

Sample Family Interview Questionnaire

Today's Date: _____
 Child's Name: _____ D.O.B.: _____ Age: _____
 Parent(s): _____ Insurance: Private MA
 Guardian: _____ MA #: _____
 Address: _____ Telephone: (W) _____
 _____ (H) _____

Is your child right or left handed (circle one): Right Left *Children with neurological disorders have a greater propensity toward left handedness. Just a data point among many.*

If left handed, is there a history of left handedness in the family? Y or N Who: *If left handedness in family, may have no significance unless other data to support.*

What is your child's ethnic background: _____

Name of Present School: _____ Grade : _____

Teachers' Names: _____

IEP or 504 accommodations: Y or N Explain: *What made them eligible? LD, ED, OHI, etc.*

Grades earned last term: _____

Who is your child's physician? *Medical records/medical emergencies*

When was your child's last doctor's visit? *Why were they there?*

Has your child's vision recently been checked: *If have difficulty seeing, what is remedy – glasses, etc.*

Has your child's hearing recently been checked: _____

What medical or emotional conditions is your child currently being treated for?

List any medications which have been prescribed for your child in the past year.

Include over the counter meds, psychiatric meds, & meds for medical conditions.

Does your child have any allergies? _____

Has your child had any sleep or appetite disturbances recently? (If yes, please explain)

Ideally, children should have about 11 hours sleep a night. Adolescents need about 9 hours a night.

You are asking this question to check for sleep disturbances – hard time going to sleep typically associated with anxiety; hard time getting up typically associated with depression. Make sure appetite is typically for age. Picky eaters, don't eat, hoarding food, etc. – all data points to put puzzle together.

List any concerns about your child. For each concern, indicate approximately when the problem began, and how

you have attempted to solve it.

Parents concerns, problem issues.

Is there any involvement with other agencies current or in the past? (e.g. DJS, DSS; If yes, please describe)

DSS: what type of abuse, events surrounding issue

DJS: what were charges and disposition?

What is the reason for the referral/participation in this program?

What needs to happen during this interview so that when it is over you will feel satisfied and able to say “This meeting was really helpful to me/us?”

Want the family to get something out of this long process – part of SOC and wrap values.

*Truancy Court Questions:

List the reasons for not attending school? Parent and youth concerns

Developmental History:

What number pregnancy was this child?

1st born –more likely to be vigilant and more likely to be caught off guard. Substance use in early pregnancy. Also want to know about any miscarriages or difficulties prior to becoming pregnant. 2nd born and after typically easier

During this child’s pregnancy, was there? (check all that apply) <i>These are all signs of trauma during gestation.</i>			
	Yes	No	If yes, what month
Bleeding, spotting, cramping			
Excessive vomiting			
Excessive weight gain			>50 lbs. is excessive, so clarify – many will say yes, but not really.
Excessive weight loss			Indicative of problems.
Infections			If had, what meds were prescribed?
Kidney trouble			If had, what meds were prescribed?
Diabetes			If had, what meds were prescribed?
High or low blood pressure			If had, what meds were prescribed? The effects of high blood pressure range from mild to severe. High blood pressure can harm the mother's kidneys and other organs, and it can cause low birth weight and early delivery. Called preeclampsia. Was it pregnancy induced? Or pre-existing?

X-rays/sonograms			>2 is not typical – inquire why
Swelling			Swelling in feet and ankles & mild in hands is normal. Swelling in your face or puffiness around your eyes, more than slight swelling of your hands, or excessive or sudden swelling of your feet or ankles could be a sign of preeclampsia, high blood pressure <i>and</i> protein in her urine after 20 weeks of pregnancy.
Toxemia			Preeclampsia/high blood pressure. More common in 1 st pregnancy.
Injury to mother			Car accidents, falls, being hit – all risk factors
Medications Used			Any meds used outside vitamins? Possible effects of unborn child.
Other complications			

Did the child's mother smoke? Pregnancy complications, Premature birth, Low-birth-weight infants, Stillbirth, Sudden infant death syndrome (SIDS) How much?

