

Name: _____

Date: _____

Coping

W F U T T M Q N T H Q H Q S P A V
I I N T E R V E N T I O N S T W G
S N O I T O M E J M Q C V W H R B
V X B D A E C V L R E D H L B O O
Y Q G G U V R A E P G M K I D C Z
K E C A L O S S R N V G O Y Z V N
C U P R T E P M I I L L L R G N P
O T E J K O P N E N N A K C I P F
R C R N N Z E C Z F N G C O M E G
O A C D S T C Y K G E C R F Y D S
Z T V O S S T P U N Y I T D T Y F
X N N I P Z U A D Q H E R C R J E
G O L Y P I G P K I S N M G F M A
U C E E D E N W P R M L X I S N R
F E G D P M E G C O V I U B T Q H
E Y J M W O P U C Q R Z O M V U E
E E H M X A H P K U X T C I U B L

Body language
Listening
Respond
Solace
Time

Interventions
Memories
Support
Coping
Fear

Eye contact
Emotions
Caring
Grief
Hope