





## T<sup>3</sup> Check-In

- Is there any discomfort or pain in your body?
  - Where is it?
- Did you sleep as much as you needed to sleep last night?
- Did you eat the foods you wanted and needed to eat today?
- Have you spent time in a place where you felt you belonged?
- Do you have what you need?
- Do you contribute to "The Work" in a way that feels meaningful to you?
- Do you feel safe?

### **Transformation**

# What is your WHY?

### **Transformation**

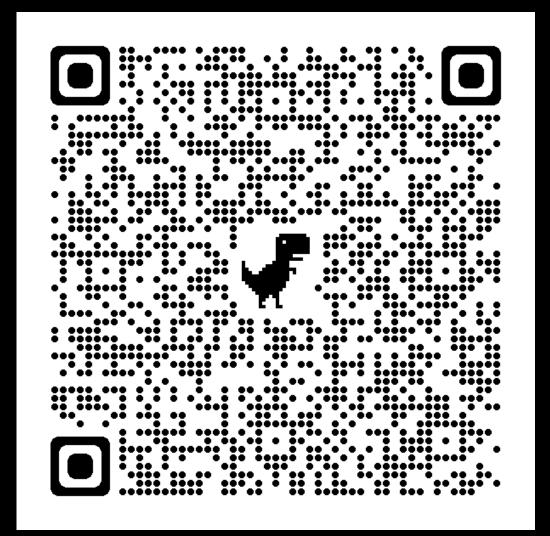
# Where do you need to say NO so that you can say YES?

### **Transformation**

As you center the most the most vulnerable, have you considered yourself?

## Thank You

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### Thank You!

#### Please complete the evaluation for this session.

Click on the link in the Chat, then select:

Day One

Workshop

**Transforming Trauma into Trust**