Hogan Drug Attitude Inventory

Assessment date [__][__][__] [__] Assessment no. [__]

The purpose of this questionnaire is to gain some understanding of how people view the use of psychiatric medications and the nature of their experiences of these drugs. Your replies are used for research purposes only, are strictly confidential, and will in no way affect your treatment.

Please read each of the following statements and decide whether it is true as applied to you or false as applied to you. If the statement is false or usually false, circle the F following the statement. If the statement is true or usually true, circle the T following the statement. If you want to change an answer, mark an X over the incorrect answer and circle the correct answer.

Please answer every question. If a statement is worded not quite the way you would express it yourself, decide whether it is mostly true or mostly false. Remember to give your own opinion – there are no right or wrong answers. Do not spend too much time on any one item.

The medications referred to in the statements are psychiatric medications only.

1. I don’t need to take medication once I feel better. T F
2. For me, the good things about medication outweigh the bad. T F
3. I feel weird, like a ‘zombie’ on medication T F
4. Even when I am not in hospital I need medication regularly. T F
5. If I take medication it’s only because of pressure from other people. T F
6. I am more aware of what I am doing, of what is going on around me, when I am on medication. T F
7. Taking medications will do me no harm. T F
8. I take medications of my own free choice. T F
9. Medications make me feel more relaxed. T F
10. I am no different on or off medication. T F
11. The unpleasant effects of medication are always present. T F
12. Medication makes me feel tired and sluggish. T F
13. I take medication only when I am sick. T F
14. Medication is a slow-acting poison. T F
15. I get on better with people when I am on medication. T F
16. I can’t concentrate on anything when I am on medication. T F
17. I know better than the doctor when to go off medication. T F

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18. I feel more normal on medication. T F
19. I would rather be sick than taking medication. T F
20. It is unnatural for my mind and body to be controlled by medication. T F
21. My thoughts are clearer on medication. T F
22. I should stay on medication even if I feel all right. T F
23. Taking medication will prevent me from having a breakdown. T F
24. It is up to the doctor when I go off medication. T F
25. Things that I could do easily are much more difficult when I am on medication. T F
26. I am happier, feel better, when taking medication. T F
27. I am given medication to control behaviour that other people (not myself) don’t like. T F
28. I can’t relax on medication. T F
29. I am in better control of myself when taking medications . T F
30. By staying on medications, I can prevent getting sick. T F

If you have any further comments about medications or about this questionnaire, please write them below.

Please do not write below this line.
SCORING CRITERIA
The scale has 15 items that will be scored as **True** and 15 items that will be scored as **False** in the case of a fully compliant response. A correct answer to these items will be scored as plus 1. An incorrect answer will be scored as minus 1. The total score is the sum of pluses and minuses. A positive total score means a compliant response. A negative total score means a non-compliant response.

Below is the standard of a completely compliant response profile.

5. F   15. T   25. F
7. T   17. F   27. F