Pediatric Family Relationships – Short Form 8a

Please respond to each item by marking one box per row.

In the past 4 weeks...

		Never	Rarely	Sometimes	Often	Always
FAM_FB_074R1r	I felt I had a strong relationship with my family	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
FAM_FB_088R1r	I felt really important to my family..........	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
FAM_FB_029R1r	I got all the help I needed from my family..	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
FAM_FI_120R1r	My family and I had fun together............... .	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
FAM_FB_005R1r	People in my family made me feel good about myself	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
FAM_FB_042R1r	My family treated me fairly	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
FAM_FI_026R1r	My parents listened to me	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
FAM_FI_034R1r	My family paid a lot of attention to me.....	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5