

Assessing and Strengthening My Personal Support Network

	Names of Supports →	John	Team RWB							
1	I live with this support.	✓	n/a							
2	I live within an hour of this support.	✓	✓							
3	I spend ____ hour(s) per week with/talking to this support.	20	1							
4	I am satisfied with the support I receive from this support.	Somewhat	Very							
5	My primary way of communicating with this support is _____.	In person	In person / Online							
	This support makes me feel:									
6	Understood		✓							
7	Heard		✓							
8	Informed									
9	Useful									
10	Loved or appreciated	✓	✓							
11	Like I am able to talk about my deepest problems		✓							
12	Like I have a definite role or place in the relationship									
13	Like I am able to be myself		✓							

Supports	Ways I can strengthen this relationship
John	Weekly movie night
Team RWB	Attend bi-weekly gatherings; volunteer to organize an activity