

DMH BODY AWARE CARE PLAN

Instructions

Pick a time when you and your child are feeling relaxed and calm to start this discussion. You can complete these worksheets all in one sitting or over a few days. If you notice them getting upset, take a break and return to it at another time.

Start by discussing the things that **make them upset**. It might help to think about yourself as an explorer by being curious about what they have to say. Next, talk about **what happens to their body when they are upset**. You might say, "Our bodies warn us when we are getting upset. It is important to recognize what our bodies are trying to tell us, so we can do something that helps us feel calm again. How do big feelings show-up in your body?" Finally, explore **what helps your child feel better**.

We hope these simple worksheets might help you and your child prevent the next big melt-down OR help you feel better prepared for when it does happen.

General tips

You might want to start the discussion by saying something like, *"I was hoping you could teach me about the things that make you feel upset and what helps you feel better. I want to learn about ways I can help you the next time big feelings come and get you upset."*

Another great way to introduce the activity is to watch the short video from Mindful Schools called, "Just Breathe," available on YouTube. <https://youtu.be/RVA2N6tX2cg>

Avoid denying or dismissing their ideas for what makes them upset or helps them feel better. Let the ideas come from them. It is their plan, after all, and what's in it needs to come from them. If it doesn't, it won't be useful.

If you are having trouble getting them to open up, it is okay to offer a suggestion or an idea **but ask for permission first**. It might sound like this, *"It seems like you are having a hard time thinking of how upset feelings show up in your body. Would it be okay if I told you what I've noticed?"* If they say no, that might be a sign to put it away and return to the discussion later.

DMH Body Aware Care Plan

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Adapted from the DMH Child Pictorial Safety Tool

WHAT HELPS YOU FEEL BETTER?

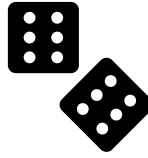
TOUCH



Writing



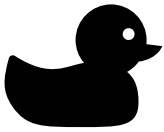
Fidget Toys



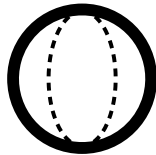
Games



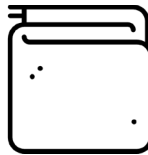
Toys



Bath or Shower



Stress Ball



Special Blanket



Hugs



Stuffed Animal



Bean Bag Chair

Anything else that you touch or hold to make you feel better? _____

SEE



Reading



TV or Videos



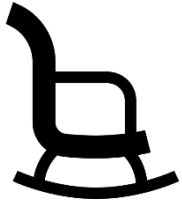
Pictures



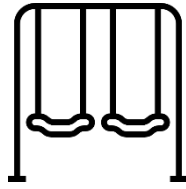
Computer

Anything else that you look at to make you feel better? _____

MOVEMENT



Rocking Chair



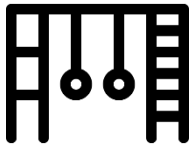
Swinging



Dancing



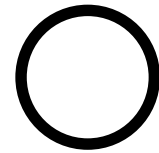
Sports



Playground



Exercise



Therapy Ball

Any other way that you move to make yourself feel better? _____

HEAR



Talking on the Phone



Listening to Music



Singing



Playing an Instrument



Counting



Quiet

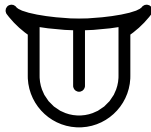
Anything else that you listen to make you feel better? _____

SMELL



Anything else that you like to smell to make you feel better? _____

TASTE



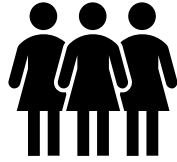
Anything else that you like to taste to make you feel better? _____

WHAT MAKES YOU FEEL UPSET?

I DON'T LIKE



Being Touched



Too Many People



Dark



Loud Noises



Someone Being Mean



Certain Times



Certain Dates



Being Sick



Being Hungry



Being Lonely



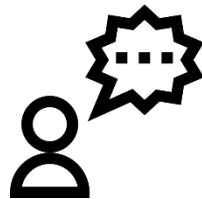
Storms



Being Surprised

NO!

Being Told "No"



Yelling



Arguing with a Friend

ZZZ

Being Tired

Anything else that makes you feel upset? _____

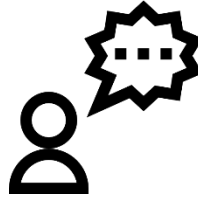
WHEN I AM UPSET, MY BODY FEELS LIKE:



Cry



Clench Teeth



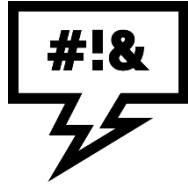
Loud Voice



Running



Jumping/Stamping



Swearing



Upset Stomach



Heavy Breathing



Racing Heart



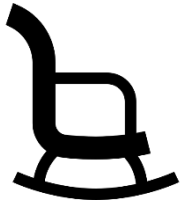
Laughing



Punching/Hitting



Being Mean/Rude



Rocking or Pacing



Making Fists



Hot/Red Face



Shaking/Nervous

Anything else that you feel or do when you're upset? _____

MY BODY AWARE CARE PLAN

THINGS THAT UPSET ME:

- 1 _____
- 2 _____
- 3 _____
- 4 _____
- 5 _____

THINGS THAT HELP ME CALM DOWN:

- 1 _____
- 2 _____
- 3 _____
- 4 _____
- 5 _____

WHEN I'M VERY UPSET, PLEASE

DON'T DO THIS

- 1 _____
- 2 _____
- 3 _____
- 4 _____
- 5 _____

DO THIS, INSTEAD

- 1 _____
- 2 _____
- 3 _____
- 4 _____
- 5 _____

Name:

Date:

Signature:

Parent Signature:
