

FAMILY CONFIDENCE IN HELPING WITH CHILD FUNCTIONING IN ROUTINES AND WITH FAMILY FUNCTIONING (FAM-CON)

Child's Name:	Date:
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PART I: To what extent are you confident you know how to help your child with the following activities?

Functioning	I'm not very sure how to help my child with this	I have some idea about how to help my child with this	I mostly know how to help my child with this	I am fully confident I know how to help my child with this
Mealtimes				
Participate	1	2	3	4
Be independent	1	2	3	4
Communicate	1	2	3	4
Behave appropriately	1	2	3	4
Unstructured play times	Unstructured play times			
Participate	1	2	3	4
Be independent	1	2	3	4
Communicate	1	2	3	4
Behave appropriately	1	2	3	4
Outings time (shopping, park, walks, etc.)				
Participate	1	2	3	4
Be independent	1	2	3	4
Communicate	1	2	3	4
Behave appropriately	1	2	3	4
Bath time				
Participate	1	2	3	4
Be independent	1	2	3	4
Communicate	1	2	3	4
Behave appropriately	1	2	3	4



Functioning	I'm not very sure how to help my child with this	I have some idea about how to help my child with this	I mostly know how to help my child with this	I am fully confident I know how to help my child with this
Going-to-bed time				
Participate	1	2	3	4
Be independent	1	2	3	4
Communicate	1	2	3	4
Behave appropriately	1	2	3	4

PART II: To what extent are you confident you know **how to help yourself and your family** with the following aspects of family functioning?

Functioning	I'm not very sure about this	I have some idea about this	I mostly know about this	I am fully confident I about this
Informational support.	Informational support.			
Information about my child's special needs	1	2	3	4
Information about resources, including services	1	2	3	4
Information about child development (what comes next, etc.)	1	2	3	4
Information about what to do with my child)	1	2	3	4
Emotional support				
Making sure we have a positive atmosphere in the family	1	2	3	4
Making sure we respond to each other's needs	1	2	3	4

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Functioning	I'm not very sure about this	I have some idea about this	I mostly know about this	I am fully confident I about this
Making sure we pay attention to all family members	1	2	3	4
Keeping in touch with extended family	1	2	3	4
Keeping in touch with friends	1	2	3	4
Getting to know our neighbors	1	2	3	4
Material support				
Basic needs (housing, clothing, food, etc.)	1	2	3	4
Equipment my child needs	1	2	3	4
Things for my child to play with	1	2	3	4
Family-level needs (i.e., how confident I am in knowing how to help myself and my family in)				
Finding time for myself	1	2	3	4
Finding time for myself and another person	1	2	3	4
Securing employment for me	1	2	3	4
Organizing hobbies, pastimes, recreation for me or the family	1	2	3	4
Meeting what my family really needs	1	2	3	4

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