

**MobQoL-7D**

Mobility can mean lots of different things. For some people mobility is about walking around, for other people mobility is about using a wheelchair or other aids. The aim of this questionnaire is to find out how your mobility affects your quality of life, no matter how you move around or what mobility aids you use.

For each question, place a tick (✓) in **ONE** box to show which statement best describes your quality of life and mobility at the moment. If you use any mobility aids, think about how they help or hinder you in relation to each question

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|  |  | **1. Accessibility** |  |
|  |  |  I do not find it difficult to move around my home |  |
|  |  |  I find it a little bit difficult to move around my home |  |
|  |  |  I find it very difficult to move around my home |  |
|  |  |  I cannot move around my home |  |
|  |  |  |  |
|  |  | **2. Contribution** *(such as contributing at home, work, education or in the community)* |  |
|  |  |  My mobility never makes it difficult to contribute and do the things that make me feel valued |  |
|  |  |  My mobility sometimes makes it difficult to contribute and do the things that make me feel valued |  |
|  |  |  My mobility often makes it difficult to contribute and do the things that make me feel valued |  |
|  |  |  My mobility always makes it difficult to contribute and do the things that make me feel valued |  |
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|  |  | **3. Pain and discomfort** |  |
|  |  |  Moving around in my everyday life is not painful or uncomfortable |  |
|  |  |  Moving around in my everyday life is a little bit painful or uncomfortable |  |
|  |  |  Moving around in my everyday life is very painful or uncomfortable |  |
|  |  |  Moving around in my everyday life is extremely painful or uncomfortable |  |
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|  |  | **4. Independence** |  |
|  |  |  I am always satisfied with my level of independence |  |
|  |  |  I am often satisfied with my level of independence |  |
|  |  |  I am sometimes satisfied with my level of independence |  |
|  |  |  I am never satisfied with my level of independence |  |
|  |  |  |  |
|  |  | **5. Self-esteem** *(including identity, confidence and self-consciousness)* |  |
|  |  |  I never feel bad about myself because of my mobility |  |
|  |  |  I sometimes feel bad about myself because of my mobility |  |
|  |  |  I often feel bad about myself because of my mobility |  |
|  |  |  I always feel bad about myself because of my mobility |  |
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|  |  | **6. Mood and emotions** |  |
|  |  |  I never feel low, sad or unhappy because of my mobility |  |
|  |  |  I sometimes feel low, sad or unhappy because of my mobility |  |
|  |  |  I often feel low, sad or unhappy because of my mobility |  |
|  |  |  I always feel low, sad or unhappy because of my mobility |  |
|  |  |  |  |
|  |  | **7. Anxiety** *(such as feelings of worry or stress)* |  |
|  |  |  My mobility does not make me feel anxious |  |
|  |  |  My mobility makes me feel a little bit anxious |  |
|  |  |  My mobility makes me feel very anxious |  |
|  |  |  My mobility makes me feel extremely anxious |  |