| Date: | <br> |  |
|-------|------|--|
|       |      |  |

## My Thoughts About Therapy – Caregiver

**Directions.** This form is about your thoughts and experiences with your child's therapy. Please complete only the sections that have a checkmark at the top. Circle the answer that best tells how true each sentence is about how you usually feel. There are no right or wrong answers. Just circle what you think describes you best.

|   | 1. | I like meeting with my child's counselor.   | Strongly<br>Disagree | Disagree | Agree | Strongly<br>Agree |
|---|----|---|----------------------|----------|-------|-------------------|
|   | 2. | I feel like I can tell my child's counselor anything.   | Strongly<br>Disagree | Disagree | Agree | Strongly<br>Agree |
|   | 3. | My child's counselor is sensitive to my culture and values.                                       | Strongly<br>Disagree | Disagree | Agree | Strongly<br>Agree |
| R | 4. | I feel like I am part of a team with my child's counselor.  | Strongly<br>Disagree | Disagree | Agree | Strongly<br>Agree |
|   | 5. | I feel comfortable asking my child's counselor questions<br>or raising concerns about counseling. | Strongly<br>Disagree | Disagree | Agree | Strongly<br>Agree |
|   | 6. | My child's counselor respects my opinions.  | Strongly<br>Disagree | Disagree | Agree | Strongly<br>Agree |
| · | 7. | I help choose my child's treatment goals.   | Strongly<br>Disagree | Disagree | Agree | Strongly<br>Agree |

### □ Please complete the next 7 items below.

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|   |    | Thease complete the next / nems below.   |                      |          |       |                   |
|---|----|--|----------------------|----------|-------|-------------------|
|   | 1. | The effort I put into counseling will pay off for me and my child.                                 | Strongly<br>Disagree | Disagree | Agree | Strongly<br>Agree |
|   | 2. | I believe my child's counselor knows how to help other<br>children and families who are like mine. | Strongly<br>Disagree | Disagree | Agree | Strongly<br>Agree |
|   | 3. | I've never had a bad experience with counseling for my child in the past.                          | Strongly<br>Disagree | Disagree | Agree | Strongly<br>Agree |
| Е | 4. | It's OK if family or friends know we meet with a counselor.  | Strongly<br>Disagree | Disagree | Agree | Strongly<br>Agree |
|   | 5. | I believe counseling is necessary to solve my child's problems.                                    | Strongly<br>Disagree | Disagree | Agree | Strongly<br>Agree |
|   | 6. | I believe the work I do with my child's counselor will help my child.                              | Strongly<br>Disagree | Disagree | Agree | Strongly<br>Agree |
|   | 7. | I think my child's counselor can help my child.  | Strongly<br>Disagree | Disagree | Agree | Strongly<br>Agree |

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Name:\_\_\_

# □ Please complete the next 7 items below.

|   | 1. | If I skip an appointment with my child's counselor, I might fall behind.                                  | Strongly<br>Disagree | Disagree | Agree | Strongly<br>Agree |
|---|----|---|----------------------|----------|-------|-------------------|
|   | 2. | I am on time for appointments with my child's counselor.  | Strongly<br>Disagree | Disagree | Agree | Strongly<br>Agree |
|   | 3. | I show up for appointments with my child's counselor or<br>else cancel them at least a day ahead of time. | Strongly<br>Disagree | Disagree | Agree | Strongly<br>Agree |
| Α | 4. | My child's counseling is convenient for me.   | Strongly<br>Disagree | Disagree | Agree | Strongly<br>Agree |
|   | 5. | I tell my child's counselor about things that get in the way of me coming to counseling.                  | Strongly<br>Disagree | Disagree | Agree | Strongly<br>Agree |
|   | 6. | I am able to attend appointments even when there are<br>other important things going on in my life.       | Strongly<br>Disagree | Disagree | Agree | Strongly<br>Agree |
|   | 7. | Things do not get in the way of me attending appointments with my child's counselor.                      | Strongly<br>Disagree | Disagree | Agree | Strongly<br>Agree |

## □ Please complete the next 7 items below.

|   | 1. | The goals of my child's counseling are clear.                 | Strongly<br>Disagree | Disagree | Agree | Strongly<br>Agree |
|---|----|---|----------------------|----------|-------|-------------------|
|   | 2. | What we are doing in my child's counseling makes sense to me. | Strongly<br>Disagree | Disagree | Agree | Strongly<br>Agree |
|   | 3. | There is a clear purpose to each counseling session.          | Strongly<br>Disagree | Disagree | Agree | Strongly<br>Agree |
| С | 4. | The work I do with my child's counselor fits our goals.       | Strongly<br>Disagree | Disagree | Agree | Strongly<br>Agree |
|   | 5. | My child's counselor measures if my child is getting better.  | Strongly<br>Disagree | Disagree | Agree | Strongly<br>Agree |
|   | 6. | I understand my role in my child's counseling.                | Strongly<br>Disagree | Disagree | Agree | Strongly<br>Agree |
|   | 7. | The counseling we receive is right for us.                    | Strongly<br>Disagree | Disagree | Agree | Strongly<br>Agree |

## □ Please complete the next 7 items below.

|   | 1. | I actively participate during appointments with my child's counselor.                    | Strongly<br>Disagree | Disagree | Agree | Strongly<br>Agree |
|---|----|--|----------------------|----------|-------|-------------------|
|   | 2. | I enjoy practicing new things with my child's counselor.                                 | Strongly<br>Disagree | Disagree | Agree | Strongly<br>Agree |
|   | 3. | Counseling requires a manageable amount of work.   | Strongly<br>Disagree | Disagree | Agree | Strongly<br>Agree |
| н | 4. | When I learn something new in my child's counseling, I try to use it right away at home. | Strongly<br>Disagree | Disagree | Agree | Strongly<br>Agree |
|   | 5. | My child's counselor shows us how to do a skill and then helps us try it out.            | Strongly<br>Disagree | Disagree | Agree | Strongly<br>Agree |
|   | 6. | If I try a new skill and it doesn't go well, I make sure to try again.                   | Strongly<br>Disagree | Disagree | Agree | Strongly<br>Agree |
|   | 7. | I follow my child's counselor's recommendations.   | Strongly<br>Disagree | Disagree | Agree | Strongly<br>Agree |