WORKSHEET 1

Worry Signs Checklist

Check what you notice in your child. Circle the 3 that happen most. Bring this page to your child's next appointment.

Body

- ☐ Stomachaches
- ☐ Headaches
- ☐ Feeling sick on school mornings
- ☐ Racing heart or fast breathing
- ☐ Tired, tense or shaky

Questions and thoughts

- ☐ "What if...?" questions
- ☐ Asking for reassurance again and again
- ☐ Needing things to be perfect
- ☐ Expecting the worst
- ☐ Fear of making mistakes

Actions

- ☐ Avoiding places, people or activities
- ☐ Clinging at drop-offs or bedtime
- ☐ Tears, anger or meltdowns before new things
- ☐ Refusing to go to school
- ☐ Wanting a parent to speak for them

Sleep

- ☐ Trouble falling asleep
- ☐ Waking at night
- ☐ Nightmares
- ☐ Needing a parent nearby to sleep
- ☐ Coming to the parents' bed

When does the worry show up most?

Calm, Brave Kids · © 2026 Joy Integrative Psychiatry LLC · Printable for personal use

WORKSHEET 2

Our Worry Cycle Map

Pick one worry. Fill in each step of the cycle, then plan the brave step that breaks it.

1. Trigger

What sets off the worry?

↓

2. Anxiety

What does it look like in my child?

↓

3. Avoidance or reassurance

What do we usually do?

↓

4. Temporary relief

What happens right after?

↓

5. Anxiety gets stronger

What has the worry grown into?

Our brave step instead

Calm, Brave Kids · © 2026 Joy Integrative Psychiatry LLC · Printable for personal use

WORKSHEET 3

Accommodation Tracker

List the things you do to help your child avoid or escape worry. This is not about blame. Accommodation comes from love. Then choose ONE to lower first.

What I do for the worry	How often?	How upset would my child be if I stopped? (0-10)	Lower first?

This week, the one accommodation we will lower is:

_____

What we will do instead:

_____

_____

Calm, Brave Kids · © 2026 Joy Integrative Psychiatry LLC · Printable for personal use

WORKSHEET 4

Supportive Words Script Card

Supportive words have two parts: acceptance (the feeling is real) and confidence (you can handle it). Keep this card on the fridge, and add your own lines.

Instead of...	Try saying...
"There's nothing to worry about."	"I can see that you're worried."
"You're fine. Stop crying."	"I know this feels uncomfortable."
"Don't be scared."	"You can feel scared and still do it."
"I'll do it for you."	"Let's figure out how you can try."
Reassuring them again and again	"We've talked about this. What coping skill can you use?"
Allowing avoidance every time	"I'll help you work through it one step at a time."

Our family's go-to phrase

Example: "I know it's hard. Try anyway."

Calm, Brave Kids · © 2026 Joy Integrative Psychiatry LLC · Printable for personal use

WORKSHEET 5

Brave Ladder

Pick one fear. List steps from a little scary (bottom) to very scary (top). Rate each from 0 (no worry) to 10. Start where it is hard but doable.

The fear we are working on: _____

Rung	Brave step	Worry (0-10)	Done ✓
10			
9			
8			
7			
6			
5			
4			
3			
2			
1			

Our reward for practicing: _____

Calm, Brave Kids · © 2026 Joy Integrative Psychiatry LLC · Printable for personal use

WORKSHEET 6

Brave Step Log

Write down each brave step. Notice how the worry before compares with the worry after. Celebrate the comeback!

Date	Brave step	Worry before (0-10)	Worry after (0-10)	What we learned or celebrated

WORKSHEET 7

Worry Detective

Be a detective! Look for clues, then get ready for your brave step.

1. What is the worry saying?

"If I go, something bad will happen..."

2. What are the clues?

What really happened the last times?

3. What is most likely to happen?

4. If the hard thing happened, how would I cope?

Who could help? What could I do?

5. What can I tell myself?

"Either I succeed, or I learn."

My brave step is:

Calm, Brave Kids · © 2026 Joy Integrative Psychiatry LLC · Printable for personal use

WORKSHEET 8

Calm-Down Menu

Practice these when calm, so they are ready when worry shows up. Calm tools are helpers, not escape hatches: after you calm down, take the next brave step.

Check the tools you want to try

- ☐ Flower and candle breathing (in for 4, out for 6)
- ☐ Squeeze and let go (fists, shoulders, toes)
- ☐ 5-4-3-2-1 (see, touch, hear, smell, taste)
- ☐ Cold water on my face or hands
- ☐ Jumping jacks, a fast walk or a dance song
- ☐ Held and safe (picture being held by someone who loves me)
- ☐ Brave words: "I can feel scared and still do it."

