checkbox"/> Spacing out / zoning out (freeze)</li> <li><input type="checkbox"/> Codependent - clingy</li> <li><input type="checkbox"/> Difficulty making decisions</li> <li><input type="checkbox"/> Isolation - withdrawal</li> <li><input type="checkbox"/> Excessive/uncontrollable/intense sobbing</li> <li><input type="checkbox"/> Disconnects from mind/body (freeze)</li> <li><input type="checkbox"/> Conforms to others' wishes (fawn)</li> <li><input type="checkbox"/> Poor self-care (fawn)</li> <li><input type="checkbox"/> Shutdown - despair (fawn)</li> <li><input type="checkbox"/> Giving up, not caring (fawn)</li> <li><input type="checkbox"/> Approval Seeking (fawn)</li> <li><input type="checkbox"/> People pleasing - overly agreeable, over caring (fawn)</li> <li><input type="checkbox"/> Wanting to fit in (fawn)</li> <li><input type="checkbox"/> Overly flattering (fawn)</li> <li><input type="checkbox"/> Unmotivated (fawn)</li> <li><input type="checkbox"/> Memory Lapses</li> <li><input type="checkbox"/> Self-blame</li> </ul>

## EMDR Cognitions

### Negative Cognitions

#### Responsibility Value (Shame)

I am a bad person  
I am shameful  
I am terrible  
I'm a failure  
I am permanently damaged  
Something is wrong with me  
I don't deserve to be  
I am worthless  
I am insignificant /not important  
I deserve to die  
I deserve only bad things  
I am stupid  
I am ugly/inadequate  
My body is ugly  
It's not okay to be me

#### Responsibility: Action (Guilt)

I did something wrong / It's my fault  
I should have known better  
I should have done something  
I am to blame (It's my fault)  
I cannot be trusted  
I am a bad person  
I have to do it all

#### Safety/Vulnerability

I cannot trust myself  
I cannot be trusted  
I cannot trust my judgment  
I cannot trust anyone  
I am in danger / I cannot protect myself  
It's not okay to feel (show) emotions  
I'm going to die

#### Control/Choice

I am not in control  
I have to be perfect (please everyone)  
I am powerless (helpless)  
I cannot do what I want  
I am weak  
I have no options / trapped

#### Connection/Belonging

I cannot connect  
I am unwanted / I don't belong  
I'm invisible / Insignificant / don't matter  
I am alone  
I am unworthy of love

### Positive Cognitions

#### Responsibility: Value (Shame)

I am a good person  
I am honorable  
I am fine as I am  
I am capable  
I am (can be) healthy  
I can be myself  
I deserve....I can have ....  
I am worthy  
I am significant / Important / essential  
I deserve to live / I am  
I deserve good things  
I am intelligent (I am able to learn)  
I am fine (attractive, loveable)  
My body is fine (attractive, loveable)  
I can be me

#### Responsibility: Action (guilt)

I learned from it / It's not my fault  
I did the best I could  
I did the best that I could  
I am not to blame  
I can be trusted  
I am a good person  
It wasn't my fault

#### Safety/Vulnerability

I can trust myself  
I am trustworthy  
I can trust my judgment  
I can choose whom to trust  
I am safe now/ It's over  
I can show emotions / It's safe to feel  
I am safe now / It's over / I'm alive

#### Control/Choice

I am (now) in control  
I can be myself (I can make mistakes)  
I (now) have choices  
I have enough opportunities/alternatives  
I am strong  
I (now) have choices / I have options

#### Connection/Belonging

I can choose whom to connect with  
I belong / I matter  
I can be seen / I matter  
I am not alone / I am connected  
I am loveable/worthy of love

**Attachment through Polyvagal Lens**

Secure Attachment Ventral Vagal	Anxious Sympathetic	Attachment	Avoidant Attachment Dorsal Vagal	Disorganized Dorsal Vagal	Attachment	Freeze
<p>Self-confident, attunement to self and others</p> <p>"I feel you feeling me and I'm okay on my own"</p>	<p>Low self worth. Over-focused on others Under-focused on self</p> <p>"I'm not okay by myself"</p>		<p>Desires and fears of intimacy. Connection is dangerous and emotions may seem hard to access.</p> <p>"I pull away when people want to connect"</p>		<p>Both anxious and avoidant attachment. Intimate relationships feel confusing and trusting may seem unfamiliar.</p> <p>"I crave connection but am terrified of it"</p>	