

I LOVE YOU MOM AND DAD, BUT...

QUIZ FOR TEENAGERS

This questionnaire was prepared by the staff at Hawk Mountain Press and distributed through www.parenting-teenagers-today.com. The information gathered here will be used as research for a new book called, ***I Love You, Mom and Dad, but... What teens think parents need to know about adolescence***"

We here at www.parenting-teenagers-today.com are committed to seeing parents and teens develop lifelong relationships that are both loving and friendly. Please have your teen or any teens you know take this test and then return it to us via FAX (206-666-HAWK), as an email (put an "X" beside multiple choice answers), or through the U.S. mail to Hawk Mountain Press, 130 Glenview Avenue, Wyncote, PA 19095.

1. What is the #1 complaint you have about your parent(s)?
 - a) They don't trust me.
 - b) They yell at me and make me feel dumb; they don't respect me.
 - c) They don't like my friends.
 - d) They think I'm a bad kid when I'm just like everyone else.
 - e) They treat me like I'm still 10 years old.
 - f) I can't trust them.
 - g) Other:

2. What is the #1 thing you'd like to change about the way your parent(s) treat you?
 - a) I want them to accept me for the way I am, not the way they want me to be.
 - b) They should treat me as their equal, not a know-nothing kid whose opinion doesn't count.
 - c) I want them to stop criticizing me, calling me names, and always harping on the mistakes I make.
 - d) I want them to acknowledge me and see the positive things I do.
 - e) I want them stay out of my affairs, give me some space, and stop nagging me.
 - f) Other:

3. What causes the most fights and upsets between you and your parent(s)?

- a) when I talk back to them or disrespect them
- b) when they act overprotective and don't let me do things my friends can do
- c) when I break curfew or ignore what they say I have to do
- d) when I disappoint them by not doing well in school or at sports or something else they think is important.
- e) when they embarrass me in front of my friends
- f) when they criticize me too much or unfairly
- g) other:

4. When do you get along best with your parent(s)?

- a) when I do something they are proud of—like win an award, do well in school, play a sport well
- b) when we do something together that we all like and no one has something better to do
- c) After a family meeting or counseling, when we are all trying to get along
- d) playing a game, sports, vacationing together
- e) never
- f) other:

5. If your parent(s) sat and really listened to you without any threat of punishment or judgment, what would they learn about you and your life that they don't know now?

- a) that I have a life of my own
- b) that I'm a good friend and give good advice
- c) that I'm not stupid and I'll ask for advice when I need it
- d) that I'm a teenager and I have to handle my own problems whenever possible
- e) that I am responsible and doing the best I can most of the time
- f) other:

6. What do you think is the #1 complaint your parent(s) have about you?

- a) that I don't do my share around the house
- b) that I'm lazy and irresponsible (don't do my homework, clean up my room, etc.)
- c) that I mouth off at them and don't respect them
- d) that my friends are a bad influence on me
- e) that I'm moody and don't want to talk to them or take their advice
- f) that all I want to do is party and don't take life seriously enough
- g) other:

7. What is the #1 thing your parent(s) would like to change about the way you treat them?

- a) They want me to do what they say and not argue with them.
- b) They want me to treat them respectfully and stop yelling at them and saying hurtful things.
- c) They want me to stop criticizing them and appreciate the positive things they do for me.
- d) They want me to trust them by talking to them about my feelings and what's going on in my life.
- e) other:

8. Why do you think your parents get mad at you?

- a) because I'm not perfect and I don't meet their high standards
- b) because I refuse to do what they tell me to
- c) because I mouth off at them and don't treat them with respect
- d) because they're afraid for me and worry about me when I take risks
- e) because they're stressed out about work and have to take it out on someone

f) other:

9. Do you talk to your parents about:

- | | | |
|---------------------------|-----|----|
| • Sex | yes | no |
| • Drugs, parties, alcohol | yes | no |
| • Peer pressure | yes | no |
| • School problems | yes | no |

Why? Why not?

10. Do you trust and respect your parents? Is so, why? If not, why not?

11. Name three ways you see that you can improve your relationship with your parents.

- 1.
- 2.
- 3.

12. Name three ways your parents can improve their relationship with you.

- 1.
- 2.
- 3.

13. On a scale of 1-10 (10 being highest), how important is it to you to have a good relationship with your parents? Why?

14. On a scale of 1-10 (10 being highest), how do you rank your relationship with your parents right now?

15. What are some of the high-risk behaviors you have personally been involved with:

- a) Taking drugs (please specify which)
- b) Riding in cars at fast speeds
- c) Driving with someone who is under the influence of either alcohol or drugs
(please specify)
- d) Taking physical risks such as diving off high cliffs, leaning out of moving cars, lying down on highways, etc. (Please specify)
- e) Drinking to the point of blacking out
- f) Other:

If you have any comments about your experience taking this test (e.g. you saw something you could do to make things better at home) please let us know in the space below. Thanks for taking the time to take our quiz. If you leave us your email address, we'll send you an announcement of the publication of the book in the near future.



The form below must be filled out for identification purposes to assure the authors that a teenager ages 13-19 completed this questionnaire. We guarantee that this information is for verification purposes only and will not be sold, lent, or distributed in any way.

Full Name of Teen:

Age: Grade:

School Attending (or attended) and year of graduation:

City and State of school:

Phone number of school:

Email of teen:

For further information on the project, call the Hawk Mountain offices at 215-885-4437.

Thank you,

Abby Lederman, M.Ed.