# <u>P.T.S.D</u> Self- Reflection Questionnaire

#### 1. Thoughts and Feelings

Do you ever have flashbacks that make it feel like the event is happening again? Do nightmares disturb your sleep? Do certain sounds, smells, or images bring back overwhelming memories? Do you find intrusive thoughts about what happened appearing frequently? Do you feel emotionally overwhelmed and activated when reminded of the past?

#### 2. Avoidance & Numbing

Do you avoid places, people, or situations that remind you of what happened? Do you steer clear of conversations or thoughts connected to the trauma? Do you notice yourself shutting down feelings or going emotionally "blank"? Do you distract yourself excessively (work, relationships, substances, screens) to avoid painful emotions? Do you struggle to remember important parts of what happened?

#### 3. Hyperarousal & Reactivity

Do you feel constantly "on edge" or hyper-alert? Are you easily startled by noises or sudden movements? Do you have trouble falling asleep or staying asleep? Do you find it difficult to concentrate or stay focused? Do you experience frequent irritability or bursts of anger?

## 4. Changes in Mood & Thinking

Do you feel guilt, shame, or rage about what happened? Do you notice a loss of interest in activities you once enjoyed? Do you feel detached or disconnected from yourself and others? Do you struggle to trust people or feel safe with them? Do you feel a sense of hopelessness about the future?

### **Closing Note**

This questionnaire is not a diagnosis. If any of these experiences feel familiar, there is nothing wrong with you — something wrong happened to you and these are common trauma responses. Support is available, healing is possible, and you do not have to walk the path alone.