**DIALOG Scale**

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| 1. **How satisfied are you with your mental health?**
 | Do you need additional help in this area? Y/N |
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| --- | --- | --- | --- | --- | --- | --- |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| Totally dissatisfied | Very dissatisfied | Fairly dissatisfied | In the middle | Fairly satisfied | Very satisfied | Totally satisfied |
|  |

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| 1. **How satisfied are you with your physical health?**
 | Do you need additional help in this area? Y/N  |
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| --- | --- | --- | --- | --- | --- | --- |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| Totally dissatisfied | Very dissatisfied | Fairly dissatisfied | In the middle | Fairly satisfied | Very satisfied | Totally satisfied |
|  |

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| 1. **How satisfied are you with your job situation?**
 | Do you need additional help in this area? Y/N |
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| --- | --- | --- | --- | --- | --- | --- |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| Totally dissatisfied | Very dissatisfied | Fairly dissatisfied | In the middle | Fairly satisfied | Very satisfied | Totally satisfied |
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| 1. **How satisfied are you with your accommodation?**
 | Do you need additional help in this area? Y/N |
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| --- | --- | --- | --- | --- | --- | --- |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| Totally dissatisfied | Very dissatisfied | Fairly dissatisfied | In the middle | Fairly satisfied | Very satisfied | Totally satisfied |
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| 1. **How satisfied are you with your leisure activities?**
 | Do you need additional help in this area? Y/N |
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| --- | --- | --- | --- | --- | --- | --- |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| Totally dissatisfied | Very dissatisfied | Fairly dissatisfied | In the middle | Fairly satisfied | Very satisfied | Totally satisfied |
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| 1. **How satisfied are you with your relationship with your partner/family?**
 | Do you need additional help in this area? Y/N |
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| --- | --- | --- | --- | --- | --- | --- |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| Totally dissatisfied | Very dissatisfied | Fairly dissatisfied | In the middle | Fairly satisfied | Very satisfied | Totally satisfied |

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|  |  |
| 1. **How satisfied are you with your friendships?**
 | Do you need additional help in this area? Y/N |
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| --- | --- | --- | --- | --- | --- | --- |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| Totally dissatisfied | Very dissatisfied | Fairly dissatisfied | In the middle | Fairly satisfied | Very satisfied | Totally satisfied |

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| 1. **How satisfied are you with your personal safety?**
 | Do you need additional help in this area? Y/N |
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| --- | --- | --- | --- | --- | --- | --- |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| Totally dissatisfied | Very dissatisfied | Fairly dissatisfied | In the middle | Fairly satisfied | Very satisfied | Totally satisfied |

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| 1. **How satisfied are you with your medication?**
 | Do you need additional help in this area? Y/N |
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| --- | --- | --- | --- | --- | --- | --- |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| Totally dissatisfied | Very dissatisfied | Fairly dissatisfied | In the middle | Fairly satisfied | Very satisfied | Totally satisfied |

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| 1. **How satisfied are you with the practical help you receive?**
 | Do you need additional help in this area? Y/N |
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| --- | --- | --- | --- | --- | --- | --- |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| Totally dissatisfied | Very dissatisfied | Fairly dissatisfied | In the middle | Fairly satisfied | Very satisfied | Totally satisfied |

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| 1. **How satisfied are you with your meetings with mental health professionals?**
 | Do you need additional help in this area? Y/N |
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| --- | --- | --- | --- | --- | --- | --- |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| Totally dissatisfied | Very dissatisfied | Fairly dissatisfied | In the middle | Fairly satisfied | Very satisfied | Totally satisfied |

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