**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** |  |