



# Healing from Trauma and Trauma Bonding: A Comprehensive Guide and Workbook

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# ***Introduction***

Trauma is an emotional response to distressing events that overwhelm one's ability to cope. It can result from single incidents like accidents or prolonged experiences such as abuse.

Trauma bonding occurs when victims form unhealthy attachments to their abusers, reinforced by cycles of abuse and affection. Addressing trauma and trauma bonding is essential for mental and emotional recovery.

This guide provides exercises to help individuals process and heal from trauma, promoting resilience and well-being.

By engaging in grounding techniques, journaling, physical activity, creative expression, and professional therapy, individuals can work through their experiences and reclaim their sense of self.

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# Introduction

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## Definition of Trauma

Trauma is an emotional response to a deeply distressing or disturbing event that overwhelms an individual's ability to cope, causes feelings of helplessness, diminishes their sense of self, and their ability to feel the full range of emotions and experiences.

## Definition of Trauma Bonding

Trauma bonding is a psychological response to abuse in which a person forms a strong emotional connection to their abuser. This bond can make it difficult for the victim to leave the abusive relationship, even if it is harmful to them.

## Importance of Addressing Trauma and Trauma Bonding

Addressing trauma and trauma bonding is crucial for mental health, well-being, and recovery. It helps individuals break free from cycles of abuse, understand their experiences, and heal emotionally and psychologically.

## *Understanding Trauma*

### Types of Trauma

#### **ACUTE TRAUMA**

Results from a single distressing event, such as an accident, natural disaster, or assault. It often causes immediate, intense reactions.

#### **CHRONIC TRAUMA**

Stems from repeated and prolonged exposure to highly stressful events, like domestic violence or childhood neglect. The effects are cumulative and can worsen over time.

#### **COMPLEX TRAUMA**

Arises from exposure to multiple traumatic events, often of an invasive, interpersonal nature. Examples include ongoing abuse, exploitation, or profound neglect during childhood.

### COMMON CAUSES OF TRAUMA

- Accidents
- Natural Disasters
- Physical or Sexual Assault
- War and Combat
- Domestic Violence
- Childhood Abuse or Neglect

# **SYMPTOMS AND EFFECTS OF TRAUMA**

Trauma can manifest through a wide range of symptoms and effects, impacting individuals physically, emotionally, cognitively, and behaviorally. Here are some common symptoms and effects categorized by these domains:

## **PHYSICAL SYMPTOMS**

- **Fatigue and Exhaustion:** Chronic tiredness and low energy levels.
- **Headaches and Migraines:** Persistent headaches or migraines.
- **Sleep Disturbances:** Insomnia, nightmares, difficulty falling or staying asleep.
- **Appetite Changes:** Loss of appetite or overeating.
- **Somatic Complaints:** Unexplained aches and pains, gastrointestinal problems.
- **Increased Heart Rate:** Palpitations or a feeling of a racing heart.
- **Hyperarousal:** Heightened startle response, feeling jumpy or on edge.

## **EMOTIONAL SYMPTOMS**

- **Anxiety:** Persistent worry, fear, or panic attacks.
- **Depression:** Feelings of sadness, hopelessness, or loss of interest in activities.
- **Mood Swings:** Rapid shifts in mood, irritability, or anger outbursts.
- **Guilt and Shame:** Feelings of self-blame or guilt over the trauma.
- **Emotional Numbness:** Inability to experience emotions, feeling detached or disconnected.

## **COGNITIVE SYMPTOMS**

- **Intrusive Thoughts:** Unwanted and distressing memories of the traumatic event.
- **Flashbacks:** Vivid, often distressing re-experiences of the trauma.
- **Concentration Problems:** Difficulty focusing, poor memory, and attention issues.
- **Negative Beliefs:** Pessimistic thoughts about oneself, others, or the world.
- **Disorientation:** Confusion, trouble making decisions, or feeling lost.

# SYMPTOMS AND EFFECTS OF TRAUMA

## BEHAVIORAL SYMPTOMS

- **Avoidance:** Deliberate efforts to avoid reminders of the trauma, such as places, people, or activities.
- **Social Withdrawal:** Isolating from friends, family, and social activities.
- **Hypervigilance:** Constantly being on guard or overly cautious.
- **Risky Behaviors:** Engaging in reckless or self-destructive behaviors, such as substance abuse.
- **Changes in Routine:** Significant alterations in daily activities, routines, or habits.

## INTERPERSONAL EFFECTS

- **Relationship Strain:** Difficulty maintaining relationships, increased conflicts, or withdrawal from loved ones.
- **Trust Issues:** Difficulty trusting others, feeling betrayed or abandoned.
- **Dependency:** Becoming overly dependent on others for support and reassurance.

