

Evelation



# Stress triggers worksheet

Identify, understand, and reduce your daily stressors



# 1. WHERE DOES MY STRESS COME FROM?

List the moments, situations, or thoughts that triggered stress today.

  
  
  
  

# 2. WHAT DID I FEEL IN MY BODY?

Check anything that showed up physically.

- |   |                                       |
|---|---------------------------------------|
| <input type="checkbox"/> Tight chest        | <input type="checkbox"/> Irritability |
| <input type="checkbox"/> Fast heartbeat     | <input type="checkbox"/> Restlessness |
| <input type="checkbox"/> Shoulder tension   | <input type="checkbox"/> Low energy   |
| <input type="checkbox"/> Headache           | <input type="checkbox"/> Other:       |
| <input type="checkbox"/> Stomach discomfort |                                       |

# 3. WHAT THOUGHT TRIGGERED IT?

Write the thought that popped up when the stress started.

  
  

# 4. WHAT DO I ACTUALLY NEED?

Identify the real need behind the stress reaction.

- |                                       |                                      |
|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> Rest         | <input type="checkbox"/> Space       |
| <input type="checkbox"/> Help/support | <input type="checkbox"/> Reassurance |
| <input type="checkbox"/> More time    | <input type="checkbox"/> Movement    |
| <input type="checkbox"/> Clarity      | <input type="checkbox"/> Other:      |
| <input type="checkbox"/> Food/water   |                                      |

## 5. MY STRESS RESPONSE PATTERN

What I usually do:

How that helps or hurts me:

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## 6. A HEALTHIER RESPONSE I CAN TRY NEXT TIME

Choose one:

- |   |   |
|---|---|
| <input type="checkbox"/> Pause + 3 deep breaths | <input type="checkbox"/> Ask for help                     |
| <input type="checkbox"/> 2-minute walk/stretch  | <input type="checkbox"/> Remove myself from the situation |
| <input type="checkbox"/> Drink water            | <input type="checkbox"/> Positive self-talk               |
| <input type="checkbox"/> Reframe the thought    |   |
| <input type="checkbox"/> My personal plan:      |   |

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## 7. END-OF-DAY REFLECTION

Which trigger affected me the most? Why?

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A small win from today:

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*\*Your journey matters.  
Keep going\*.*