**ABI RESOURCES**

**Quality of life - Survey**

**Individual’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Instructions: Help us understand how you have been feeling. Read each item carefully and circle the number which best describes your current situation. Circle only one number for each question . | **Never** | **Rarely** | **Sometimes** | **Frequently** | **Almost Always** |
| 1. I tire quickly. | **1** | **2** | **3** | **4** | **5** |
| 1. I feel stressed at home and the community | **1** | **2** | **3** | **4** | **5** |
| 1. I blame myself for things. | **1** | **2** | **3** | **4** | **5** |
| 1. I have thought of ending my life. | **1** | **2** | **3** | **4** | **5** |
| 1. I feel fearful. | **1** | **2** | **3** | **4** | **5** |
| 1. I find my life satisfying. | **1** | **2** | **3** | **4** | **5** |
| 1. I am a happy person. | **1** | **2** | **3** | **4** | **5** |
| 1. I feel worthless. | **1** | **2** | **3** | **4** | **5** |
| 1. I feel loved and wanted. | **1** | **2** | **3** | **4** | **5** |
| 1. I enjoy my spare time. | **1** | **2** | **3** | **4** | **5** |
| 1. I have difficulty concentrating. | **1** | **2** | **3** | **4** | **5** |
| 1. I feel hopeless about the future. | **1** | **2** | **3** | **4** | **5** |
| 1. I like myself | **1** | **2** | **3** | **4** | **5** |
| 1. I am satisfied with life. | **1** | **2** | **3** | **4** | **5** |
| 1. I feel I am not doing well. | **1** | **2** | **3** | **4** | **5** |
| 1. I am satisfied with my relationships with others. | **1** | **2** | **3** | **4** | **5** |
| **Score** |  | | | | |