## LONG-TERM EFFECTS

**Chronic Health Problems:** Increased risk for chronic conditions like heart disease, diabetes, or autoimmune disorders.

**Mental Health Disorders:** Development of conditions such as PTSD, depression, anxiety disorders, or substance use disorders.

**Functional Impairment:** Difficulty maintaining employment, academic challenges, or impaired daily functioning.

**Low Self-esteem:** Persistent feelings of worthlessness or inadequacy.

**Identity Issues:** Struggles with self-concept and personal identity, feeling changed by the trauma.

Understanding and recognizing these symptoms and effects can be crucial for seeking appropriate support and treatment. Therapy, medication, lifestyle changes, and support from loved ones can all play vital roles in the recovery process.



# Worksheet Exercise:

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## Understanding the Nature of Trauma

I invite you to reflect on the following questions. These questions are designed to help you explore and understand your experiences with trauma. Please answer them as openly and honestly as you feel comfortable.

**1. Have you ever experienced a traumatic event? If so, what happened?**

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**2. Can you describe the nature of the traumatic event? Was it a single incident or did it happen over a longer period of time?**

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**3. How did you feel immediately after the traumatic event?**

**Emotionally:** 

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**Physically:** 

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**4. What emotions do you associate with the traumatic event now?**

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## Worksheet Exercise:

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**5. What physical symptoms have you noticed since the event?**

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**6. How has the trauma affected your daily life and routines?**

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**7. Have you noticed any changes in your sleep patterns or appetite since the traumatic event? If so, describe them.**

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**8. What thoughts or memories about the traumatic event come up most often for you?**

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**9. Do you find certain places, people, or situations trigger reminders of the trauma? If yes, what are they?**

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## Worksheet Exercise:

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**10. How has the trauma influenced your ability to concentrate or make decisions?**

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**11. In what ways has the trauma changed how you see yourself and the world around you?**

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**12. How has the trauma influenced your relationships with family, friends, and colleagues?**

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**13. Do you find it difficult to trust others since the traumatic event? If so, explain how.**

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**14. Have your social interactions or activities changed since the trauma? Describe any changes you've noticed.**

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**15. How do you feel others perceive you since you experienced the trauma?**

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# Worksheet Exercise:

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## Identifying Symptoms of Trauma

This activity is designed to help you recognize and understand the various symptoms of trauma that you may be experiencing. Please review each symptom and check the box if you have experienced it. After you complete the checklist, we will discuss your responses together in our next session.

### Emotional Symptoms

- ☐ Feelings of sadness or depression
- ☐ Feelings of anger or irritability
- ☐ Feelings of anxiety or panic
- ☐ Feelings of detachment or numbness
- ☐ Overwhelmed by emotions

### Physical Symptoms

- ☐ Headaches or migraines
- ☐ Stomach issues or digestive problems
- ☐ Changes in sleep patterns (difficulty sleeping, nightmares)
- ☐ Changes in appetite (loss of appetite, overeating)
- ☐ Fatigue or lack of energy

### Behavioral Symptoms

- ☐ Increased irritability or aggression
- ☐ Avoidance of places, people, or activities that remind you of the trauma
- ☐ Engaging in risk-taking behaviors or substance use
- ☐ Difficulty maintaining routines or commitments
- ☐ Withdrawal from social interactions

### Cognitive Symptoms

- ☐ Difficulty concentrating or focusing
- ☐ Intrusive thoughts or flashbacks
- ☐ Memory problems (forgetting parts of the traumatic event)
- ☐ Feeling overly alert or easily startled
- ☐ Difficulty making decisions

# Worksheet Exercise:

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## Discussion Questions

The following questions are designed to help us explore and understand how trauma has impacted different aspects of your life. Please take your time to reflect on each question and share your thoughts openly.

Your responses will guide our discussion and help us develop strategies to support your healing journey.

### **EMOTIONAL SYMPTOMS**

We will explore feelings such as sadness, anger, anxiety, numbness, and being overwhelmed by emotions.

Reflect on how these emotions manifest in your daily life, any triggers you've identified, and how they affect your relationships and overall well-being.

#### **Feelings of sadness or depression**

How often do you experience feelings of sadness or depression?

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Are there specific situations or memories that trigger these feelings?

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How do these feelings impact your daily life and activities?

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#### **Feelings of anger or irritability**

When do you notice yourself feeling angry or irritable the most?

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How intense are these feelings, and how do you typically respond to them?

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Have others noticed changes in your mood or behavior when you're feeling this way?

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# Worksheet Exercise:

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## **Feelings of anxiety or panic**

Can you describe situations or events that trigger feelings of anxiety or panic for you?

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How do you typically cope with these feelings in the moment?

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Have you noticed any physical symptoms accompanying these episodes (e.g., racing heart, sweating)?

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## **Feelings of detachment or numbness**

When do you notice feelings of detachment or numbness the most?

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How do you describe these feelings? Do you feel disconnected from yourself or others?

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Have you noticed any patterns or triggers that bring on these feelings?

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## **Overwhelmed by emotions**

What emotions do you often feel overwhelmed by?

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How does feeling overwhelmed affect your ability to manage daily tasks or responsibilities?

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Are there specific times or situations when you feel more overwhelmed than others?

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# Worksheet Exercise:

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## **PHYSICAL SYMPTOMS**

We will discuss physical symptoms such as headaches, digestive issues, changes in sleep patterns, appetite changes, and fatigue.

Consider how these symptoms impact your daily activities, any patterns or triggers you've noticed, and strategies you've used to manage them.

### **Headaches or migraines**

How often do you experience headaches or migraines?

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Do you notice any patterns or triggers for these headaches?

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How do headaches or migraines impact your daily life and activities?

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### **Stomach issues or digestive problems**

Have you experienced any stomach issues or digestive problems since the traumatic event?

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Are there specific foods, situations, or emotions that seem to trigger these issues?

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How do these digestive problems affect your daily routine?

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### **Changes in sleep patterns**

How has your sleep been affected since the traumatic event?

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## Worksheet Exercise:

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Do you experience difficulty falling asleep, staying asleep, or nightmares?

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How do these sleep disturbances impact your daytime functioning?

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### **Changes in appetite**

Have you noticed any changes in your appetite or eating habits?

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Do you find yourself eating more or less than usual, or having cravings for specific foods?

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How do these changes in appetite affect your energy levels and overall well-being?

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### **Fatigue or lack of energy**

How often do you feel fatigued or lacking in energy?

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Are there specific times of day or activities that seem to drain your energy more than others?

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How does fatigue impact your ability to engage in daily activities and responsibilities?

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# Worksheet Exercise:

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## **COGNITIVE SYMPTOMS**

We will explore cognitive challenges such as difficulty concentrating, intrusive thoughts or flashbacks, memory problems, heightened alertness, and decision-making difficulties.

Share how these symptoms affect your work, study, or daily tasks, and any coping strategies you find helpful.

### **Difficulty concentrating or focusing**

When do you notice difficulty concentrating or focusing the most?

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How does this difficulty affect your work, school, or daily tasks?

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Have you noticed any strategies that help improve your concentration?

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### **Intrusive thoughts or flashbacks**

Can you describe any intrusive thoughts or flashbacks you experience related to the traumatic event?

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How often do these thoughts or memories intrude into your daily life?

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Do certain triggers or reminders prompt these intrusive thoughts or flashbacks?

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### **Memory problems**

Have you experienced any memory problems since the traumatic event?

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# Worksheet Exercise:

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Are there specific types of memories or information that seem more difficult to recall?

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How do these memory issues impact your daily life and interactions with others?

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## **Feeling overly alert or easily startled**

Do you often feel overly alert or on edge?

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What situations or environments make you feel more vigilant or easily startled?

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How does this heightened alertness impact your daily activities and relationships?

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## **Difficulty making decisions**

Have you noticed any challenges in making decisions since the traumatic event?

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What factors or concerns typically make decision-making difficult for you?

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How does difficulty making decisions affect your confidence and sense of control?

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# Worksheet Exercise:

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## **BEHAVIORAL SYMPTOMS**

We will discuss behavioral changes including increased irritability or aggression, avoidance behaviors, engagement in risk-taking or substance use, difficulty maintaining routines or commitments, and withdrawal from social interactions.

Reflect on how these behaviors impact your relationships, daily life, and overall sense of well-being.

### **Increased irritability or aggression**

Have you noticed any changes in your level of irritability or aggression since the traumatic event?

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What situations or triggers seem to provoke these reactions?

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How do these behaviors affect your relationships with others?

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### **Avoidance behaviors**

Are there places, people, or activities that you actively avoid because they remind you of the trauma?

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How does avoiding these reminders impact your daily life and social interactions?

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Do you feel that avoidance behaviors help or hinder your ability to cope with the trauma?

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# Worksheet Exercise:

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## **Engaging in risk-taking behaviors or substance use**

Have you noticed any changes in your behaviors related to risk-taking or substance use since the traumatic event?

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Do you find yourself using substances or engaging in risky behaviors as a way to cope with emotions or memories related to the trauma?

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How do these behaviors affect your overall well-being and relationships?

