

MHQoL

Please indicate below which statements best describe your situation **TODAY** by ticking **ONE** box in each of the seven subjects.

SELF-IMAGE

- I think very positively about myself
- I think positively about myself
- I think negatively about myself
- I think very negatively about myself

INDEPENDENCE *For example: freedom of choice, financial, co-decision making*

- I am very satisfied with my level of independence
- I am satisfied with my level of independence
- I am dissatisfied with my level of independence
- I am very dissatisfied with my level of independence

MOOD

- I do not feel anxious, gloomy, or depressed
- I feel a little anxious, gloomy, or depressed
- I feel anxious, gloomy, or depressed
- I feel very anxious, gloomy, or depressed

RELATIONSHIPS *For example: partner, children, family, friends*

- I am very satisfied with my relationships
- I am satisfied with my relationships
- I am dissatisfied with my relationships
- I am very dissatisfied with my relationships

DAILY ACTIVITIES *For example: work, study, household, leisure activities*

- I am very satisfied with my daily activities
- I am satisfied with my daily activities
- I am dissatisfied with my daily activities
- I am very dissatisfied with my daily activities

PHYSICAL HEALTH

- I have no physical health problems
- I have some physical health problems
- I have many physical health problems
- I have a great many physical health problems

FUTURE

- I am very optimistic about my future
- I am optimistic about my future
- I am gloomy about my future
- I am very gloomy about my future

PSYCHOLOGICAL WELL-BEING

On the scale below, please indicate with an X how you rate your psychological well-being. 0 represents the worst imaginable psychological well-being, while 10 represents the best imaginable psychological well-being.

