

CW 2.0 Multicultural Quality of Life Index

(Adapted from Mezzich, Cohen, Ruiperez, Liu & Yoon, 1999)

Name _____

Date _____

Instructions: Please indicate the quality of your health and life at present, from “poor” to “excellent,” by placing an **X** on any of the ten points on the line for each of the following items:

1. Physical Well-Being (feeling energetic, free of pain and physical problems)

Poor 1 2 3 4 5 6 7 8 9 Excellent 10

2. Mental/Emotional Well-Being (feeling good, comfortable with yourself, clear headed)

Poor 1 2 3 4 5 6 7 8 9 Excellent 10

3. Self-Care and Independent Functioning (carrying out daily living tasks; making own decisions)

Poor 1 2 3 4 5 6 7 8 9 Excellent 10

4. Occupational Functioning (able to carry out work, school and parenting duties)

Poor 1 2 3 4 5 6 7 8 9 Excellent 10

5. Interpersonal Functioning (able to respond and related well to family, friends, and groups)

Poor 1 2 3 4 5 6 7 8 9 Excellent 10

6. Social-Emotional Support (availability of people you can trust and who can offer help and emotional support)

Poor 1 2 3 4 5 6 7 8 9 Excellent 10

7. Community and Services Support (pleasant and safe neighborhood, access to financial, informational and other resources)

Poor 1 2 3 4 5 6 7 8 9 Excellent 10

8. Personal Fulfillment (experiencing a sense of balance, pride and satisfaction; finding joy in life; doing things that make me happy)

Poor 1 2 3 4 5 6 7 8 9 Excellent 10

9. Spiritual Fulfillment (experiencing faith, religion or other spiritual happiness beyond my material possessions)

Poor 1 2 3 4 5 6 7 8 9 Excellent 10

10. General Perception of Quality of Life (feeling satisfied and happy with your life in general)

Poor 1 2 3 4 5 6 7 8 9 Excellent 10