
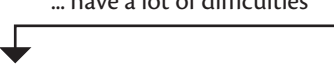

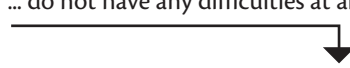
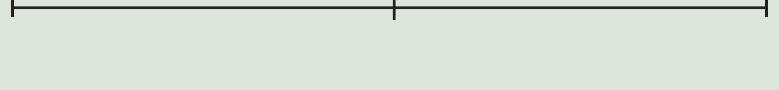
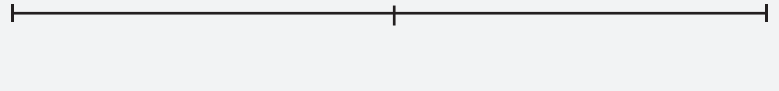
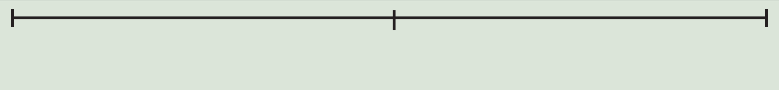
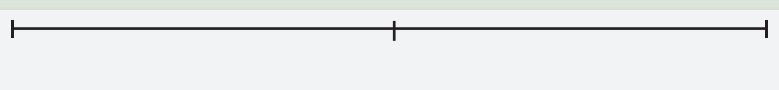
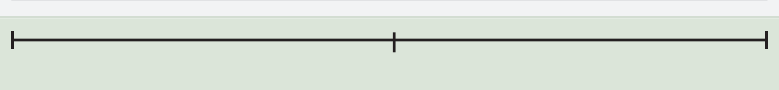
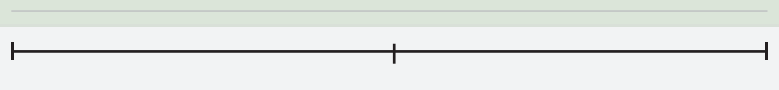
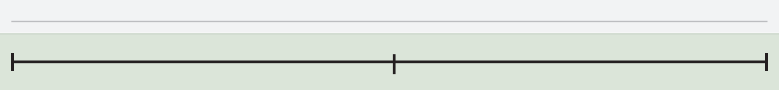
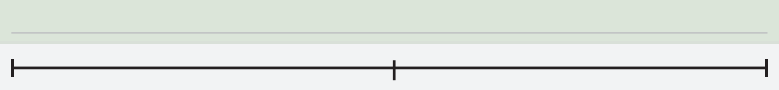
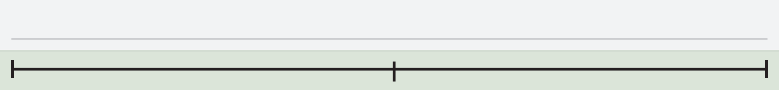



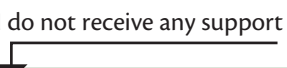
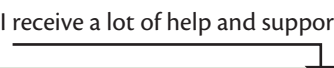
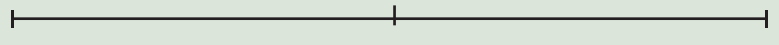
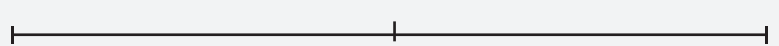

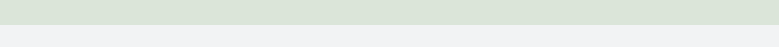


Assess whether you have difficulties with the topics mentioned in the question card and write a dash in the appropriate point on each scale. Also indicate, by ticking the appropriate section, whether you want to achieve personal change on the topic in question.

Date: _____

Name: _____	<p style="text-align: center;">As regards this topic I ...</p> <p style="text-align: center;"> ... have a lot of difficulties ... do not have any difficulties at all </p>	<p style="text-align: center;">I want a change to this</p> <p style="text-align: center;">yes no</p>	
1. Daily routines	<div style="text-align: center;"> </div>	<input type="checkbox"/>	<input type="checkbox"/>
2. Ability to relax	<div style="text-align: center;"> </div>	<input type="checkbox"/>	<input type="checkbox"/>
3. Conversation between two persons	<div style="text-align: center;"> </div>	<input type="checkbox"/>	<input type="checkbox"/>
4. Conversation in a group	<div style="text-align: center;"> </div>	<input type="checkbox"/>	<input type="checkbox"/>
5. Moving around in different environments	<div style="text-align: center;"> </div>	<input type="checkbox"/>	<input type="checkbox"/>
6. Exercise	<div style="text-align: center;"> </div>	<input type="checkbox"/>	<input type="checkbox"/>
7. Eating	<div style="text-align: center;"> </div>	<input type="checkbox"/>	<input type="checkbox"/>
8. Social flexibility	<div style="text-align: center;"> </div>	<input type="checkbox"/>	<input type="checkbox"/>
9. Undertaking tasks	<div style="text-align: center;"> </div>	<input type="checkbox"/>	<input type="checkbox"/>
10. Sleep and daily rhythm	<div style="text-align: center;"> </div>	<input type="checkbox"/>	<input type="checkbox"/>
11. Ability to concentrate	<div style="text-align: center;"> </div>	<input type="checkbox"/>	<input type="checkbox"/>
12. Memory	<div style="text-align: center;"> </div>	<input type="checkbox"/>	<input type="checkbox"/>
13. Regulating emotions	<div style="text-align: center;"> </div>	<input type="checkbox"/>	<input type="checkbox"/>
14. Control of thought	<div style="text-align: center;"> </div>	<input type="checkbox"/>	<input type="checkbox"/>

	As regards this topic I ...		I want a change to this	
	 ... have a lot of difficulties 	 ... do not have any difficulties at all 	yes	no
15. Planning of forethought			<input type="checkbox"/>	<input type="checkbox"/>
16. Time management			<input type="checkbox"/>	<input type="checkbox"/>
17. Flexibility of thought			<input type="checkbox"/>	<input type="checkbox"/>
18. Nonverbal communication			<input type="checkbox"/>	<input type="checkbox"/>
19. Tolerating changes			<input type="checkbox"/>	<input type="checkbox"/>
20. Family relationships			<input type="checkbox"/>	<input type="checkbox"/>
21. Rules in personal relationships			<input type="checkbox"/>	<input type="checkbox"/>
22. Intimate relationships			<input type="checkbox"/>	<input type="checkbox"/>
23. Coping with work			<input type="checkbox"/>	<input type="checkbox"/>
24. Pain			<input type="checkbox"/>	<input type="checkbox"/>

Resources and support	I do not receive any support		I receive a lot of help and support	
				
Health professionals			<input type="checkbox"/>	<input type="checkbox"/>
Family			<input type="checkbox"/>	<input type="checkbox"/>
Friends			<input type="checkbox"/>	<input type="checkbox"/>
Drugs			<input type="checkbox"/>	<input type="checkbox"/>

I am most satisfied with the sections: _____

I want change especially to the sections: _____