

Name: _____

Date: _____

COPING SKILLS MENU

Objective: To build a personal list of healthy coping tools.

Instructions: Check or write the coping skills that work for you.

Calm My Mind

- Deep breathing
- Listening to music
- Journaling
- Positive self-talk

Other: _____

Move My Body

- Walking
- Stretching
- Exercising
- Dancing

Other: _____

Connect With Others

- Text a friend
- Talk to a trusted adult
- Spend time with family

Other: _____

Healthy Distractions

- Drawing
- Watching a show
- Reading
- Gaming (time-limited)

Other: _____

The coping skill I will try this week: