

# Activity Sheet - 4C: FEAR AND FIGHT OR FLIGHT

Name \_\_\_\_\_ Date \_\_\_\_\_

**WARNING! Stress Response – ACTIVATED!**

My Fear Experience

My fear trigger: \_\_\_\_\_

My body response (check all that apply):

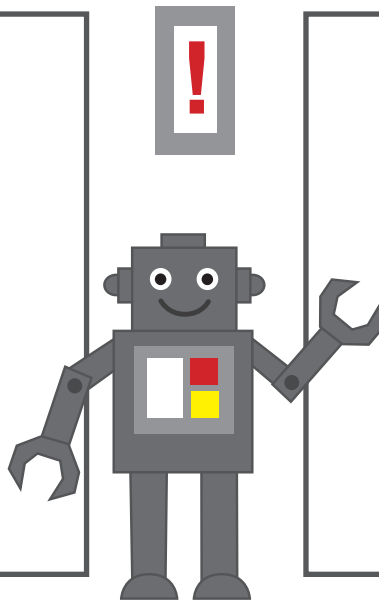
- |  |   |
|--|---|
| <input type="checkbox"/> Body is tense     | <input type="checkbox"/> Breathing difficulty       |
| <input type="checkbox"/> Muscles tighten   | <input type="checkbox"/> Butterflies in stomach     |
| <input type="checkbox"/> Heart races       | <input type="checkbox"/> Clench my jaw and/or fists |
| <input type="checkbox"/> Fidgeting fingers | <input type="checkbox"/> Other: _____               |
| <input type="checkbox"/> Tapping feet      | <input type="checkbox"/> Other: _____               |

The message my body is trying to tell me is: (Ex: You are in danger!)

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

**My fear face looks like this:**

**My calm face looks like this:**



**Activate System Override. Take a Breath Brake.**

**Then what are my choices?**

1. I could \_\_\_\_\_

2. Or I could \_\_\_\_\_