

Mutual-Help or Peer Support Group Involvement Monthly Questionnaire

Name: _____ ID # _____ Date: _____

1. How do you define **recovery** - how do you know that you are making progress in life? What is your **recovery date** - the date you made a public commitment to stop or change your use of alcohol or other drugs and/or other behavior? If relevant to you, what is your **sobriety date** = last alcohol or other drug use date?

Recovery = _____

Recovery Date: _____ Sobriety Date: _____

2. Do you consider yourself to be a member of a peer support group? No Yes
3. How many mutual-help group meetings did you attend in the last 30 days? Please enter your best estimate below. Enter 0 if you did not attend any meetings in the last 30 days.

AA _____ NA _____ CA _____ MA _____ Double Trouble in Recovery _____

Celebrate Recovery _____ Reformers Unanimous _____ SMART Recovery _____

Secular Organizations for Sobriety _____ Al-Anon _____ Nar-Anon _____

Faith group/church: Specify _____

Other: _____

- | | <u>NO</u> | <u>YES</u> |
|---|--------------------------|--------------------------|
| 4. Do you have a sponsor or mentor? | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Do you have a "home" group? | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. In the last 30 days, did you complete attending 90 meetings in 90 days? | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Did you pick up any chips or other tokens of progress in the last 30 days? | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Did you celebrate a recovery or sobriety birthday in the last 30 days? | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Did you have a spiritual awakening or conversion experience in the last 30 days? ... | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Have you been a sponsor or mentor in the last 30 days? | <input type="checkbox"/> | <input type="checkbox"/> |

11. In the last 30 days, what steps, phases or levels did you complete? Circle all that apply.

None 1 2 3 4 5 6 7 8 9 10 11 12

12. How important is attending mutual-help or peer support meetings for your sobriety or recovery? Circle one number.

<u>Not all</u>	<u>Somewhat</u>	<u>Very</u>
<u>important</u>	<u>important</u>	<u>important</u>
1	3	5
2	4	