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## **Difficulty maintaining routines or commitments**

Have you experienced challenges in maintaining routines or fulfilling commitments since the traumatic event?

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What aspects of your daily routine or responsibilities have been most affected?

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How do these difficulties impact your sense of stability and self-esteem?

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## **Withdrawal from social interactions**

Do you find yourself withdrawing from social interactions more than you did before the traumatic event?

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How do these difficulties impact your sense of stability and self-esteem?

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## Worksheet Exercise:

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How does isolation affect your mood and sense of connection with others?

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These questions are meant to guide our discussion and help us explore how trauma has impacted different areas of your life. Your responses will help us develop strategies and interventions to support your healing process.

By answering these questions, we aim to gain a comprehensive understanding of how trauma has affected you. Together, we will work towards identifying effective coping mechanisms, building resilience, and fostering healing.

Your insights are valuable in shaping our therapeutic approach.

# Stages of Trauma

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The stages of trauma can vary depending on the framework or model being used. However, a commonly accepted model for understanding the stages of trauma involves the following stages:

## Stage 1

### **SHOCK AND DENIAL**

**Shock:** Initial reaction to the traumatic event, characterized by feelings of numbness, disbelief, and emotional detachment. It's a defense mechanism that helps buffer the immediate impact of the event.

**Denial:** Difficulty accepting the reality of what has happened. This can manifest as refusing to acknowledge the trauma or minimizing its significance.

## Stage 2

### **INTRUSION AND RE-EXPERIENCING**

**Intrusion:** Unwanted and distressing memories of the traumatic event intrude into the person's mind. These can take the form of flashbacks, nightmares, and intrusive thoughts.

**Re-experiencing:** The person may feel as though they are reliving the trauma, which can lead to significant distress and anxiety.

## Stage 3

### **AVOIDANCE AND NUMBING**

**Avoidance:** Deliberate efforts to avoid thoughts, feelings, conversations, places, or people that are reminders of the trauma. This can include isolating oneself and withdrawing from social activities.

**Numbing:** Emotional numbing, where the person becomes detached from their emotions, may have difficulty experiencing positive emotions, and may feel disconnected from others.

# Stages of Trauma

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## Stage 4

### **HYPERAROUSAL AND REACTIVITY**

**Hyperarousal:** Increased arousal and heightened anxiety, leading to symptoms such as difficulty sleeping, irritability, hypervigilance (being constantly on guard), and an exaggerated startle response.

**Reactivity:** The person may have difficulty concentrating and may be easily startled or agitated.

## Stage 5

### **RESOLUTION AND INTEGRATION**

**Resolution:** Gradual process of coming to terms with the trauma, reducing the intensity and frequency of re-experiencing and hyperarousal symptoms. The person begins to process and understand the trauma, integrating it into their life narrative.

**Integration:** The trauma becomes a part of the person's past rather than a defining feature of their present. The individual develops coping strategies, re-engages with life, and forms new meaning and purpose.

These stages are not always linear, and individuals may move back and forth between them or experience them simultaneously. The process of healing from trauma is unique to each person, and the duration and intensity of each stage can vary widely.

# Worksheet Exercise:

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## **SAFE PLACE WORKSHEET**

This worksheet is designed to help you create and visualize a safe place in your mind that you can retreat to during times of stress or distress. This safe place can serve as a calming refuge where you feel secure and at peace.

Take your time with each step to imagine and build your safe place in detail.

## **INSTRUCTIONS**

- **Imagination:** Allow yourself to freely imagine and visualize your safe place without limitations.
- **Detail:** The more detailed your description, the more vivid and effective your safe place visualization will be.
- **Comfort:** Choose elements that genuinely make you feel safe, calm, and secure.

### **STEP 1: CHOOSE YOUR SAFE PLACE**

1. Close your eyes and take a few deep breaths. Allow yourself to relax and settle into a comfortable position.
2. Imagine a place where you feel completely safe and at ease. It could be a real location you know well or an entirely imaginary place.
3. Describe your safe place.

### **STEP 2: ENGAGE YOUR SENSES**

1. Visualize the details of your safe place.
  - Take a moment to picture the scene clearly in your mind. Imagine yourself surrounded by the sights, sounds, and sensations of this peaceful environment.
2. Focus on the sounds:
  - What do you hear around you? Listen closely to the calming sounds that contribute to the peaceful atmosphere of your safe place.
3. Notice the scents:
  - Breathe in deeply and notice any pleasant smells in your safe place. Allow these scents to evoke feelings of relaxation and comfort.
4. Feel the textures:
  - Touch and explore the textures of objects or surfaces in your safe place. Notice how these textures make you feel safe and grounded.

# Worksheet Exercise:

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## **STEP 3: EMBRACE THE FEELINGS OF SAFETY**

1. Embrace the sense of safety and security:
  - Allow yourself to immerse fully in the feelings of peace and security that your safe place provides. Let go of any tension or stress as you spend time in this comforting space.
2. Reflect on the emotions evoked by your safe place:
  - How do you feel when you imagine yourself in this safe place? Notice any emotions that arise, such as calmness, relief, or joy.

## **STEP 4: CREATE A MENTAL REFUGE**

1. Use your safe place as a mental refuge:
  - Whenever you feel stressed, anxious, or overwhelmed, close your eyes and visualize your safe place. Imagine yourself returning to this peaceful sanctuary to find comfort and relaxation.
2. Practice revisiting your safe place regularly:
  - Spend a few moments each day imagining yourself in your safe place. This practice can help reinforce feelings of safety and relaxation over time.

Creating a safe place in your mind can be a powerful tool for managing stress and promoting emotional well-being.



## Worksheet Exercise:

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# My Safe Place

**What can you smell?**

(e.g., flowers, fresh air, comforting scents)

**What can you feel?**

(e.g., warmth of the sun, cool breeze,  
soft textures)

**Are there any specific objects or elements that make this place feel safe?**

(e.g., favorite chair, soothing artwork, symbolic items)

## Worksheet Exercise:

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# My Safe Place

**Where is it located?**

(e.g., beach, forest, mountains, cozy room)

**What does it look like?**

(e.g., colors, scenery, surroundings)

**What can you hear in your safe place?**

(e.g., sounds of nature, calming music, silence)

# Understanding Trauma Bonding

Trauma bonding is a psychological response where a person forms an unhealthy attachment to an abuser. This bond often develops out of repeated cycles of abuse, followed by positive reinforcement or intermittent positive treatment.

Trauma bonding is characterized by a strong emotional attachment between an abused person and their abuser. It develops from a cycle of abuse and positive reinforcement, creating a complex emotional dependency.

## CHARACTERISTICS OF TRAUMA BONDING

- Feeling loyal to someone despite experiencing harmful behavior.
- Making excuses for the abusive behavior.
- Believing that the abuser can change if you love them enough.
- Difficulty leaving the relationship, even if it's causing significant harm.
- Confusing intense emotional highs and lows with true love.

## Psychological Mechanisms Behind Trauma Bonding

### INTERMITTENT REINFORCEMENT

The cycle of abuse followed by intermittent positive reinforcement (such as apologies, affection, or gifts) strengthens the bond. The unpredictability of affection makes the bond stronger.

### DEPENDENCY

The victim may become emotionally and sometimes physically dependent on the abuser, believing they cannot survive without them.

### ISOLATION

Abusers often isolate their victims from friends, family, and other support systems, intensifying the dependency and bond.

## EFFECTS OF TRAUMA BONDING ON THE VICTIM

- Difficulty trusting others and forming healthy relationships
- Low self-esteem and self-worth
- Persistent anxiety and fear
- Emotional instability and mood swings
- Development of mental health disorders (e.g., PTSD, depression)

# Seven Stages of Trauma Bonding

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Understanding these stages can help in identifying trauma bonding in relationships. Trauma bonding is a complex emotional response often seen in abusive relationships where the cycle of abuse creates a powerful emotional attachment between the abuser and the victim.

This bond is reinforced through intermittent reinforcement of positive and negative behaviors, making it extremely difficult for the victim to leave the relationship.

## Stage 1

### **THE LOVE BOMBING STAGE**

The abuser showers the victim with excessive attention, affection, and gifts to win their trust and affection. This initial phase often feels exhilarating and overwhelmingly positive, creating a strong emotional connection.

**Impact:**

The victim feels special and valued, which makes the subsequent abusive behaviors more confusing and disorienting.

## Stage 2

### **TRUST AND DEPENDENCY**

The victim starts to trust the abuser and becomes emotionally dependent on them. The abuser fosters this dependency by positioning themselves as the victim's primary or sole source of support and affection.

**Impact:**

The victim begins to believe they are special and unique to the abuser, which deepens the emotional bond and makes them reliant on the abuser for emotional sustenance.

## Stage 3

### **THE CRITICISM STAGE**

The abuser begins to criticize and devalue the victim, often subtly at first. This can include making disparaging comments, belittling achievements, or questioning the victim's worth.

**Impact:**

These criticisms cause the victim to question their self-worth and value, undermining their confidence and making them more susceptible to further manipulation.

# Seven Stages of Trauma Bonding

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## Stage 4

### **THE GASLIGHTING STAGE**

The abuser manipulates the victim into doubting their reality and sanity. This can involve denying past abuse, trivializing the victim's feelings, or making the victim feel irrational.

