

# WINDOW OF TOLERANCE



## **Hyperarousal** **fight or flight response**

Feeling anxious, overwhelmed,  
angry, out of control



## **Optimal arousal zone** **feeling a sense of safety and calm**

Feelings are tolerable, reason and emotion are  
accessible, the body feels balanced and relaxed

Use mindfulness, meditation, breath work, physical  
movement, and grounding exercises to get here

Feeling depressed, numb, disconnected,  
unmotivated

## **shutting down response** **Hypoarousal**



@therapytoolsforall

# WINDOW OF TOLERANCE: BUILDING AWARENESS



Build an awareness and identify the symptoms you experience in each state. Check the ones that you feel and rate their intensity from 1 to 5, where 1 is low intensity and 5 is the highest intensity.

## Hyperarousal – fight or flight

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> ___ Anxious           | <input type="checkbox"/> ___ Intrusive imagery   | <input type="checkbox"/> ___ Fight/flight |
| <input type="checkbox"/> ___ Angry             | <input type="checkbox"/> ___ Emotional overwhelm | <input type="checkbox"/> ___ Irritable    |
| <input type="checkbox"/> ___ Tense             | <input type="checkbox"/> ___ Feeling unsafe      | <input type="checkbox"/> ___ Panicky      |
| <input type="checkbox"/> ___ Shaking           | <input type="checkbox"/> ___ Hyper-vigilant      | <input type="checkbox"/> ___ _____        |
| <input type="checkbox"/> ___ Defensive         | <input type="checkbox"/> ___ Impulsive           | <input type="checkbox"/> ___ _____        |
| <input type="checkbox"/> ___ Racing thoughts   | <input type="checkbox"/> ___ Highly reactive     | <input type="checkbox"/> ___ _____        |
| <input type="checkbox"/> ___ Chaotic responses | <input type="checkbox"/> ___ Rigid               | <input type="checkbox"/> ___ _____        |

## Window of tolerance – optimal

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> ___ Feeling safe | <input type="checkbox"/> ___ At ease             | <input type="checkbox"/> ___ Curious      |
| <input type="checkbox"/> ___ Calm         | <input type="checkbox"/> ___ Able to self-soothe | <input type="checkbox"/> ___ Non-reactive |
| <input type="checkbox"/> ___ Relaxed      | <input type="checkbox"/> ___ Engaged             | <input type="checkbox"/> ___ Connected    |
| <input type="checkbox"/> ___ Present      | <input type="checkbox"/> ___ Alert               | <input type="checkbox"/> ___ _____        |
| <input type="checkbox"/> ___ Mindful      | <input type="checkbox"/> ___ Feeling in control  | <input type="checkbox"/> ___ _____        |
| <input type="checkbox"/> ___ Empathetic   | <input type="checkbox"/> ___ Comfortable         | <input type="checkbox"/> ___ _____        |
| <input type="checkbox"/> ___ Open         | <input type="checkbox"/> ___ Balanced            | <input type="checkbox"/> ___ _____        |

## Hypoarousal – shutting down

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> ___ Disconnected     | <input type="checkbox"/> ___ Memory loss     | <input type="checkbox"/> ___ Feeling flat |
| <input type="checkbox"/> ___ No energy        | <input type="checkbox"/> ___ Depression      | <input type="checkbox"/> ___ Lethargic    |
| <input type="checkbox"/> ___ Numb/no feelings | <input type="checkbox"/> ___ Can't say no    | <input type="checkbox"/> ___ Passive      |
| <input type="checkbox"/> ___ Ashamed          | <input type="checkbox"/> ___ Freeze response | <input type="checkbox"/> ___ _____        |
| <input type="checkbox"/> ___ Shut down        | <input type="checkbox"/> ___ Dissociated     | <input type="checkbox"/> ___ _____        |
| <input type="checkbox"/> ___ Unmotivated      | <input type="checkbox"/> ___ Exhausted       | <input type="checkbox"/> ___ _____        |
| <input type="checkbox"/> ___ On auto-pilot    | <input type="checkbox"/> ___ Not present     | <input type="checkbox"/> ___ _____        |

# WINDOW OF TOLERANCE: BUILDING AWARENESS



## I NOTICE I AM IN MY WINDOW OF TOLERANCE WHEN I...

*(reflect and write down what puts you in your optimal state; this could be self-care activities, connecting with people, doing something you enjoy or feel passionate about, self-soothe, etc.)*



## MY WINDOW CLOSES WHEN I AM...

*(reflect and write down what things affect your window of tolerance, such as being hungry and tired, feeling lonely and isolated, in physical pain, scared, reminded of painful memories, etc.)*



## THINGS I CAN DO WHEN I AM HYPERAROUSSED:



## THINGS I CAN DO WHEN I AM HYPOAROUSSED:



# WINDOW OF TOLERANCE: COPING SKILLS



## DOWN-REGULATING ACTIVITIES FOR HYPERAROUSAL

- Deep and slow tummy breathing
- Slowly drinking from a straw
- Weighted blanket
- Warm water
- Shaking out excess energy
- Gentle stretching or yoga
- Listening to calming music
- Tensing and releasing parts of the body
- Brisk walk / marching on the spot
- Squeezing a stress ball
- Rolling over a yoga / therapy ball
- Scribbling to music
- Visualizing going to a favorite place
- Using the 5 senses to describe an object

## UP-REGULATING ACTIVITIES FOR HYPOAROUSAL

- Stimulating the senses
- Smelling a candle / essential oils
- Eating chewy, crunchy food
- Using a sensory shaker
- Rolling a pencil between palms
- Hand washing / massage
- Squeezing a stress ball
- Feeling the soles of the feet on the floor
- Quick tempo music and dancing
- Wiggling toes while breathing
- Using the 5 senses to describe an object
- Rocking chair
- Jumping or running
- Taking a cold shower

## GENERAL COPING SKILLS

- Calling a trusted friend
- Journaling
- Reading a book
- Practicing mindfulness
- De-cluttering your space
- Asking for a hug
- Doing a favorite hobby
- Writing 3 things you're grateful for
- Saying 5 things you love about yourself
- Trying something new
- Meditating
- Listening to relaxation sounds
- Solving a puzzle
- Spending time with family and friends