My top 3 tools

_____

_____

_____

After I calm down, my next brave step is:

_____

_____

WORKSHEET 9

School Morning Plan

Make mornings calm, boring and predictable. Same steps, same order, every school day. Check off each step.

Step	Mon	Tue	Wed	Thu	Fri	Sat	Sun
☐ Wake up at _____							
☐ Get dressed							
☐ Protein breakfast							
☐ Teeth and hair							
☐ Backpack by the door							
☐ Short, warm goodbye							
☐ _____							

Our goodbye phrase

Example: "I know it's hard. You can do hard things. See you at 3!"

_____

If my child says they feel sick

Our plan (checked with our healthcare provider):

_____

_____

Calm, Brave Kids · © 2026 Joy Integrative Psychiatry LLC · Printable for personal use

WORKSHEET 10

Teacher Letter

Fill this in and share it with your child's teacher or school counselor. Working as a team helps your child move toward school, not away from it.

Dear _____,

My child, _____, sometimes struggles with worry. Here is what it can look like at school:

What helps my child be brave:

What we are working on right now (our brave step):

Supports that would help (ones that move toward school, not away):

☐ A trusted adult to check in with at arrival

☐ A buddy for lunch or recess

☐ A gradual plan for hard tasks

☐ Praise for brave steps

☐ Other: _____

Best way to reach me: _____

Thank you for being on our team!

_____ (parent or caregiver)

Calm, Brave Kids · © 2026 Joy Integrative Psychiatry LLC · Printable for personal use

WORKSHEET 11

Bedtime Routine Chart

Same bedtime, same steps, every night. Screens off 1 hour before bed. Check off each step.

Bedtime: _____ Wake time: _____

Step	Mon	Tue	Wed	Thu	Fri	Sat	Sun
☐ Screens off							
☐ Bath or shower							
☐ Pajamas							
☐ Teeth							
☐ Story or quiet time							
☐ Lights out							
☐ _____							

Sleeping alone: our step-by-step plan

Check each step when your child has done it for a few nights.

- ☐ Chair next to the bed
- ☐ Chair halfway to the door
- ☐ Chair in the doorway
- ☐ Chair in the hall
- ☐ Short check-ins (every ____ minutes)
- ☐ Sleeping on my own all night!

Calm, Brave Kids · © 2026 Joy Integrative Psychiatry LLC · Printable for personal use

WORKSHEET 12

Daily Rhythm Check

Small daily habits make the worry alarm less touchy. Check each one your child did today. This is about patterns, not perfection.

This week	Mon	Tue	Wed	Thu	Fri	Sat	Sun
Protein breakfast							
Mostly real, whole foods							
Water through the day							
60 minutes of movement							
Outside time							
Screens off 1 hour before bed							
Bedtime on time							
One brave step							

The ONE habit we are working on this month

Calm, Brave Kids · © 2026 Joy Integrative Psychiatry LLC · Printable for personal use

WORKSHEET 13

Parent Calm Plan

Your calm is your child's calm. Make this plan on a good day, so it's ready on a hard day.

My early warning signs

Tight jaw, raised voice, rushing in to fix it...

What calms me

One slow breath, stepping away, prayer, a walk

What I'll say to my child

"I'm here. You're safe. You can handle this."

My support people

Partner, friends, family, faith community, my own provider

If you or your child ever feel unsafe: call or text 988 (Suicide & Crisis Lifeline) or call 911.

Calm, Brave Kids · © 2026 Joy Integrative Psychiatry LLC · Printable for personal use

WORKSHEET 14

Questions for Your Child's Provider

Write things down as you think of them. Bring this page, and your logs, to your child's visit.

What is going better

What is still hard

Our questions

What do you think is going on? What treatment do you recommend, and why? How will we know it is working? What should we practice at home?

Our plan after this visit

Calm, Brave Kids · © 2026 Joy Integrative Psychiatry LLC · Printable for personal use

WORKSHEET 15

Keep Practicing Plan

Worry can come back during stressful times, like a move, a new school or a loss. That doesn't mean starting over. Use this plan to get back on track fast.

Tools that helped us most

Brave ladder, supportive words, calm tools...

Signs the worry is coming back

Avoiding, more questions, sleep changes...

Accommodations to watch for

Things we used to do that might creep back

Who we will call for help

Our provider, therapist, school counselor

Calm, Brave Kids · © 2026 Joy Integrative Psychiatry LLC · Printable for personal use

WORKSHEET 16



Brave Certificate

This certificate is proudly presented to

_____

for being brave and facing a hard thing:

_____

_____

You were scared, and you did it anyway.
That is what brave means.

_____ _____

Signed Date

Calm, Brave Kids · © 2026 Joy Integrative Psychiatry LLC · Printable for personal use