**Feelings, Thoughts and Behaviour**

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| **EVENT** | | | |
| **FEELINGS** | | | |
| **How do I feel?** | | | |
| **THOUGHTS** | | | |
| **What do I think?** | **What choices do I have?** | | **Possible effects of these choices on me and others** |
| **BEHAVIOUR** | | | |
| **What do I choose to do?** | | **What will keep others and myself feeling safe?** | |