

--	--	--	--	--

CJ Client Evaluation of Self and Treatment (TCU CJ CEST)

Instruction Page

Please follow along as the interviewer reads each of the following statements aloud. The statements are about how you see yourself or your treatment in this facility. Indicate how strongly you AGREE or DISAGREE with the statement by filling in the appropriate circle. If you strongly disagree with the statement, fill in the circle under the “Disagree Strongly” column. If you disagree with the statement, but don’t feel strongly about it, fill in the circle under the “Disagree” column. If you don’t know whether you agree or disagree with the statement, fill in the circle below the “Undecided” column. If you agree with the statement, but don’t feel very strongly about it, fill in the circle below the “Agree” column. If you agree with the statement and feel strongly about it, fill in the circle under the “Agree Strongly” column. Please mark only one circle for each statement.

The examples below show how to mark the circles --

For example -- ●

	<i>Disagree Strongly</i> (1)	<i>Disagree</i> (2)	<i>Uncertain</i> (3)	<i>Agree</i> (4)	<i>Agree Strongly</i> (5)
<p>Person 1. I like chocolate ice cream. ○ ● ○ ○ ○</p> <p style="text-align: center;"><i><u>This person disagrees a little so she probably doesn’t like chocolate ice cream.</u></i></p>					
<p>Person 2. I like chocolate ice cream. ○ ○ ○ ○ ●</p> <p style="text-align: center;"><i>This person likes chocolate ice cream a lot.</i></p>					
<p>Person 3. I like chocolate ice cream. ○ ○ ● ○ ○</p> <p style="text-align: center;"><i>This person is not sure if he likes chocolate ice cream or not.</i></p>					

--	--	--	--	--

TCU CJ CEST Survey

PLEASE RESPOND TO EACH OF THE STATEMENTS BELOW BY FILLING IN THE CIRCLE TO INDICATE HOW MUCH YOU AGREE OR DISAGREE WITH EACH ONE. MARK ONLY ONE CHOICE FOR EACH STATEMENT. THANK YOU FOR YOUR PARTICIPATION.

Today's

Date: |_|_|_|_| || |_|_|_|_| || |_|_|_|_|
 MO DAY YR

Disagree				Agree
Strongly	Disagree	Uncertain	Agree	Strongly
<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>	<i>(5)</i>

- | | | | | | |
|--|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| 1. You have people close to you who motivate and encourage your recovery. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 2. You trust your counselor. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 3. You need help in dealing with your drug use. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 4. You need to stay in treatment. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 5. Time schedules for counseling sessions at this program are convenient for you. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 6. It's always easy to follow or understand what your counselor is trying to tell you. ... | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 7. You only do things that feel safe. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 8. You have family members who want you to be in treatment. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 9. This program expects you to learn responsibility and self-discipline. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 10. This treatment is giving you a chance to solve your drug problems. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 11. This kind of treatment program is not helping you. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 12. Your counselor is easy to talk to. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 13. You have trouble sleeping. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 14. You have much to be proud of. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

--	--	--	--	--

Disagree Strongly	Disagree	Uncertain	Agree	Agree Strongly
<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>	<i>(5)</i>

- 15. You have close family members who want to help you stay away from drugs. ...
- 16. You are willing to talk about your feelings during counseling.
- 17. This program is organized and run well.
- 18. You are motivated and encouraged by your counselor.
- 19. You need more help with your emotional troubles.
- 20. You are concerned about legal problems.
- 21. You have made progress with your drug/alcohol problems.
- 22. You have good friends who do not use drugs.
- 23. You have carried weapons, like knives or guns.
- 24. You have people close to you who can always be trusted.
- 25. You are satisfied with this program.
- 26. You have learned to analyze and plan ways to solve your problems.
- 27. It is urgent that you find help immediately for your drug use.
- 28. You have made progress toward your treatment program goals.
- 29. You feel a lot of anger inside you.
- 30. You always attend the counseling sessions scheduled for you.

