



***Emotional Well-Being***

1. Would you say that you are a happy person?  
 ☺1 Yes  
 ☹2 Sometimes  
 ☹3 No
2. How do you feel about your home where you live?  
 ☺1 Proud  
 ☹2 OK  
 ☹3 Not proud
3. How much choice did you have in who you live with?  
 ☺1 A lot  
 ☹2 A little  
 ☹3 None
4. How safe do you feel in your neighborhood?  
 ☺1 Very safe  
 ☹2 Some safe  
 ☹3 Not safe
5. Do you like yourself?  
 ☺1 Most of the time  
 ☹2 Some of the time  
 ☹3 None of the time
6. Do you feel that others treat you the same as any other person?  
 ☺1 Yes  
 ☹2 Sometimes  
 ☹3 No
7. In general, how happy are you with your life?  
 ☺1 Very happy  
 ☹2 OK  
 ☹3 Not happy

***Interpersonal Relations***

8. Do people help you learn how to do things for yourself?  
 ☺1 Most times  
 ☹2 Sometimes  
 ☹3 No times
9. When you make a mistake, do people help you?  
 ☺1 Yes  
 ☹2 Sometimes  
 ☹3 No
10. When you set goals, do people help you reach them?  
 ☺1 Yes  
 ☹2 Sometimes  
 ☹3 No
11. How often do you see or talk with your family?  
 ☺1 Often  
 ☹2 Sometimes  
 ☹3 Never, or no family
12. How many close friends do you have?  
 ☺1 A lot  
 ☹2 Some  
 ☹3 Few
13. Does what you do most days let you look good to others?  
 ☺1 Yes  
 ☹2 Sometimes  
 ☹3 No

***Material Well-Being***

14. How many things do you own, like furniture, TV, stereo or a bike?  
 ☺1 Many things  
 ☹2 Some things  
 ☹3 Nothing
15. How often do you worry about having enough money to pay the rent or buy food?  
 ☺1 Never

- ☹️ Sometimes
- ☹️ Often

16. On money, do you feel that you are:
- 😊 Well off
  - ☹️ Have some money problems
  - ☹️ Poor

17. Do you have money each week that you can spend on what you want?
- 😊 Yes
  - ☹️ Sometimes
  - ☹️ No

18. Do you save money:
- 😊 Every time you get paid
  - ☹️ Sometimes
  - ☹️ Never?

19. Do you have the chance to earn good money?
- 😊 Yes, you earn good money now
  - ☹️ Not sure
  - ☹️ No

***Personal Development***

20. Does your job or what you do most days make you feel important?
- 😊 Yes
  - ☹️ Sometimes
  - ☹️ No

21. Are you getting the training that will help you get a job or a better job?
- 😊 Yes
  - ☹️ Not sure
  - ☹️ No

22. Do others give you a chance to become what you want to be?
- 😊 Yes
  - ☹️ Sometimes
  - ☹️ No

23. Are you learning things that will make you a better person?
- 😊 Yes
  - ☹️ Sometimes

- ☹️ No

24. Do you get the information you need about sexuality?
- 😊 Yes
  - ☹️ Sometimes
  - ☹️ No or don't know what that means

25. Do you get the services you need?
- 😊 Yes
  - ☹️ Sometimes
  - ☹️ No

***Physical Well-Being***

26. On your health, are people:
- 😊 concerned the right amount
  - ☹️ too concerned, or
  - ☹️ do they not care about your health?

27. Is your health:
- 😊 Good
  - ☹️ Fair
  - ☹️ Poor?

28. Would you say your eating habits are:
- 😊 Good
  - ☹️ Fair
  - ☹️ Poor?

29. Do you have regular check ups with a dentist?
- 😊 Yes
  - ☹️ Sometimes
  - ☹️ No

30. Can you get the sleep you need without being disturbed?
- 😊 Yes
  - ☹️ Sometimes
  - ☹️ No

31. Do staff or people you live with hit or hurt you?
- 😊 No
  - ☹️ Sometimes
  - ☹️ Often

***Self-Determination***

32. Did you pick who you live with?
- 😊 Yes

- ⊖2 Some
  - ⊖3 No
33. Can you be alone when you want to?
- ⊕1 Yes
  - ⊖2 Sometimes
  - ⊖3 No
34. How much choice do you have in what food you eat?
- ⊕1 A lot
  - ⊖2 Some
  - ⊖3 Not much
35. Do you get a chance to say what you think?
- ⊕1 Often
  - ⊖2 Sometimes
  - ⊖3 Never
36. Do you pay for things you buy with your own money?
- ⊕1 Yes
  - ⊖2 Sometimes
  - ⊖3 No
37. Did you choose your job or what you do most days?
- ⊕1 Yes
  - ⊖2 Some
  - ⊖3 No

