



## DETANGLE: Unraveling Your Points of Pain

What we focus on gets bigger. You don't have to keep going at this pace and in this direction. I know. I know. You're trying to elevate, get a promotion, successfully raise your children, build your business, become a mogul, increase your quality of life, get unstuck, etc. The list goes on for reasons why you're feeling stressed, aggravated and/or overwhelmed. However, if this pace and pathway is leading to your destruction, what ever is the point?! You can choose different. If you're ready to do so, let's get started.

### PROFESSIONAL IN AN ORGANIZATION:

1. What are your points of pain (POP), if any, around work?

<input type="checkbox"/> Feeling inadequate	<input type="checkbox"/> Too much responsibility
<input type="checkbox"/> Not feeling valued	<input type="checkbox"/> Underpaid
<input type="checkbox"/> Heavy workload	<input type="checkbox"/> You are not performing well
<input type="checkbox"/> Not enjoying type of work	<input type="checkbox"/> Discrimination
<input type="checkbox"/> Dislike work environment	<input type="checkbox"/> No allies
<input type="checkbox"/> Want to change careers	<input type="checkbox"/> Work environment isn't a fit
<input type="checkbox"/> Contentious relationship with boss	<input type="checkbox"/> Concerned about layoffs/changes
<input type="checkbox"/> Commute to work	<input type="checkbox"/> Type of work has become less fulfilling
<input type="checkbox"/> Employees not performing	<input type="checkbox"/> No clear career path
<input type="checkbox"/> Bored/not being challenged	<input type="checkbox"/> Unsatisfactory benefits
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____



2. For each POP, complete the following process (you may have to use your journal or another piece of paper).

A. Name POP: \_\_\_\_\_

B. What do you believe to be the reason the POP exists? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

C. What steps can you take to relieve the POP? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**PROFESSIONAL RUNNING AN ORGANIZATION:**

1. What are your points of pain (POP), if any, around work?

- |                                  |   |
|----------------------------------|---|
| _____ Feeling inadequate         | _____ Too much responsibility                 |
| _____ Unsure how to move forward | _____ In need of a new board of directors     |
| _____ Heavy workload             | _____ You are not performing well             |
| _____ Not enjoying type of work  | _____ Business is not going well              |
| _____ Dislike work environment   | _____ Lack of mentorship                      |
| _____ Want to change careers     | _____ Market share is shrinking               |
| _____ Cashflow                   | _____ Need to diversify                       |
| _____ Commute to work            | _____ Type of work has become less fulfilling |
| _____ Employees not performing   | _____ No clear career path                    |
| _____ Culture needs correcting   | _____ Morale issues                           |
| _____ Other: _____               | _____ Other: _____                            |
| _____ Other: _____               | _____ Other: _____                            |
| _____ Other: _____               | _____ Other: _____                            |



2. For each POP, complete the following process (you may have to use your journal or another piece of paper).

A. Name POP: \_\_\_\_\_

B. What do you believe to be the reason the POP exists? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

C. What steps can you take to relieve the POP? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**PERSONAL:**

1. What are your points of pain, if any, in your personal life?

\_\_\_\_\_ Feeling inadequate

\_\_\_\_\_ Bored

\_\_\_\_\_ Current life not as expected

\_\_\_\_\_ Unhappy

\_\_\_\_\_ Lonely

\_\_\_\_\_ Weight

\_\_\_\_\_ Recovering from tragedy

\_\_\_\_\_ Spiritual struggle

\_\_\_\_\_ Health concerns

\_\_\_\_\_ Other: \_\_\_\_\_

\_\_\_\_\_ Other: \_\_\_\_\_

\_\_\_\_\_ Other: \_\_\_\_\_

\_\_\_\_\_ Relationship trouble

\_\_\_\_\_ Parenting issues

\_\_\_\_\_ Comparing your life to others

\_\_\_\_\_ Finding purpose

\_\_\_\_\_ Dealing with loss

\_\_\_\_\_ Dealing with anxiety

\_\_\_\_\_ Dealing with depression

\_\_\_\_\_ Feeling lost

\_\_\_\_\_ Feeling overwhelmed

\_\_\_\_\_ Other: \_\_\_\_\_

\_\_\_\_\_ Other: \_\_\_\_\_

\_\_\_\_\_ Other: \_\_\_\_\_



2. For each POP, complete the following process (you may have to use your journal or another piece of paper).

A. Name POP: \_\_\_\_\_

B. What do you believe to be the reason the POP exists? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

C. What steps can you take to relieve the POP? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

### LIMITING BELIEFS

1. Name beliefs you have that prevent you from moving forward? I.e. "I can't have it all.", "I can't do [fill in the blank], because it will disappoint others.", "It's too late to begin.", "If my child doesn't go to a certain school, they will not be successful.", "If I don't get that promotion, I'll be stuck in the same position.", "If I'd done things differently, I wouldn't be in this position."

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

2. What are alternatives to what you believe that would allow to move forward towards those goals.

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

**BELIEVE IN THE ALTERNATIVES**