--	--	--	--	--

Disagree Strongly	Disagree	Uncertain	Agree	Agree Strongly
<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>	<i>(5)</i>

- 31. Your counselor recognizes the progress you make in treatment.
- 32. You will give up your friends and hangouts to solve your drug problems.
- 33. You have a hot temper.
- 34. Your counselor is well organized and prepared for each counseling session.
- 35. Your counselor is sensitive to your situation and problems.
- 36. You feel a lot of pressure to be in treatment.
- 37. You like others to feel afraid of you.
- 38. You need more individual counseling sessions.
- 39. You consider how your actions will affect others.
- 40. You could be sent to jail or prison if you are not in treatment.
- 41. Your counselor makes you feel foolish or ashamed.
- 42. You feel mistreated by other people.
- 43. Your counselor views your problems and situations realistically.
- 44. You plan ahead.
- 45. This treatment program gives you hope for recovery.
- 46. You need more educational or vocational training services.
- 47. You want to be in drug treatment.

--	--	--	--	--

Disagree Strongly	Disagree	Uncertain	Agree	Agree Strongly
<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>	<i>(5)</i>

- 48. You feel interested in life.
- 49. Other clients at this program care about you and your problems.
- 50. You feel like a failure.
- 51. You have trouble concentrating or remembering things.
- 52. You avoid anything dangerous.
- 53. You have stopped or greatly reduced your drug use while in this program.
- 54. Your counselor helps you develop confidence in yourself.
- 55. You have people close to you who understand your situation and problems.
- 56. Your life has gone out of control.
- 57. You always participate actively in your counseling sessions.
- 58. You have made progress in understanding your feelings and behavior.
- 59. You need more group counseling sessions.
- 60. You feel afraid of certain things, like elevators, crowds, or going out alone.
- 61. You feel anxious or nervous.
- 62. You wish you had more respect for yourself.
- 63. Other clients at this program are helpful to you.
- 64. You are very careful and cautious.

--	--	--	--	--

Disagree Strongly	Disagree	Uncertain	Agree	Agree Strongly
<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>	<i>(5)</i>

- 65. You feel sad or depressed.
- 66. You think about probable results of your actions.
- 67. You feel extra tired or run down.
- 68. You have improved your relations with other people because of this treatment.
- 69. You have trouble sitting still for long.
- 70. You think about what causes your current problems.
- 71. The staff here are efficient at doing their job.
- 72. You are similar to (or like) other clients of this program.
- 73. You are ready to leave this treatment program.
- 74. You have made progress with your emotional or psychological issues.
- 75. Your counselor respects you and your opinions.
- 76. You work in situations where drug use is common.
- 77. You are tired of the problems caused by drugs.
- 78. You think of several different ways to solve a problem.
- 79. You feel you are basically no good.
- 80. You are in this treatment program only because it is required.
- 81. You worry or brood a lot.

--	--	--	--	--

Disagree Strongly	Disagree	Uncertain	Agree	Agree Strongly
<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>	<i>(5)</i>

- 82. You have people close to you who expect you to make positive changes in your life.
- 83. You get mad at other people easily.
- 84. You have trouble making decisions.
- 85. You have serious drug-related health problems.
- 86. You have people close to you who help you develop confidence in yourself.
- 87. You like to do things that are strange or exciting.
- 88. You feel hopeless about the future.
- 89. You make good decisions.
- 90. You have developed positive trusting friendships while in this program.
- 91. In general, you are satisfied with yourself.
- 92. You have urges to fight or hurt others.
- 93. You make decisions without thinking about consequences.
- 94. You give honest feedback during counseling.
- 95. You feel tense or keyed-up.
- 96. You like to take chances.
- 97. You have people close to you who respect you and your efforts in this program.
- 98. You feel you are unimportant to others.

--	--	--	--	--

Disagree Strongly	Disagree	Uncertain	Agree	Agree Strongly
<i>(1)</i>	<i>(2)</i>	<i>(3)</i>	<i>(4)</i>	<i>(5)</i>

- | | | | | | | |
|------|---|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| 99. | You can depend on your counselor's understanding. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 100. | You like the "fast" life. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 101. | There is a sense of family (or community) in this program. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 102. | You feel tightness or tension in your muscles. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 103. | You can get plenty of personal counseling at this program. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 104. | You want to get your life straightened out. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 105. | You need more medical care and services. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 106. | You like friends who are wild. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 107. | Several people close to you have serious drug problems. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 108. | This program location is convenient for you. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 109. | You feel lonely. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 110. | You have legal problems that require you to be in treatment. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 111. | You are not ready for this kind of treatment program. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 112. | You analyze problems by looking at all the choices. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 113. | You are following your counselor's guidance. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 114. | Your treatment plan has reasonable objectives. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 115. | Your temper gets you into fights or other trouble. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |