

Name: _____

HEALTHY FAMILY RELATIONSHIPS

F A M I L Y C O U N S E L I N G O
H H W S U Q R C U S T O D Y I Y K
E E D Q C A H Q B Q V O N V F A D
S S P T E U B V O G X V W Y D S W
U U N O I T A T I O L P X E W P Z
B B C C R I S I S C E N T E R A D
A A S N O I T A M R I F F A D U F
D L C H Z I M N T D N R H R R S X
L A R D N S G E M N A S K O S A S
I S I P Y P Q G H V L J T B F B I
H U R I R X M L G Y D A O I S L B
C O Y Z W J I E J H I K S T J N L
L P Z I C V V C A D Y O V I T H I
U S H S E J W T E E Z W D D Y S N
X F N C C A O M Z W D L W W W P G
F O S T E R C A R E O S D E M I N
E M O T I O N A L A B U S E G V C

FAMILY COUNSELING

EMOTIONAL ABUSE

CRISIS CENTER

SPOUSAL ABUSE

EXPLOITATION

FOSTER CARE

CHILD ABUSE

AFFIRMATION

MEDIATOR

NEGLECT

CUSTODY

SIBLING