
































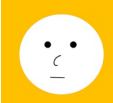

















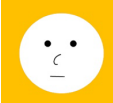





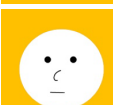








# How am I and my family doing?

		I feel safe	Some days are hard	I'm struggling	Help!	I feel helpless
MY DEVELOPMENT	1. Health 					
	2. Learning / Independence 					
	3. Feelings 					
	4. Social / Sexual development 					
MY PARENTS	5. Parental care / Safety 					
	6. Parental support 					
	7. Bond with my parents 					
	8. How are things at home? 					
MY ENVIRONMENT	9. Family situation 					
	10. Support by others 					
WHAT DOES OUR FAMILY NEED?		Confirmation 	Advice 	Extra care 	Care now! 	A lot of care 