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| --- | --- | --- | --- | --- | --- | --- |
| Which statement describes your: | ☑**the definition that best describes your current situation for each category** | | | | | To improve my situation I need: |
| **Feelings today?** | **⬜** | **⬜** | **⬜** | **⬜** | **⬜** |  |
| **Housing?** | **⬜**  I am sleeping on the streets or somewhere not considered housing. | **⬜**  I am staying in shelter or at someone else's’ home on a temporary basis. | **⬜**  I have housing but it is short-term (less than a year) or unaffordable. | **⬜**  I have affordable housing but it is unstable, unsafe, and/or unclean. | **⬜**  I have safe, adequate, and affordable housing. |  |
| **Access to Health**  **Care?** | **⬜**  I don’t have health insurance (including MAP and don’t get health care. | **⬜**  I don’t have health insurance or MAP, but go to the emergency room or call EMS if I need help. | **⬜**  I have health insurance, but I am still unable to access a doctor or other care provider. | **⬜**  I have health insurance and a doctor but have trouble seeing them or meeting all my unique needs. | **⬜**  I have a regular doctor and am able to see specialists if needed. |  |
| **Economic Stability?** | **⬜**  I have no income, job, or benefits. | **⬜**  I do day to day labor that is unpredictable and does not have benefits. | **⬜**  I do seasonal or part-time work, or have limited benefits that don’t always cover basic needs. | **⬜**  I work full-time with limited pay and/or have benefits that cover my basic needs. | **⬜**  I have permanent employment. It provides enough income so I can save money for emergencies. |  |
| **Food?** | **⬜**  I rely on free food. | **⬜**  I can sometimes buy food, but have no way to prepare or store it. | **⬜**  I can buy food but need some help from a food pantry or charity. | **⬜**  I can meet my food needs without help from a nonprofit, but can not always buy food I want. | **⬜**  I can buy any food I want whenever I need it. |  |
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| Which statement describes your: | ☑ **the definition that best describes your current situation for each category** | | | | | To improve my situation I need: |
| **Mental Health?** | **⬜**  I experience difficulty in day-to-day life because of my mental health. It makes daily functions difficult (i.e. making an appointment). | **⬜**  I have regular symptoms that occur and sometimes make it hard to function. | **⬜**  I have some symptoms, once in awhile. They do not usually impact my daily functions. | **⬜**  I experience some stress. It rarely impair my daily functions. | **⬜**  I almost never have symptoms. My daily problems or concerns do not impact my daily functioning. |  |
| **Transportation?** | **⬜**  I have no access to transport. | **⬜**  Transportation is present but there are barriers. It is unreliable and/or too expensive. | **⬜**  Transportation is affordable. It can be limited and/or inconvenient. | **⬜**  Transportation meets basic daily travel needs. | **⬜**  I have transportation options. They are reliable and flexible. |  |
| **Drug or Alcohol Use?** | **⬜**  I use drugs and alcohol to function. | **⬜**  Drugs or alcohol causes me to avoid or neglect normal life activities regularly. | **⬜**  I use and it can cause some social, occupational, emotional, or physical problems. | **⬜**  I use drugs and alcohol sometimes but there are no issues related to my use. | **⬜**  I do not use drugs or alcohol. |  |