Did the child's mother drink alcohol? It increases the risk of miscarriage and stillbirth. Increase the odds for low birth weight and raise risk for problems with learning, speech, attention. Children could later exhibit aggressive and delinquent behavior. Fetal alcohol syndrome (FAS), a permanent condition characterized by poor growth, abnormal facial features, and damage to the central nervous system. Babies with FAS grow poorly in the womb or after birth, or both. In addition to abnormal facial features, they may have abnormally small heads and brains; heart, spine, and other anatomical defects. The central nervous system damage may include mental retardation, delays in physical development, vision and hearing problems, and a variety of behavioral problems. How much?

Did the child's mother use drugs? Depends on trimester – low birth weight, premature birth, associated w/ ADHD. 1st trimester is usually highest risk. How much?

Was labor spontaneous or induced? (If induced, why?) Induced could indicate a traumatic birth. Spontaneous too early – also indicate problem.

Was delivery (circle one): normal forceps breech caesarian

Duration of labor? Looking for long time – if baby is in birth canal too long, etc.

Were there any problems with labor and/or delivery? ie: Water breaking and not delivering until much later.

Child's birth weight: <5lbs, 8 oz. = low birth weight Length: _____

Two types = born before term or small for gestational age – both have implications. Increased risk for developmental disabilities and illness throughout their life. Lifelong problems include chronic lung disease, adult-onset diabetes, coronary heart disease, high blood pressure, intellectual, physical and sensory disabilities, and psychological and emotional distress.

When the child was a newborn (first few months of life), did any of these apply?			
	Yes	No	Explain
Yellow tint to skin			jaundice
In Incubator			If yes, ask why
Had blood transfusion			If yes, ask why
Very quiet			Lethargy – add as data point.
Very active			
Problems sucking			
Rashes			
Problems breathing			
Given oxygen			
Problems eating/digestion			
On heart monitor			
Other			

Were there any birth defects? (If yes, explain) Things like extra toes..... ☺

In the child's early childhood, were any of the following noted?			
	Yes	No	Explain if necessary
Colicky			Maybe tied to immature nervous system development – indicator of temperament – does not handle over-stimulation
Feeding Problems			
Sleeping problems			
Indifferent or resistant to cuddling			Indicative of PDD
Headbanging			Rocking – any type of self-soothing
Uncoordinated			Possible Neurologic implications

At approximately what age did the child:

	Age	
Hold head erect	By 6m	Mainly looking for delays
Sit independently	By 9m	
Crawl	By 9m	
Pull self to stand	By 12m	
Walk independently	12 to 24m	
Use single words	1 to 2y	
Use short sentences	2 to 3y	
End toilet training	Boys 3 – 4y; Girls 3y	
Tie own shoes	By 6y	

Medical/Psychiatric History:

Has the child had any of the following (check all that apply)?			
	Yes	No	If yes, at what age?
3-day measles			German measles, rubella: heart defects, cataracts, mental retardation, and deafness
7-day measles			Also called rubeola , highly contagious - but rare - respiratory infection caused by a virus. Total-body skin rash and flu-like symptoms, including a fever, cough, and runny nose. If brain is infected – more serious implications arise
Mumps			Mumps is an illness caused by the mumps virus. Mumps causes Fever, Headache, Muscle aches, Tiredness, Loss of appetite
Chicken Pox			
Ear Infections			
Rheumatic fever			Inflammatory disease that may develop after an infection with streptococcus bacteria (such as strep throat or scarlet fever) and can involve the heart, joints, skin, and brain. Complications include: Heart issues & Sydenham's chorea -- emotional instability, muscular weakness and rapid, uncoordinated jerky movements affecting primarily the face, feet and hands
Tuberculosis			Infectious disease. High risk categories include: People with HIV infection (the AIDS virus), People in close contact with those known to be infectious with TB, People with medical conditions that make the body less able to protect itself from disease, Foreign-born people from countries with high TB rates, Some racial or ethnic minorities, People who work in or are residents of long-term care facilities, Health care

			workers and others such as prison guards, People who are malnourished, Alcoholics, IV drug users and people who are homeless
Asthma			Risk when hanging out with youth – make sure has inhaler if uses one and watch youth closely during physical activity, heat, etc.
Anemia			Anemia, a common blood disorders, occurs when the level of healthy red blood cells (RBCs) in the body becomes too low. Anemia can cause a variety of complications, including fatigue and stress on bodily organs. Among many other causes, anemia can result from inherited disorders, nutritional problems (such as an iron or vitamin deficiency), infections, some kinds of cancer, or exposure to a drug or toxin.
Poisoning			Ask about Tylenol, getting into cleaning products under the sink, ingesting anything
Electrical Shock			Did they ever stick something in an electric socket?
Seizures			How many, do they still have them, What kind of seizures, do they take meds, if so what? Meds to stop seizures are almost as bad as the seizures themselves. Long term implications for mental functioning.
Hydrocephalus			Excessive accumulation of fluid in the brain The excessive accumulation of CSF results in an abnormal dilation of the spaces in the brain called ventricles. This dilation causes potentially harmful pressure on the tissues of the brain. Ask about treatment.
Meningitis			Meningitis is an inflammation of the meninges , the membranes that cover the brain and spinal cord. The inflammation is usually caused by bacteria or viruses. Bacterial is much worse than viral. Risk of seizures and of permanent neurological damage, including hearing loss, blindness, loss of speech, learning disabilities, behavior problems and brain damage, even paralysis.
Encephalitis			Inflammation of the brain. Severe response can include mental impairment.
Polio			Vaccine – very rare to have had case.
Diabetes			Disease in which the body does not produce or properly use insulin. Type I (juvenile diabetes): the body does not produce insulin. Type II: the body does not use insulin efficiently. Gestational: during pregnancy. Increased risk for anxiety and depression.
High blood pressure			
Heart disease			
Headaches			
Ulcer			
Cancer			
Arthritis			
Other (explain)			

List any injuries the child has sustained in the past, including head injuries:

Did they sustain any injuries – did they ever lose consciousness and if so how long did they lose consciousness.

Broken bones, etc.

List any hospitalizations the child has had:

For what? Looking for injuries related to head injuries or injuries indicating a pattern of issues (i.e. coordination issues, abuse, or neglect)

List any major events in this child's life which you feel may have affected him or her in an important way (such as a birth of a sibling, death in the family, frequent school changes, divorce, abuse, etc.)

Age of child when event happened. Was any treatment sought or any resolution after the incident? How was the event dealt with?

Where is Dad in youth's life if applicable?

Indicate which of following apply to this child: All of these are data points to support diagnosis, areas of concern, parental observations, and if child is older enough ask his/her opinion. Keep developmental stage in mind.

	Yes	No	Explain, if necessary
Too critical on him/herself			
Not serious enough			
Cold, unemotional			
Bedwetting past normal age			
Nail biting			
Difficulty paying attention			
Memory problems			
Depressed, sad mood			
Angry outbursts			
Aggressive behavior			
Shy, timid			
Nightmares			
Poor self-esteem			
Acts young for age			
Frustrated easily			
Easily excitable			

Has blank or staring spells			Can you get attention if call name?
Difficulty making friends			
Disorganized			
Difficulty finishing projects			
Unusually fearful of _____			
Clumsy, uncoordinated			

Has the child been involved in any type of professional mental health treatment, including substance abuse treatment (If yes, please describe)?

Reword – use therapy, counseling, etc.

Family Medical/Psychiatric History

Father's age: _____

Mother's age: _____

If either parent is deceased, indicate year and cause of death.

On either the natural father or natural mother's side of the family, or for siblings, is there a history of:			
	Yes	No	If yes, please explain
Developmental delays (Learning to talk, walk, etc.)			If history is significant for any of these disorders, it is again more support for the developing hypothesis.
Learning problems (reading, writing, math)			Remember it is about putting the puzzle together.
Hyperactivity/impulsivity			
Mental Retardation			
Cerebral Palsy			Neurological disorders appearing in infancy or early childhood and permanently affect body movement and muscle coordination but don't worsen over time. Even though cerebral palsy affects muscle movement, it isn't caused by problems in the muscles or nerves. It is caused by abnormalities in parts of the brain controlling muscle movements. The majority of children with cerebral palsy are born with it, although it may not be detected until months or years later. Could result from brain damage in the first few months or years of life.
Muscle Problems			

Vision problems			
Hearing problems			
Birth defects			
Seizure disorders			
Strokes			
Alzheimer's disease			
Parkinson's Disease			Parkinson disease is a brain disorder. It occurs when certain nerve cells (neurons) in a part of the brain called the substantia nigra die or become impaired. Related to dopamine.
Huntington's disease			Huntington's disease (HD) results from genetically programmed degeneration of brain cells in certain areas of the brain. This degeneration causes uncontrolled movements, loss of intellectual faculties, and emotional disturbance. HD is a familial disease, passed from parent to child through a mutation in the normal gene. Some early symptoms of HD are mood swings, depression, irritability or trouble driving, learning new things, remembering a fact, or making a decision.
Multiple Sclerosis			An unpredictable disease of the central nervous system, multiple sclerosis (MS) can range from relatively benign to somewhat disabling to devastating, as communication between the brain and other parts of the body is disrupted.
Emotional Disorder			Depression, anxiety
Explosive outbursts			
Psychiatric disorder			Schizophrenia, personality disorders
Substance abuse/dependence			Does/Did anyone ever use alcohol or drugs?

Child's Educational Background

Other schools attended: _____

Grades repeated: _____

Favorite and Least favorite subject: Looking for strengths in something they like about school.

Disciplinary/Behavioral problems in school: _____

Do you feel your child is being supported in school? _____

Has your child mentioned he/she is being bullied in school or having any difficulties with other children in school? _____

Describes your child's peer relationships (e.g. # of friends, ages, and activities they engage in).

If have no friends – why? Think about social skills and possible ways to improve in this area.

Child's Psychosocial Background:

Is this your biological, adopted, step, foster child, or other? If other, please explain: _____

The child has how many sisters? _____ Ages: _____

The child has how many brothers? _____ Ages: _____

Any deceased siblings (indicate year of death): _____

The child's natural father has _____ years of formal education, and works as a _____. His name is _____. Parents' level of education highly correlated with child's educational attainment. Also gives an idea of philosophy – what's important in their household.

The child's natural mother has _____ years of formal education, and works as a _____. Her name is _____.

The child's natural parents are (circle one): married separated divorced widowed single

Where was the child born: _____

Where does he/she currently reside? _____

Who resides in the household? _____

Describe the child's relationship with other residents in the household?

Explain if necessary

<p>_____ Good</p> <p>_____ Fair</p> <p>_____ Poor</p> <p>_____ Will not share</p> <p>_____ Will not relate to them</p> <p>_____ Loving and affectionate</p> <p>_____ Hits or aggravates them</p> <p>_____ Other (please explain)</p>	<p>_____ Maybe different with different members of household. Is there anyone the youth connects to?</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>
--	---

What responsibilities does the child have at home? _____

What kinds of discipline are used in the family?			
	Yes	No	Explain if necessary
Spanking			
Deny privileges			
Time out			
Try to talk or reason with child			
Nothing works			
Other			

Identify Child/Family Strengths? <i>Looking for ways to attract natural supports and build on strengths – try to pull out functional strengths.</i>		
	Child	Family
Interests, skills, activities		
Most significant /most valued accomplishment		
Strengths as individual/family		
Ways of relaxing and having fun		
Ways of calming down when upset or angry		

Closest supports in the family		
Closest supports outside immediate family		
Clubs, organizations, church membership, community organizations		
Goals one year from now	Remember these for facilitating CFT – visions of family!!!!	Remember these for facilitating CFT – visions of family!!!!
Goals five years from now		
Goals for when child is 25		
Other		

When given free time, what does the child enjoy doing?

How would you describe the child's role in the family?

Please note any additional comments you feel are relevant.

Person conducting interview: _____

Persons present during interview: _____
