

Mindfulness Attention Awareness Scale

Name:

Date:

Please read each statement and indicate how frequently you have these experiences. Use the following scale to choose the most appropriate number for each item.

1 = Almost Always, 2 = Very Frequently, 3 = Somewhat Frequently, 4 = Somewhat Infrequently, 5 = Very Infrequently, 6 = Almost Never

	Question	Rating
1	I find myself doing things without paying attention.	
2	I break or spill things because of carelessness, not paying attention, or thinking of something else.	
3	I find it difficult to stay focused on what's happening in the present.	
4	I tend to walk quickly to get where I'm going without paying attention to what I experience along the way.	
5	I tend not to notice feelings of physical tension or discomfort until they really grab my attention.	
6	I forget a person's name almost as soon as I've been told it for the first time.	
7	It seems I am "running on automatic" without much awareness of what I'm doing.	
8	I rush through activities without being really attentive to them.	
9	I get so focused on the goal I want to achieve that I lose touch with what I'm doing right now to get there.	
10	I do jobs or tasks automatically, without being aware of what I'm doing.	
11	I find myself listening to someone with one ear, doing something else at the same time.	
12	I drive places on 'auto pilot' and then wonder why I went there.	
13	I find myself preoccupied with the future or the past.	
14	I find myself going places without paying attention to what I experience along the way.	
15	I find myself doing something without being aware of why I'm doing it.	
	Total Score	

Scoring:

- Add the scores for each item to get a total score.
- **A lower score indicated higher levels of mindfulness.**

Reflection and Action Plan

Patient's reflections on their mindfulness level

Action plan for increasing mindfulness

Additional Notes

Additional observations or comments by the patient or mental health professional.