

# PARENT TOOL

## REFLECT ON CONCERNS

### 1. What is the issue?

From the parent's perspective:	From the child's perspective:
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### 2. What areas of life is this impacting?

physical health  
 emotional well-being  
 academics or school life  
 extracurriculars  
 free time or pursuit of passions  
 home life and responsibilities  
 family relationships  
 social relationships

### 3. How often is this an issue?

once or twice a year  
 during the school year  
 at specific times of the year  
 every couple of months  
 monthly  
 weekly  
 daily  
 couple times a day

### 4. How big is the impact?

From the parent's perspective:	1	2	3	4	5	6
From the child's perspective:	1	2	3	4	5	6

### 5. What other factors contribute to this issue?

From the parent's perspective:	From the child's perspective:
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### 5. What other factors contribute to this issue?

From the parent's perspective:	From the child's perspective:
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### 6. How does this compare to other children's experiences? Are others struggling with this?

From the parent's perspective:	From the child's perspective:
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### 7. What are some ways to move forward?

Parent's Solution #1:  pros:  cons:	Child's Solution #1:  pros:  cons:
Parent's Solution #2:  pros:  cons:	Child's Solution #2:  pros:  cons:
Parent's Solution #3:  pros:  cons:	Child's Solution #3:  pros:  cons: