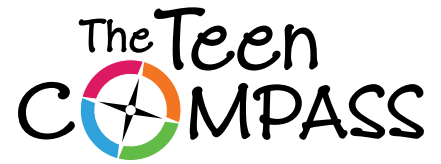


Teen Wellness Assessment Organization



The ability to keep track of and make good use of possessions, money, and time.

Rate the following 10 statements by placing a number in the spaces provided. Your answers will be a number from 0–10 based on the scale below. When you are done, transfer that score to the Teen Compass Self-Assessment Tool on page 9 and shade in the Organization “wedge” based on your score.

| Never | | Sometimes | | | Half of the Time | | | Most of the Time | | Always | |
|-------|---|-----------|---|---|------------------|---|---|------------------|---|--------|--|
| 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | |

I feel good about with the way I get and spend, budget, and keep track of my money, either as an allowance or earnings from a job. _____

I am always on time for school, work, and other commitments. _____

I organize my time and plan ahead to make sure that I allow enough time to get everything done. _____

I am happy with the way I organize my priorities, ensuring that I have enough time to dedicate to all the different aspects of my life. _____

I have a good method of remembering all of my assignments and other obligations. _____

My backpack, locker, and bedroom are all organized, and I can get my hands on anything I might need rather quickly. _____

I regularly take time to organize my possessions and myself so that I do not have to rush around at the last minute. _____

I juggle school, friends, family, and other obligations in a healthy way. _____

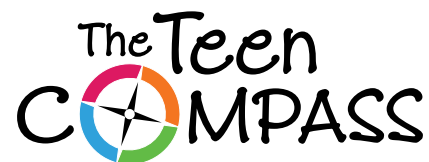
I am becoming more responsible for myself. I do my own laundry, help with meals, make and keep appointments, and keep track of important papers. _____

Most days I accomplish all of the things I set out to do that day. _____

TOTAL _____

Teen Wellness Assessment

Stress Resilience



The ability to deal positively with the adversities of life.

Rate the following 10 statements by placing a number in the spaces provided. Your answers will be a number from 0–10 based on the scale below. When you are done, transfer that score to the Teen Compass Self-Assessment Tool on page 9 and shade in the Stress Resilience “wedge” based on your score.

| Never | Sometimes | | | Half of the Time | | | Most of the Time | | | Always |
|-------|-----------|---|---|------------------|---|---|------------------|---|---|--------|
| 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |

I respond to changes in my life with a positive attitude. _____

I am dealing well with any major life changes, planned or unplanned, that have occurred over the last few years in my life. _____

I feel good about the support I get from others when I have something big going on in my life. _____

When I face a life challenge, I feel confident that I handle the accompanying stress in a healthy way. _____

When I have problems, I turn to others for support. _____

I set realistic goals for myself. _____

When I have a problem, I take charge by creating a realistic plan and working to solve it. _____

I am satisfied with the way I handle stress, handling it in healthy ways rather than engaging in self-destructive habits to cope. _____

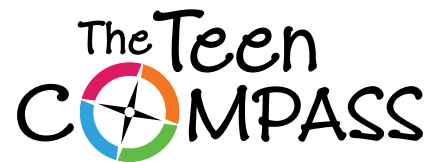
I am addressing any physical symptoms that may be related to stress in my life, such as trouble sleeping, headaches, outbursts of anger, or feelings of depression. _____

I feel good that things going on in my personal life rarely interfere with my concentration at school or work. _____

TOTAL _____

Teen Wellness Assessment

Relationships



The ability to create and maintain healthy, life-giving connections with others.

Rate the following 10 statements by placing a number in the spaces provided. Your answers will be a number from 0–10 based on the scale below. When you are done, transfer that score to the Teen Compass Self-Assessment Tool on page 9 and shade in the Relationships “wedge” based on your score.

| Never | Sometimes | | Half of the Time | | | Most of the Time | | Always | | |
|-------|-----------|---|------------------|---|---|------------------|---|--------|---|----|
| 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |

I am satisfied with the amount of time I spend with the important people in my life. _____

I am satisfied with the honest conversations I am able to have with my family and others who are important to me. _____

I feel good about the relationships that I have with my family members. _____

I am happy with my friendships and other social connections. _____

My friends and those who know me well would say that I am a good and trusted friend. _____

My friends and I share the same values. _____

I am satisfied with the impact my use/or non-use of drugs and alcohol has on my relationships with my friends and family. _____

I feel good about the amount of trust, respect, and honesty that exists in all of my relationships, including dating relationships, if applicable. _____

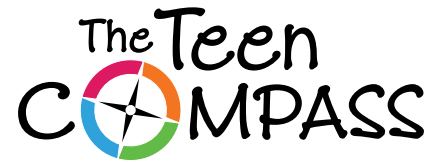
I am able to resolve conflict in a productive way with family and friends.
We are able to talk through conflict so that it does not continue. _____

I am able to identify and end an unhealthy relationship when I need to. _____

TOTAL _____

Teen Wellness Assessment

Rest and Play



The ability to balance work and play and to renew one's self.

Rate the following 10 statements by placing a number in the spaces provided. Your answers will be a number from 0–10 based on the scale below. When you are done, transfer that score to the Teen Compass Self-Assessment Tool on page 9 and shade in the Rest and Play “wedge” based on that score.

| Never | Sometimes | | Half of the Time | | | Most of the Time | | Always | | |
|-------|-----------|---|------------------|---|---|------------------|---|--------|---|----|
| 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |

I am satisfied with the amount of time I spend with the important people in my life. _____

On a regular basis I get enough rest to energize myself. _____

I feel good about the amount of time I have set aside for healthy and fun activities. _____

I have at least one hobby or interest that renews me, and I take intentional time for it on a regular basis. _____

I truly enjoy my recreational involvement in activities at school, at my place of worship, in the community, or with other local organizations. _____

I actively take advantage of opportunities to try new activities and ways to have fun. _____

I am confident that the amount of time I spend connected to technology such as video games, TV, computer, Facebook, and cell phone is good for my overall well-being. _____

I frequently have fun where alcohol and other drugs are not present. _____

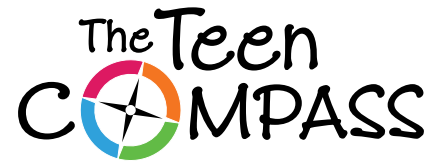
I feel good about the people with whom I spend my free time. _____

I use some of my free time to renew my relationship with myself. _____

TOTAL _____

Teen Wellness Assessment

Emotions



The ability to express and receive emotions in a healthy way.

Rate the following 10 statements by placing a number in the spaces provided. Your answers will be a number from 0–10 based on the scale below. When you are done, transfer that score to the Teen Compass Self-Assessment Tool on page 9 and shade in the Emotions “wedge” based on that score.

| Never | Sometimes | | Half of the Time | | | Most of the Time | | Always | | |
|-------|-----------|---|------------------|---|---|------------------|---|--------|---|----|
| 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |

People who know me would say I handle my emotions in a healthy way. _____

I avoid using alcohol, other drugs, and addictive behaviors to deal with my emotions. _____

The way I show emotions demonstrates of respect toward myself and others. _____

I am satisfied with the way I handle my emotions and how that affects my relationships. _____

I have a solid and healthy sense of confidence in myself. _____

I know the early warning signs of depression and anxiety and would feel comfortable seeking help from a trusted someone when needed. _____

I am able to share all of my emotions (including sadness, happiness, fear, and worry) with people I trust. _____

I am able to communicate my emotions in a positive way without being irritable, critical, or angry. _____

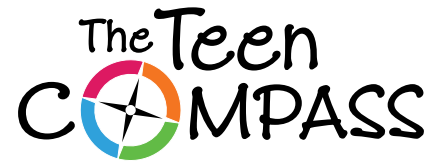
When someone I care about is upset, I am comfortable listening and really being present to them. _____

When I am feeling emotionally overwhelmed, I turn to others for support and help. _____

TOTAL _____

Teen Wellness Assessment

Spirituality



The development of a strong personal value system and a meaningful purpose in life.

