

ACQLI

Carer's Questionnaire

Please read these instructions first

On the following pages you will find some comments made by carers about their experience of caring and their relationship with the person they care for.

Please read each statement carefully and decide whether it applies to you and your caring situation **at the moment**.

If it **does** apply to you, tick the box marked **True**

If it **does not** apply to you, please tick the box marked **Not True**.

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(Carer of female relative or friend)

Please read each statement carefully and decide whether it applies to you and your caring situation **at the moment**

1. I never have time to sit down
True
Not True

2. I often get irritable
True
Not True

3. Organising shopping is very difficult
True
Not True

4. Emotionally it is very draining
True
Not True

5. There is no conversation between us
True
Not True

6. I have little freedom to do what I want to do
True
Not True