Dropping a safety behaviour

Find out what happens when you let go of one precaution.

Name _____ Date _____

The safety behaviour I am going to drop (what I usually do to feel safe)

The situation where I will try it

What I fear will happen if I do not do it

How strongly do I believe that?

0 — 10 — 20 — 30 — 40 — 50 — 60 — 70 — 80 — 90 — 100

Not at all — Completely

What I will do instead (for example: look up and keep my hands relaxed)

What actually happened

How strongly do I believe my fear now?

0 — 10 — 20 — 30 — 40 — 50 — 60 — 70 — 80 — 90 — 100

Not at all — Completely

What does this tell me about how much I need the safety behaviour?

© 2026 Patrick O'Hare Therapy · patrickoharetherapy.com

This handout supports your therapy. It does not replace professional advice.