

Recovery Check List

This list is just to help you see where your strengths and weaknesses are and to help you set some goals. Fill this out once a month to see how you are improving.

Yes	No	
<input type="checkbox"/>	<input type="checkbox"/>	maintaining appropriate daily routine
<input type="checkbox"/>	<input type="checkbox"/>	setting and achieving daily and long-term goals
<input type="checkbox"/>	<input type="checkbox"/>	personal care
<input type="checkbox"/>	<input type="checkbox"/>	setting and sticking to limits with children and others
<input type="checkbox"/>	<input type="checkbox"/>	constructive planning
<input type="checkbox"/>	<input type="checkbox"/>	appropriate decision-making and problem-solving efforts
<input type="checkbox"/>	<input type="checkbox"/>	choosing behaviors
<input type="checkbox"/>	<input type="checkbox"/>	well-rested
<input type="checkbox"/>	<input type="checkbox"/>	resentment-free
<input type="checkbox"/>	<input type="checkbox"/>	accepting (versus denying)
<input type="checkbox"/>	<input type="checkbox"/>	not controlling others nor feeling controlled by them
<input type="checkbox"/>	<input type="checkbox"/>	open to appropriate criticism and feedback
<input type="checkbox"/>	<input type="checkbox"/>	free of excessive criticism or self and others
<input type="checkbox"/>	<input type="checkbox"/>	gratitude versus self-pity and deprivation
<input type="checkbox"/>	<input type="checkbox"/>	responsible financial decisions (not over or under spending)
<input type="checkbox"/>	<input type="checkbox"/>	self-responsibility (versus scapegoating and blaming)
<input type="checkbox"/>	<input type="checkbox"/>	valuing wants and needs
<input type="checkbox"/>	<input type="checkbox"/>	free of victim self-image
<input type="checkbox"/>	<input type="checkbox"/>	free of fear and anxiety
<input type="checkbox"/>	<input type="checkbox"/>	free of guilt and shame
<input type="checkbox"/>	<input type="checkbox"/>	free of worry and obsession
<input type="checkbox"/>	<input type="checkbox"/>	not feeling excessively responsible for others
<input type="checkbox"/>	<input type="checkbox"/>	strong faith in a God
<input type="checkbox"/>	<input type="checkbox"/>	trusting and valuing self
<input type="checkbox"/>	<input type="checkbox"/>	mind clear and peaceful; logical thinking; free of confusion
<input type="checkbox"/>	<input type="checkbox"/>	feeling and dealing appropriately with feelings, including anger
<input type="checkbox"/>	<input type="checkbox"/>	appropriately disclosing
<input type="checkbox"/>	<input type="checkbox"/>	reasonable expectations of self and others
<input type="checkbox"/>	<input type="checkbox"/>	needing people versus NEEDING them
<input type="checkbox"/>	<input type="checkbox"/>	feeling secure with self; self-affirming
<input type="checkbox"/>	<input type="checkbox"/>	communicating clearly, directly, and honestly
<input type="checkbox"/>	<input type="checkbox"/>	balanced mood
<input type="checkbox"/>	<input type="checkbox"/>	maintaining contact with friends
<input type="checkbox"/>	<input type="checkbox"/>	feeling connected and close to people versus lonely and isolated
<input type="checkbox"/>	<input type="checkbox"/>	healthy perspective; life looks worth living
<input type="checkbox"/>	<input type="checkbox"/>	not using alcohol and medication to cope
<input type="checkbox"/>	<input type="checkbox"/>	having fun, relaxing during leisure activities, enjoying routine
<input type="checkbox"/>	<input type="checkbox"/>	giving appropriate positive feedback to self and others
<input type="checkbox"/>	<input type="checkbox"/>	getting--and allowing self to believe--positive feedback