

Self-Care Questionnaire

Patient Name _____ Date _____

Research shows that people who take time to recharge and restore are more creative, happier, and more successful. This questionnaire will help you identify the areas of your life that are well-tended and those that could use more time and attention. This is not meant to be a diagnostic assessment. Instead, it is a tool to help you see what you are doing to care for yourself. There are no right or wrong answers to these questions, and some of them may require a bit of thought. Take your time and answer each question to the best of your ability based on your self-care practices right now.

Instructions

For the following questions, please rank each item on a scale of 0 to 5, as follows:

0 = never 1 = rarely 2 = sometimes 3 = often 4 = regularly 5 = always

Physical Wellbeing — How often do you:

1. ____ Eat a whole foods-based diet rich in colorful fruits and vegetables?
2. ____ Drink enough water?
3. ____ Exercise for more than 20 minutes?
4. ____ Wake feeling refreshed from sleep?
5. ____ Sleep at least 7 hours per night?
6. ____ Make time to relax or nap?
7. ____ Take time to breathe deeply throughout the day?
8. ____ Engage in stress-reducing activities (excluding TV or screen time)?
9. ____ Spend time in nature?
10. ____ Feel nourished, healthy, and strong?

Physical Wellbeing Total: _____

Mental, Emotional, Spiritual Wellbeing — How often do you:

1. ____ Make time to participate in things you enjoy?
2. ____ Give and receive affection regularly?
3. ____ Feel understood and valued by those who are close to you?
4. ____ Feel gratitude on a daily basis?
5. ____ Find meaning in life even during difficult times?
6. ____ Take an interest in or find joy in the world around you?
7. ____ Have hope that things will get better?
8. ____ Express yourself creatively?
9. ____ Treat yourself with kindness?
10. ____ Remember to make your dreams and goals a priority?

Mental, Emotional, Spiritual Wellbeing Total: _____

Please continue on the next page

For the following questions, please rank each item on a scale of 0 to 5, as follows:

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Professional Life, Work, Career — How often do you:

1. ____ Hold a work position in an area of your interest?
2. ____ Work in a position that matches your professional goals?
3. ____ Find a sense of meaning and enjoyment in your work?
4. ____ Empathize and connect with customers, clients, and work colleagues?
5. ____ Have confidence in your ability to address challenges in your professional life?
6. ____ Feel supported at work or in your professional life?
7. ____ Have someone you can rely on if you need help or guidance?
8. ____ Set limits at work, whether it be with clients or tasks?
9. ____ Disengage and leave pressures behind at the end of the day?
10. ____ Take vacation or holiday breaks to allow for some downtime?

Professional Life, Work, Career Total: ____

Social Life, Family, Relationships — How often do you:

1. ____ Have a dependable person who listens to you?
2. ____ Have supportive family and friends close by?
3. ____ Get enough social time with people who make you happy?
4. ____ Participate in group activities with people who share a common interest?
5. ____ Spend time with people who make you laugh?
6. ____ Feel like your close relationships are loving and supportive?
7. ____ Have the ability to say no comfortably?
8. ____ Do something fun with family or friends at least once a week?
9. ____ Feel like your personal life brings balance to your professional life?
10. ____ Feel comfortable asking for help when you need it?

Social Life, Family, Relationships Total: ____

Score Interpretation and Next Steps

The higher your score in each section, the better you may be at taking time for self-care and wellness in each aspect of your life. Trying to improve your scores can help create more balance in your life.

Consider items on which you scored 3 or lower. How can you modify your behavior to improve your self-care practices? What goals might you need to set in order to make these changes?