## **CAREGIVER WELL-BEING SCALE**

## I. ACTIVITIES

Below are listed a number of activities that each of us do or someone does for us. Thinking over the past three months, indicate to what extent you think each activity has been met by circling the appropriate number on the scale provided below. You do not have to be the one doing the activity. You are being asked to rate the extent to which each activity has been taken care of in a timely way.

	1. Rarely 2.	arely 2. Occasionally 3. Sometimes		4. Frequently				5. Usi	ually
1.	Buying food			1	2	3	4	5	
2.	Taking care of personal daily activities (meals, hygiene, laundry)			1	2	3	4	5	
3.	Attending to medical needs			1	2	3	4	5	
4.	Keeping up with hom cleaning, house repair		ctivities (lawn,	1	2	3	4	5	
5.	Participating in events at church and/or in the community			1	2	3	4	5	
6.	Taking time to have fun with friends and/or family			1	2	3	4	5	
7.	Treating or rewarding yourself			1	2	3	4	5	
8.	Making plans for your financial future			1	2	3	4	5	

## II. NEEDS

Below are listed a number of needs we all have. For each need listed, think about your life over the past three months. During this period of time, indicate to what extent you think each need has been met by circling the appropriate number on the scale provided below.

cır	1. Rarely 2. Occasionally 3. Sometimes			4. Frequently				5. Usuall	y
1.	Eating a well-balanced diet			1	2	3	4	5	
2.	Getting enough sleep			1	2	3	4	5	
3.	Receiving appropriate health care			1	2	3	4	5	
4.	Having adequate shelter			1	2	3	4	5	
5.	Feeling good about yourself			1	2	3	4	5	
6.	Feeling secure abo	out your financial fut	ure	1	2	3	4	5	

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