

5-MINUTE COPING SKILLS CHECK-IN

A Quick Pause To Naming What's Actually Going On



WHAT HAPPENED?
(Just the facts, no judgment)



WHAT AM I FEELING?
(Name it as specifically as you can)



WHERE DO I FEEL IT?
(e.g., tight chest, racing heart, clenched shoulders)



WHAT DO I NEED RIGHT NOW?
(Space, movement, connection...)



WHAT COPING SKILL WILL I TRY?
(Pick one. Give it five minutes.)