***Social Inclusion***

38. Do people help you to be part of your community?
- ⊕1 Yes
  - ⊖2 Sometimes
  - ⊖3 No
39. Do you go to fun things in your community:
- ⊕1 Yes
  - ⊖2 Sometimes
  - ⊖3 No
40. When you go to fun things, are you active?
- ⊕1 Yes
  - ⊖2 Sometimes
  - ⊖3 No

41. Do you think your neighbors like you?
- ⊕1 Yes
  - ⊖2 Not sure
  - ⊖3 No
42. How many friends do you have from church, synagogue, and community organizations?
- ⊕1 Lots
  - ⊖2 Some
  - ⊖3 None
43. How often do you see your friends on weekends?
- ⊕1 Every weekend
  - ⊖2 Some weekends
  - ⊖3 Not on weekends

***Rights***

44. Do staff ask before they come into your home or room?
- ⊕1 Yes
  - ⊖2 Sometimes
  - ⊖3 No
45. Can you lock the bathroom door if you want to?
- ⊕1 Yes
  - ⊖2 Maybe
  - ⊖3 No
46. Can you talk on the telephone in private?
- ⊕1 Yes
  - ⊖2 Sometimes
  - ⊖3 No
47. Can you spend time by yourself if you want?
- ⊕1 Yes
  - ⊖2 Sometimes
  - ⊖3 No
48. When you have a gripe against staff, is it easy to say something?
- ⊕1 Yes
  - ⊖2 Sometimes
  - ⊖3 No
49. How often do you vote in government elections?
- ⊕1 Often
  - ⊖2 Sometimes
  - ⊖3 Never

50. How happy are you with your life overall?

- ☺1 Very happy
- ☹2 OK
- ☹3 Not happy

**Transportation**

51. When you want to go somewhere, do you have transportation:

- ☺1 most of the time
- ☹2 some of the time, or
- ☹3 almost never?

52. When you want to go somewhere:

- ☺1 Can you just decide and go
- ☹2 Do you have to plan some, or
- ☹3 Do you have to plan many days ahead and ask people?

53. If you set up a ride, can you depend on it?

- ☺1 Yes
- ☹2 Sometimes
- ☹3 No

54. Do you miss things or have to change plans because of transportation?

- ☺1 No
- ☹2 Sometimes
- ☹3 Often

55. Do transportation problems make you feel separated from other people?

- ☺1 No
- ☹2 Sometimes
- ☹3 Often

56. Do you have the chance to earn good money?

- ☺1 Yes, you earn good money now
- ☹2 Not sure
- ☹3 No

Thank you. Those are all my questions.

57. *Interviewer 1 name:* \_\_\_\_\_

*Interviewer 2 name:* \_\_\_\_\_

*O 00 Self completion by person or proxy*

58. *Date of Interview:* \_\_\_\_\_

59. *Was the person who answered . . .*

- O 1 The consumer*
- O 2 The consumer helped by others*
- O 3 Family member, friend, advocate*
- O 4 Service coordinator*
- O 5 Staff person or job coach*

60. *Where was the interview conducted?*

- O 1 Consumer's home*
- O 2 Work place, vocational center, day program*
- O 3 Other place*
- O 4 By telephone*
- O 5 Mail, fax*

61. *Were consumer's staff or family in the room during the interview?*

- O 1 Yes*
- O 2 No*

62. *Were other interviewing teams in the room during the interview?*

- O 1 Yes*
- O 2 No*

63. *Did the person understand the questions:*

- O 1 Very well*
- O 2 Some*
- O 3 Not very well*

-----  
Ask Me!<sup>sm</sup> is the property of The Arc of Maryland and may not be reproduced or used without written permission.  
-----