Rate the following 10 statements by placing a number in the spaces provided. Your answers will be a number from 0–10 based on the scale below. When you are done, transfer that score to the Teen Compass Self-Assessment Tool on page 9 and shade in the Spirituality “wedge” based on that score.

| Never | Sometimes | | | Half of the Time | | | Most of the Time | | | Always |
|-------|-----------|---|---|------------------|---|---|------------------|---|---|--------|
| 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |

I have a clear sense of meaning and purpose in my life. _____

I am pleased with what I give back to the world. _____

I am involved in an activity that really matters to me. _____

I forgive others and I forgive myself. _____

I seek forgiveness from family and friends when I have hurt them. _____

I have activities that I do regularly to renew my soul, to center myself, and to gain perspective. _____

I am a part of a community that enriches my spiritual life. _____

The way I live my life is consistent with my spirituality and values. _____

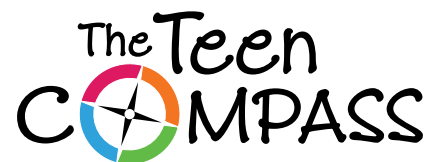
I am truly thankful for the good things in my life. _____

My spirituality influences my behavior in the the rest of my life. _____

TOTAL _____

Teen Wellness Assessment

School and Work



The ability to get the most out of educational, volunteer, and employment opportunities.

Rate the following 10 statements by placing a number in the spaces provided. Your answers will be a number from 0–10 based on the scale below. When you are done, transfer that score to the Teen Compass Self-Assessment Tool on page 9 and shade in the School–Work, “wedge” based on your score.

| Never | | Sometimes | | | Half of the Time | | | Most of the Time | | Always | |
|-------|---|-----------|---|---|------------------|---|---|------------------|---|--------|--|
| 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | |

I am pleased with my overall involvement in school. _____

I am personally happy with my grades. _____

I feel good about the connections I have with the the adults at school. _____

I feel good about the relationships I have with other students and how those relationships impact my all-around success at school. _____

I am confident that my use of social media, the internet, and video games has no negative impact on my school or work performance. _____

I feel good about the way my school/volunteer/sports/job performance is helping me to build my future. _____

I feel good about the way my decisions regarding drugs and alcohol impact my learning, and volunteer, sports and/or job performance. _____

I am satisfied with the way my activities outside school impact my connection with my school and family. _____

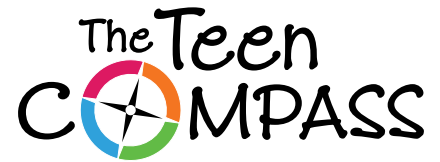
I am always on time for school, work, and other commitments. _____

I am satisfied with the way I pay attention, participate, and prepare homework for my classes, extracurriculars, volunteer work, or job. _____

TOTAL _____

Teen Wellness Assessment

Care for the Body



The ability to build healthy habits and practices regarding your physical well being.

Rate the following 10 statements by placing a number in the spaces provided. Your answers will be a number from 0–10 based on the scale below. When you are done, transfer that score to the Teen Compass Self-Assessment Tool on page 9 and shade in the Care for the Body “wedge” based on that score.

| Never | Sometimes | | | Half of the Time | | | Most of the Time | | | Always |
|-------|-----------|---|---|------------------|---|---|------------------|---|---|--------|
| 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |

The choices I make about what I eat and drink are healthy. _____

I have positive feelings about my relationship with food (what I eat, why I eat, and how often I eat). _____

I am satisfied with the amount of exercise I get on a regular basis. _____

I determine what is right for me, in terms of weight and appearance, rather than letting my peers or the culture determine that for me. _____

I go to the doctor and dentist for regular checkups and talk to someone about a problem as soon it arises. _____

I am comfortable with my sexuality and know that the decisions I make regarding sexual activity are healthy for me both physically and emotionally. _____

I am proud of the amount of respect I pay to my body overall. _____

My current weight is healthy for me. _____

My decisions regarding drugs, alcohol, and tobacco are serving me well. _____

Most days I get at least eight hours of sleep at normal sleeping hours. _____

TOTAL _____

The Teen Compass Self-Assessment Tool



Once you have arrived at your score from the Self Assessment, you can shade in that section. 0 is at the center of the Teen Compass, 50 is halfway out, and 100 is at the outer edge. Use a pencil, pen, or crayons to shade in the various sections. Your scores are not “good” or “bad,” nor are they “strong” or “weak.” They are simply a current snapshot of what areas of your life you have been paying the most attention to, and those areas that might be in need of a little more of your attention in order for you to be healthier.