



Vermont Coalition of Runaway & Homeless Youth Programs

Resiliency Assessment

Youth care worker: _____ Date completed: _____

Agency: _____ Client ID # from HMIS: _____

Program: BCP – Prevention BCP – Shelter TLP

Respond to each question with one of the following responses. Add additional information in the comment line if you wish.	No	A Little	I'm unsure	Mostly	Definitely
1. I feel safe where I live and/or stay	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comment line: What are some of the things that help you feel safe where you live/stay?</i>					
2. I feel safe in my community.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comment line: What are some of the things that help you feel safe in the community?</i>					
3. I feel safe from verbal and physical abuse.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comment line: What helps you feel safe from verbal and physical abuse?</i>					
4. I am able to work through conflict without using verbal or physical violence.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comment line: What helps you work through conflict?</i>					
5. I can identify healthy relationships.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comment line: What would you say are some of the characteristics of a healthy relationship?</i>					
6. I know how to keep myself out of trouble.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comment line: What do you do to keep yourself out of trouble?</i>					
7. At this time in my life, I like who I am.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comment line: What would you change if you could?</i>					

	No	A Little	I'm unsure	Mostly	Definitely
8. I do at least one thing to be healthy.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comment line: What do you do to take care of your health (i.e. exercise, meditation, nutrition, primary care physician, dentist, etc.)</i>					
9. I spend time doing at least one activity that I enjoy.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comment line: What activity do you enjoy doing? What is your favorite activity?</i>					
10. I have healthy ways to manage stress or stressful situations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comment line: What do you do to help manage stress?</i>					
11. I have supportive relationships with one or more family members.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comment line: What makes them supportive?</i>					
12. I have supportive relationships with one or more non-family adults (mentor, teacher, counselor, employer).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comment line: What makes them supportive?</i>					
13. I have one or more supportive friendships.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comment line: What makes them supportive?</i>					
14. I feel that adults in my community respect young adults/youth.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comment line: What are some of the ways that adults demonstrate that they value youth?</i>					

	No	A Little	I'm unsure	Mostly	Definitely
15. In the past few months, I've done something to help someone else.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comment: What was it that you did?</i>					
16. I have done something I am proud of.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comment line: What is something you are proud of?</i>					
17. I have a plan for the future.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comment line: Tell me about your plan, and what you need to do to get there.</i>					
18. I can listen effectively.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comment line: How do you know?</i>					
19. I can usually find the right words to share my thoughts, feelings, and ideas.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comment line: Can you give an example of a recent time when you were able to find the words to share your thought, feelings, ideas?</i>					
20. I know what community resources are available to me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comment line: What are some of the community resources you have used?</i>					
21. I am comfortable accessing community resources.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comment line: What makes you feel comfortable about accessing those resources?</i>					
22. When I have money, I think about saving some of it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comment line: Can you give an example?</i>					