

FIRST RESPONDERS

— RECOVERY & MENTAL WELLNESS —

Worksheet Packet



TOOLS FOR STRENGTH.
SUPPORT FOR THE JOURNEY.
HOPE FOR TOMORROW.



YOU SERVE OTHERS. DON'T FORGET TO TAKE CARE OF YOU.

You are not alone.



1. My Why



*"Remembering why you serve
can help you keep going."*

Why did you choose this path
of service?

What keeps you motivated on
difficult days?

Who or what inspires you
to keep going?

YOUR WHY IS YOUR LIGHT.

2. Daily Check-In

Take a few minutes each day to check in with yourself.

Date: _____ Shift: _____



How am I feeling today?



Physical sensations
(I'm noticing in my body):



My thoughts right now:



What do I need most today?

AWARENESS IS THE FIRST STEP TO HEALING.

3. Stress Triggers

Identify what situations, people, or events increase your stress.

TRIGGER	HOW IT MAKES ME FEEL	WHAT I CAN DO



YOU CAN'T STOP THE WAVES, BUT YOU CAN LEARN TO SURF.

4. Grounding Techniques

Use these tools to bring yourself back to the present moment.

5-4-3-2-1 Technique

- 5 things I can see: _____
- 4 things I can touch: _____
- 3 things I can hear: _____
- 2 things I can smell: _____
- 1 thing I can taste: _____

Deep Breathing

Inhale for 4... Hold for 4... Exhale for 6... Repeat.

Box Breathing

Inhale 4... Hold 4... Exhale 4... Hold 4... Repeat.

“_____”

*You have the power to say,
“This is not how my story will end.”*

”

BREATHE. RESET. YOU'VE GOT THIS.



5. Sleep & Recovery

Quality rest is essential for mental and physical health.

My sleep goal: _____

What helps me sleep better?

What makes sleep difficult?

One change I can make for better rest:



REST IS NOT A REWARD. IT'S A NECESSITY.

6. Healthy Outlets

List activities that help you decompress and recharge.













MAKE TAKE FOUR WHAT MAKES YOU FEEL ALIVE.

7. Talking Helps

You don't have to carry it all alone.

Who are safe people I can talk to?

1. _____
2. _____
3. _____
4. _____
5. _____

Professionals & Resources

Counselor/Therapist: _____

Phone: _____

Crisis Line: _____

Other Resource: _____

“
*Reaching out is a sign of strength,
not weakness.*
”

SPEAK. SHARE. HEAL.



8. My Commitment

*I am worth the same care and compassion
I show to others.*

I commit to:

When I feel overwhelmed, I will:

I promise to take care of:

Signature: _____ Date: _____

YOU MATTER. YOUR WELLNESS MATTERS.