

RECOVERY ASSESSMENT SCALE – Short Form

Name (optional): _____

Date (optional): _____

(Please check the appropriate box indicating which administration this survey represents)

Initial: _____ Ongoing: _____ Refused: _____

Below is a list of statements that describe how people sometimes feel about themselves and their lives. Please read each one carefully and indicate the response that best describes the extent to which you agree or disagree with the statement. Please indicate whether you strongly disagree (1), disagree (2), not sure (3), agree (4), or strongly agree (5) with these statements.

DATE:	Strongly Disagree	Disagree	Not Sure	Agree	Strongly Agree
1. I have a desire to succeed.	1	2	3	4	5
2. I have my own plan for how to stay or become well.	1	2	3	4	5
3. I have goals in life that I want to reach.	1	2	3	4	5
4. I believe I can meet my current personal goals.	1	2	3	4	5
5. I have a purpose in life.	1	2	3	4	5
6. Even when I don't care about myself, other people do.	1	2	3	4	5
7. I can handle what happens in my life.	1	2	3	4	5
8. I like myself.	1	2	3	4	5
9. If people really knew me, they would like me.	1	2	3	4	5
10. Something good will eventually happen.	1	2	3	4	5
11. I'm hopeful about my future.	1	2	3	4	5
12. Coping with my mental illness is no longer the main focus of my life.	1	2	3	4	5
13. My symptoms interfere less and less with my life.	1	2	3	4	5
14. My symptoms seem to be a problem for shorter periods of time each time they occur.	1	2	3	4	5
15. I know when to ask for help.	1	2	3	4	5
16. I am willing to ask for help.	1	2	3	4	5
17. I ask for help, when I need it.	1	2	3	4	5
18. I have people I can count on.	1	2	3	4	5
19. Even when I don't believe in myself, other people do.	1	2	3	4	5
20. It is important to have a variety of friends.	1	2	3	4	5