#### **Impact:**

Gaslighting erodes the victim's ability to trust their own perceptions and judgments, making them increasingly reliant on the abuser for validation of reality.

## Stage 5

### **THE RESIGNATION STAGE**

The victim becomes resigned to the situation, feeling trapped and powerless to change it. They may start to blame themselves for the abuse, believing it is their fault.

#### **Impact:**

Resignation leads to a sense of hopelessness and helplessness, further entrenching the victim in the abusive relationship.

## Stage 6

### **LOSS OF SELF**

The victim loses their sense of self, becoming increasingly isolated and dependent on the abuser for validation and identity. Their world narrows to focus almost exclusively on the abuser and the relationship.

#### **Impact:**

This stage often involves significant social isolation, as the victim withdraws from friends, family, and activities that once brought joy and a sense of self-worth.

## Stage 7

### **EMOTIONAL ADDICTION**

The victim becomes addicted to the intense emotional highs and lows of the relationship. The unpredictable cycles of abuse and affection create a powerful emotional dependency similar to addiction.

#### **Impact:**

This addiction makes it incredibly difficult for the victim to break free from the relationship, as they become dependent on the cyclical nature of the abuser's behavior.

# Worksheet Exercise:

## **RECOGNIZING TRAUMA BONDING IN YOUR LIFE**

This worksheet is designed to help you identify potential signs of trauma bonding in your relationship. Trauma bonding can occur when a person becomes emotionally attached to someone who is abusive or harmful, leading to a cycle of abuse and reconciliation. Use the checklist and reflection questions to gain insight into your relationship dynamics.

Go through the following yes/no questions carefully. Answer honestly based on your experiences and feelings in your relationship.

### QUESTIONS:

- |       |   |                              |                             |
|-------|---|------------------------------|-----------------------------|
| 1     | Do you frequently experience intense emotional highs and lows with this person? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| <hr/> |   |                              |                             |
| 2     | Do you often feel confused about whether the relationship is loving or harmful? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| <hr/> |   |                              |                             |
| 3     | Do you find yourself justifying or minimizing the person's harmful behavior?    | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| <hr/> |   |                              |                             |
| 4     | Do you often defend the person to others, even when they hurt you?              | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| <hr/> |   |                              |                             |
| 5     | Do you constantly seek to please or gain approval from this person?             | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| <hr/> |   |                              |                             |
| 6     | Does the person alternate between being apologetic and hurtful?                 | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| <hr/> |   |                              |                             |
| 7     | Has your self-esteem decreased since being in this relationship?                | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| <hr/> |   |                              |                             |
| 8     | Do you feel dependent on the person's approval and validation?                  | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| <hr/> |   |                              |                             |

## Worksheet Exercise:

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### QUESTIONS:

9 Have you become isolated from friends, family, or support networks? ☐ YES ☐ NO

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10 Do you feel unable to talk to others about your relationship issues? ☐ YES ☐ NO

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11 Are you afraid to leave the relationship due to potential consequences? ☐ YES ☐ NO

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12 Does the person try to control aspects of your life (e.g., who you see, what you do)? ☐ YES ☐ NO

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13 Are there repeated cycles of hurt followed by reconciliation? ☐ YES ☐ NO

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14 Are the reconciliations becoming less frequent or less meaningful? ☐ YES ☐ NO

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15 Do you feel overly dependent on the person for emotional support? ☐ YES ☐ NO

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16 Do you feel unable to make decisions without their input? ☐ YES ☐ NO

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17 Do you experience physical symptoms (e.g., headaches, fatigue) related to relationship stress? ☐ YES ☐ NO

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18 Have you developed unhealthy coping mechanisms (e.g., substance abuse)? ☐ YES ☐ NO

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## Worksheet Exercise:

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### QUESTIONS:

19 Are your personal boundaries often disrespected? ☐ YES ☐ NO

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20 Do you have difficulty asserting your needs or saying no? ☐ YES ☐ NO

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21 Does the relationship feel one-sided in terms of giving and receiving support? ☐ YES ☐ NO

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22 Do you feel drained rather than uplifted after interactions with the person? ☐ YES ☐ NO

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23 Do you feel hopeless about the future of the relationship? ☐ YES ☐ NO

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24 Do you see no realistic path to improvement? ☐ YES ☐ NO

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25 Does this relationship resemble past harmful relationships or experiences? ☐ YES ☐ NO

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26 Do you feel like you are repeating a cycle from your past? ☐ YES ☐ NO

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# Worksheet Exercise:

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## **REFLECT ON YOUR RESPONSES**

After completing the checklist, take some time to reflect on your answers. If you answered "Yes" to many of these questions, it might indicate the presence of trauma bonding in your relationship. Use the following reflection questions to delve deeper into your experiences:

### **Patterns and Behaviors**

What patterns or behaviors stood out to you the most from the checklist?

