

5. What concerns have brought you here today? _____

6. If **1** is the worst and **10** is the best, how are things in your life today?
Worst -> 1 2 3 4 5 6 7 8 9 10 <-Best

7. How does this problem affect:
a) you? _____
b) your children? _____

8. What would be important for us to know about the background of this problem? _____

9. What would be most helpful to talk about in this meeting today? _____

10. How will you know when you have achieved the changes you desire? _____

11. Remember a problem that happened any time in your life that you resolved in such a way that left you feeling proud of yourself. What did you do that you felt proud of? _____

12. a) What would someone else come to admire and respect most about you if they had months or years to get to know you? It's OK to guess. _____

b) What would someone else come to admire and respect most about your child if they had months or years to get to know them? It's OK to guess. _____

13. For us to be most helpful is there anything you feel is important for us to know about your culture, ethnicity, religion, language, sexual orientation, mental or physical health, or other?

