

SUBSTANCE USE RECOVERY EVALUATOR

SURE

CONFIDENTIAL

THESE QUESTIONS ARE TO HELP YOU MEASURE YOUR PERSONAL RECOVERY
FROM DRUG AND/ OR ALCOHOL DEPENDENCE

THEY HAVE BEEN DESIGNED WITH THE HELP OF SERVICE USERS SO THAT
THEY MEASURE WHAT IS IMPORTANT TO PEOPLE IN RECOVERY

How to fill in this questionnaire

1. Please complete all sections of the questionnaire (A, B & C)
2. Please **think about the last week** when completing each question
3. Please provide **one answer** for each statement. For example...

Example statement

Never	On 1 or 2 days	On 3 or 4 days	On 5 or 6 days	Every day
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>

SECTION A

Thinking about the last week, please rate yourself on each of the following statements

DRINKING AND DRUG USE (Part 1) – *Thinking about the last week*

1. I have drunk too much				
Never	On 1 or 2 days	On 3 or 4 days	On 5 or 6 days	Every day
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

2. I have used street drugs				
Never	On 1 or 2 days	On 3 or 4 days	On 5 or 6 days	Every day
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

3. I have experienced cravings				
Never	On 1 or 2 days	On 3 or 4 days	On 5 or 6 days	Every day
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

DRINKING AND DRUG USE (Part 2) – *Still thinking about the last week*

4. I have coped with problems without misusing drugs or alcohol				
All of the time	Most of the time	A fair amount of the time	A little of the time	None of the time
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

5. I have managed pains and ill-health without misusing drugs or alcohol				
All of the time	Most of the time	A fair amount of the time	A little of the time	None of the time
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

6. I have been spending my free time on hobbies and interests that do not involve drugs or alcohol				
All of the time	Most of the time	A fair amount of the time	A little of the time	None of the time
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

SECTION B

Please continue to read all questions & response options carefully

SELF-CARE – *Still thinking about the last week*

7. I have been taking care of my mental health

All of the time	Most of the time	A fair amount of the time	A little of the time	None of the time
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

8. I have been taking care of my physical health

All of the time	Most of the time	A fair amount of the time	A little of the time	None of the time
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

9. I have been eating a good diet

All of the time	Most of the time	A fair amount of the time	A little of the time	None of the time
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

10. I have slept well

All of the time	Most of the time	A fair amount of the time	A little of the time	None of the time
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

11. I have had a good daily routine

All of the time	Most of the time	A fair amount of the time	A little of the time	None of the time
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

RELATIONSHIPS – *Still thinking about the last week*

12. I have been getting on well with people

All of the time	Most of the time	A fair amount of the time	A little of the time	None of the time
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

13. I have felt supported by people around me

All of the time	Most of the time	A fair amount of the time	A little of the time	None of the time
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

14. I have been treated with respect and consideration by people around me

All of the time	Most of the time	A fair amount of the time	A little of the time	None of the time
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

15. I have treated others with respect and consideration

All of the time	Most of the time	A fair amount of the time	A little of the time	None of the time
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

MATERIAL RESOURCES – *Still thinking about the last week***16. I have had stable housing**

All of the time	Most of the time	A fair amount of the time	A little of the time	None of the time
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

17. I have had a regular income (from benefits, work, or other legal sources)

All of the time	Most of the time	A fair amount of the time	A little of the time	None of the time
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

18. I have been managing my money well

All of the time	Most of the time	A fair amount of the time	A little of the time	None of the time
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

OUTLOOK ON LIFE – *Still thinking about the last week***19. I have felt happy with my overall quality of life**

All of the time	Most of the time	A fair amount of the time	A little of the time	None of the time
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

20. I have felt positive

All of the time	Most of the time	A fair amount of the time	A little of the time	None of the time
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

21. I have had realistic hopes and goals for myself

All of the time	Most of the time	A fair amount of the time	A little of the time	None of the time
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

SECTION C

Still thinking about the last week, please record how important each of the following have been to you

1. Reducing or abstaining from drinking or drug taking			
Not important	A little important	Important	Very important
○	○	○	○

2. Looking after yourself (physically taking care of yourself, mentally taking care of yourself, having a good diet , sleeping well, having a good routine)			
Not important	A little important	Important	Very important
○	○	○	○

3. Having good relationships with other people (getting on with people, feeling supported by people, being treated with respect, treating others with respect)			
Not important	A little important	Important	Very important
○	○	○	○

4. Having resources and belongings (stable housing, regular income, managing money)			
Not important	A little important	Important	Very important
○	○	○	○

5. Outlook on life (having a good quality of life, feeling positive, having realistic hopes and goals)			
Not important	A little important	Important	Very important
○	○	○	○

SCORING:

Questions 1-3	Score	Score range
'Never' OR 'On 1 or 2 days'	= 3	Drinking and drug use = 6-18 Self-care = 5-15 Relationships = 4-12 Material resources = 3-9 Outlook on life = 3-9 <u>Total Score = 21-63</u>
'On 3 or 4 days'	= 2	
'On 5 or 6 days' OR 'Every day'	= 1	
Questions 4-21		
'All of the time' OR 'Most of the time'	= 3	
'A fair amount of the time'	= 2	
'A little of the time' OR 'None of the time'	= 1	
Section C = Not scored	--	

MY TOTAL SCORE: _____

DATE: _____

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