

# WHOQOL– SRPB BREF

## UK VERSION



Department of Mental Health and Substance Abuse  
World Health Organisation  
Geneva

### For Office Use Only

	Equations for computing domain scores	Raw score	Transformed score	
			4-20	0-100
Domain 1	$(6-Q3) + (6-Q4) + Q13 + Q22 + Q23 + Q24 + Q25$ $\square + \square + \square + \square + \square + \square + \square$	=		
Domain 2	$Q5 + Q10 + Q14 + Q26 + (6-Q34)$ $\square + \square + \square + \square + \square$	=		
Domain 3	$Q27 + Q28 + Q29$ $\square + \square + \square$	=		
Domain 4	$Q11 + Q12 + Q15 + Q16 + Q17 + Q30 + Q31 + Q32$ $\square + \square + \square + \square + \square + \square + \square$	=		
Domain 5	$Q6 + Q7 + Q8 + Q9 + Q18 + Q19 + Q20 + Q21 + Q33$ $\square + \square + \square + \square + \square + \square + \square + \square$	=		

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## Instructions

This questionnaire asks how you feel about your quality of life, health and other areas of your life. **Please answer all the questions.** If you are unsure about which response to give to a question, **please choose the ONE** that appears most appropriate. This can often be your first response.

Please read each question, assess your feelings, and **circle** the number on the scale for each question that gives the best answer for you.

		Very poor	Poor	Neither poor nor good	Good	Very good
1	How would you rate your quality of life?	1	2	3	4	5

		Very Dissatisfied	Dissatisfied	Neither Satisfied nor Dissatisfied	Satisfied	Very Satisfied
2	How satisfied are you with your health?	1	2	3	4	5

The following questions ask about **how much** you have experienced certain things **in the last two weeks.**

		Not at all	A little	A moderate amount	Very much	An extreme amount
3	How much do you feel that pain prevents you from doing what you need to do?	1	2	3	4	5
4	How much do you need medical treatment to function in your daily life?	1	2	3	4	5
5	How much do you enjoy life?	1	2	3	4	5
6	To what extent does any connection to a spiritual being help you to get through hard times?	1	2	3	4	5
7	To what extent do you feel your life has a purpose?	1	2	3	4	5
8	To what extent does faith give you comfort in daily life?	1	2	3	4	5

		Not at all	A little	A moderate amount	Very much	Extremely
9	To what extent do you feel life to be meaningful?	1	2	3	4	5
10	How well are you able to concentrate?	1	2	3	4	5
11	How safe do you feel in your daily life?	1	2	3	4	5
12	How healthy is your physical environment?	1	2	3	4	5

The following questions ask about **how completely** you experience or were able to do certain things **in the last two weeks**.

		Not at all	A little	Moderately	Mostly	Completely
13	Do you have enough energy for everyday life?	1	2	3	4	5
14	Are you able to accept your bodily appearance?	1	2	3	4	5
15	To what extent do you have enough money to meet your needs?	1	2	3	4	5
16	How available to you is the information that you need in your day-to-day life?	1	2	3	4	5
17	To what extent do you have the opportunity for leisure activities?	1	2	3	4	5
18	To what extent are you able to experience awe from your surroundings? (e.g. nature, art, music)	1	2	3	4	5
19	How much does spiritual strength help you to live better?	1	2	3	4	5
20	To what extent do you have inner peace?	1	2	3	4	5
21	To what extent are you hopeful about your life?	1	2	3	4	5

The following questions ask you to say **how good or satisfied** you have felt about various aspects of your life **over the last two weeks**.

		Very poor	Poor	Neither poor nor good	Good	Very good
22	How well are you able to get around?	1	2	3	4	5

		Very dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Very satisfied
23	How satisfied are you with your sleep?	1	2	3	4	5
24	How satisfied are you with your ability to perform daily living activities?	1	2	3	4	5
25	How satisfied are you with your capacity for work?	1	2	3	4	5
26	How satisfied are you with yourself?	1	2	3	4	5
27	How satisfied are you with your personal relationships?	1	2	3	4	5
28	How satisfied are you with your sex life?	1	2	3	4	5
29	How satisfied are you with the support you get from your friends?	1	2	3	4	5

30	How satisfied are you with the conditions of your living place?	1	2	3	4	5
31	How satisfied are you with your access to health services?	1	2	3	4	5
32	How satisfied are you with your transport?	1	2	3	4	5
33	How satisfied are you that you have a balance between mind, body and soul?	1	2	3	4	5

The following question refers to **how often** you have felt or experienced certain things **in the last two weeks**.

		Never	Seldom	Quite often	Very often	Always
34	How often do you have negative feelings, such as blue mood, despair, anxiety, depression?	1	2	3	4	5

		Not at all	Slightly	Moderately	Very	Extremely
35	To what extent do you consider yourself to be a religious person?	1	2	3	4	5
36	To what extent do you have spiritual beliefs?	1	2	3	4	5
37	To what extent do you have strong personal beliefs?	1	2	3	4	5

If you hold strong personal beliefs that guide the way you live (e.g. environment, political, philosophical, humanist) then please tell us here:

\_\_\_\_\_

Please say how many minutes it took to complete this form \_\_\_\_\_

**THANK YOU VERY MUCH FOR YOUR HELP**

**If you have any comments then please write them below**