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How do these patterns make you feel about yourself and your relationship?

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Are there specific instances that exemplify these patterns?

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### **Self-Worth and Isolation**

How has your self-esteem been affected by this relationship?

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In what ways has your social life changed since being in this relationship?

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### **Fear and Control**

What are your main fears about leaving the relationship?

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How does the person attempt to control your life, and how do you respond?

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# Worksheet Exercise:

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## **Cycle of Abuse and Dependence**

How often do you go through cycles of hurt and reconciliation? How do these cycles impact you?

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In what ways do you feel dependent on the person for emotional support?

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## **Health Impact and Boundaries**

What physical symptoms have you noticed that might be related to stress from the relationship?

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Can you think of times when your boundaries were disrespected? How did that make you feel?

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## **Future Outlook and Past Patterns**

What are your thoughts and feelings about the future of this relationship?

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Do you see any similarities between this relationship and past harmful relationships?

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# Worksheet Exercise:

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## **EXPLORING YOUR FEELINGS AND BEHAVIORS**

Take a few moments to reflect on your relationship. Use the following prompts to guide your journaling. Answer each question honestly and in as much detail as you feel comfortable.

This exercise aims to help you gain clarity and understanding about your feelings and behaviors in the context of your relationship.

- 1 Describe a specific instance where you felt hurt by the person you are bonded to. How did you react?

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- 2 Write about a time when the person showed you affection or kindness after a period of abuse. How did it make you feel?

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- 3 Consider the reasons you stay in the relationship. What fears or beliefs hold you back from leaving?

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## Worksheet Exercise:

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- 4 Reflect on how your self-esteem and sense of self-worth are influenced by this relationship.

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- 5 How do you typically feel before and after interactions with this person? What emotions are most common?

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- 6 Have you noticed any changes in your behavior or personality since the relationship began? Describe these changes.

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- 7 How does the person react when you express your feelings or concerns? How do their reactions make you feel?

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## Worksheet Exercise:

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- 8 Think about a time when you justified or minimized the person's harmful behavior. What were the circumstances?

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- 9 Do you ever feel like you're walking on eggshells around this person? If so, describe a situation when you felt this way.

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- 10 What are some positive qualities or behaviors that keep you bonded to this person? How do these compare to the negative ones?

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- 11 Reflect on any patterns or cycles you notice in the relationship, such as periods of calm followed by conflict. How do these cycles affect you?

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## Worksheet Exercise:

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- 12 How does this relationship impact your other relationships with friends and family? Have you become more isolated?

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- 13 Describe a time when you felt hopeful about the future of the relationship. What made you feel this way?

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- 14 Conversely, describe a time when you felt hopeless about the relationship. What contributed to this feeling?

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- 15 Do you feel like you can be yourself in this relationship? Why or why not?

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## Worksheet Exercise:

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- 16 How do you cope with the stress or anxiety that comes from the relationship? Are these coping mechanisms healthy?

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- 17 What do you fear most about the possibility of ending the relationship? How realistic do you think these fears are?

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- 18 Think about your boundaries in this relationship. Are they respected? How do you handle situations when they are not?

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## Worksheet Exercise:

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- 19 Reflect on any moments when you felt a strong need to please the person, even at the cost of your own well-being. Why did you feel this way?

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- 20 How does this relationship compare to other relationships you have had in the past? Are there any recurring patterns or themes?

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After completing the journaling exercise, take some time to review your answers. This exercise is meant to help you understand your feelings and behaviors better and to consider steps you might take to improve your well-being.

# Trauma Bonding vs. Healthy Bonding

## Trauma Bonding

You experience relationships marked by intense emotional highs and lows.

You feel emotionally dependent on the other person, often believing you can't live without them.

You find yourself isolated from friends, family, and other support systems due to the relationship.

You notice manipulation, gaslighting, and control within the relationship.

You feel insecure and have a prevalent fear of abandonment.

You see a cycle of abuse followed by periods of affection in the relationship.

## Healthy Bonding

You experience stable and consistent relationships with mutual respect and support.

You and your partner maintain your independence while supporting each other.

You both maintain healthy relationships with friends and family.

You base your relationship on honesty, trust, and open communication.

You and your partner feel secure and valued in the relationship.

You find that the relationship promotes personal growth and well-being for both of you.

