



**Township of Ocean
Department of Human Services**

601 Deal Road • Ocean, NJ 07712 • 732-531-2600

WARRIORS AGAINST WORRY

A PSYCHOEDUCATIONAL GROUP FOR YOUTH FACING ANXIETY CHALLENGES

Parent Information

Although they are merely beginning their journeys in life, children also experience stress and anxiety. In fact, this can be particularly distressing to children, as they often lack the emotional and mental resources that adults possess, to effectively cope with high levels of stress and anxiety. Therefore, the purpose of this group is to empower children struggling with anxiety and guide them in building the necessary tools to regain control of their thinking and get back to doing their number one job: being a kid!

To register, please call Jennifer Appio at 732-531-2600.

- *Warriors Against Worry* is a 6 week group for 5th and 6th grade youth.
- Group will meet on Tuesdays from 6:00pm-7:00pm and will begin on **November 8, 2016.**
- There is a \$90 non-refundable fee for residents of Ocean Township.
- There is a \$150 non-refundable fee for non-residents.
- Each week your child will be given a take home activity to complete and be returned to the group the following week for group discussion and processing. Completing these take home activities will be important in reinforcing the skills learned during group and promoting success beyond the group.
- The counselor will provide each child with a take home folder, where they will store any handouts or activities provided during group. Please ensure that your child brings this folder to group each week.
- **Consistent attendance is integral to the group process. It is essential that your child attend all scheduled group meetings to the best of their ability. If for some reason your child will be arriving late (no more than 10 minutes) to group or will be missing a session, we ask that you call this agency and provide notice.**

Participation in this group DOES NOT CURE ANXIETY. This group is intended to provide psycho education, in addition to effective tools and strategies to cope with anxiety challenges. If you feel that your child would benefit from ongoing counseling services, please speak to the counselor privately.

I _____, parent of _____ have reviewed and agreed to all of the above information and consent to my child's participation in the Warriors Against Worry group.

Parent/Guardian Signature

Date

Rosbel Puello, MA, LAC
Group Facilitator