## EXERCISES TO WORK THROUGH TRAUMA

Healing from trauma involves a multifaceted approach that includes psychological, emotional, and physical strategies. Here are some effective exercises to help work through trauma:

1

### Grounding Techniques

- Grounding exercises, such as deep breathing, mindfulness, and sensory awareness, help individuals stay present and reduce the overwhelming feelings associated with trauma.

2

### Journaling

- Writing about one's experiences and feelings can provide an outlet for expression and help make sense of traumatic events.

3

### Physical Activity

- Engaging in regular physical exercise, such as walking, yoga, or dancing, can help release pent-up tension and stress from the body.

## 4

### Therapeutic Art

- Creative activities like drawing, painting, or music can facilitate emotional expression and provide a sense of relief and accomplishment.
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## 5

### Professional Therapy

- Seeking support from a mental health professional, such as a therapist or counselor, can provide structured guidance and evidence-based techniques for trauma recovery.

## BREAKING THE CYCLE OF TRAUMA BONDING

Healing from trauma involves a multifaceted approach that includes psychological, emotional, and physical strategies. Here are some effective exercises to help work through trauma:

### Action Steps:

#### SEEK SUPPORT

You should reach out to a trusted friend, family member, or therapist who can offer support and perspective.

#### EDUCATE YOURSELF

You can learn more about trauma bonding and abusive relationships to better understand your situation.

#### CREATE A SAFETY PLAN

If you decide to leave the relationship, you need to plan how to do so safely, considering physical, emotional, and financial aspects.

#### SET BOUNDARIES

You must establish and enforce boundaries to protect your well-being. Communicate clearly what behaviors are unacceptable.

#### PRACTICE SELF-CARE

You should engage in activities that promote your physical and emotional health, such as exercise, meditation, and hobbies.

# Worksheet Exercise:

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## ACTION PLAN FOR SELF-CARE AND HEALING

This worksheet is designed to help you identify your needs, set realistic goals for self-care, and reflect on healthy relationship dynamics. Take your time to answer each prompt thoughtfully as you work through these exercises.

### Physical Needs:

What are your essential physical needs (e.g., sleep, nutrition, exercise)?

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How can you ensure these needs are consistently met?

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### Emotional Needs:

What emotions do you need to acknowledge and address in your life right now?

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Who or what activities help you feel emotionally supported and fulfilled?

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# Worksheet Exercise:

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## ACTION PLAN FOR SELF-CARE AND HEALING

### Social Needs:

Who are the people in your life who provide positive social interaction and support?

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How can you maintain or strengthen these relationships?

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### Prioritization:

Reflecting on your lists of physical, emotional, and social needs, what is most important to address right now?

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Why is addressing this need a priority for your well-being?

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# Worksheet Exercise:

## SELF-CARE GOALS CALENDAR

Use this calendar to plan and track your self-care goals over the next month. Fill in each day with the specific self-care activity you plan to do. Remember to be consistent and prioritize your well-being.

Week 1	Self Care Activity
Monday	
Tuesday	
Wednesday	
Thursday	
Friday	
Saturday	
Sunday	

Week 2	Self Care Activity
Monday	
Tuesday	
Wednesday	
Thursday	
Friday	
Saturday	
Sunday	

# Worksheet Exercise:

## SELF-CARE GOALS CALENDAR

Week 3	Self Care Activity
Monday	
Tuesday	
Wednesday	
Thursday	
Friday	
Saturday	
Sunday	

Week 4	Self Care Activity
Monday	
Tuesday	
Wednesday	
Thursday	
Friday	
Saturday	
Sunday	



## Conclusion

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Healing from trauma and trauma bonding takes courage and patience. This workbook offers tools and exercises to help you understand your experiences and start healing.

**Remember, healing is a journey and every small step counts.**

Be kind to yourself as you continue forward. Healing takes time, and it's okay to seek help and support. Recognize your progress and stay open to the positive changes that come with healing.

**You are not alone in this.** Many have found their way to a place of peace and strength. Trust in your ability to heal and keep moving toward the life you deserve.

Thank you for using this guide. We wish you strength and healing as you move forward.

**With support,**

***Rabbi Shlomo Slatkin MS, LCPC***  
***The Marriage Restoration Project***

### Contact Us



*Speak to a Marriage Counselor at  
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*Book a time to talk*



[www.themarriagerestorationproject.com](http://www.themarriagerestorationproject.com)

## References

### **7 STAGES OF TRAUMA BONDING: A GUIDE AND WORKSHEET,**

<https://catalinabehavioralhealth.com/mental-health-treatment/trauma/7-stages-of-trauma-bonding/>

### **23 Post Traumatic Growth Worksheets for Therapy (+PDF)**

<https://positivepsychology.com/post-traumatic-growth-worksheets/#trauma-worksheets-pdf>

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