

Living in the Community Questionnaire – Summary (LCQ-S)

This questionnaire is designed to explore aspects of your life in the community including your social activities, participation in employment or study, your living situation and your physical health care.

The questionnaire is to be completed by people aged 16 years and older. Completion of the questionnaire is voluntary. Your personal information, including answers to this questionnaire, is covered by the privacy laws in your state or territory.

(Please select one response for each statement)

In the last four weeks...	YES	NO
1. Did you do any activities with family or friends?		
2. Did you do any activities with community groups or clubs?		
3. Did you participate in any paid employment (including if you were on leave)?		
4. Did you participate in any organised volunteer work?		
5. Were you enrolled in a training or education course?		
6. Did you provide care (such as personal care, support or assistance) to a family member or friend? This includes work for which you may have received a Carer Allowance or Carer payment.		
7. Did you have adequate accommodation?		
8. Did you feel lonely?		
9. Did you have enough money to pay your bills?		

In general, how would you rate... (Please select one response for each statement)					
	Poor	Fair	Good	Very good	Excellent
10. Your physical health	1	2	3	4	5
11. Your ability to get support from family or friends when you need it	1	2	3	4	5
12. Your confidence to have your say about issues that are important to you	1	2	3	4	5
13. Your sense of being part of a group or community	1	2	3	4	5
14. Your hopefulness for the future	1	2	3	4	5
15. Your overall wellbeing	1	2	3	4	5

Demographics used for testing:

D1.	What is your gender? (Please select one response)	<ol style="list-style-type: none"> 1. Male 2. Female 98. Other
D2.	What is the main language you speak at home? (Please select one response)	<ol style="list-style-type: none"> 1. English 98. Other (Please specify)
D3.	Are you of Aboriginal and/or Torres Strait Island origin? (Please select one response)	<ol style="list-style-type: none"> 1. Yes, Aboriginal 2. Yes, Torres Strait Islander 3. Yes, Aboriginal and Torres Strait Islander 4. No
D4	What is your age? (Please select one response)	<ol style="list-style-type: none"> 1. Under 18 years 2. 18 to 24 years 3. 25 to 34 years 4. 35 to 44 years 5. 45 to 54 years 6. 55 to 64 years 7. 65 years and over
D5	Are you a qualified health professional? (Select all that apply)	<ol style="list-style-type: none"> 1. No 2. Yes - Nurse 3. Yes - General practitioner 4. Yes – Psychiatrist 5. Yes - Psychologist 6. Yes – Social worker 7. Yes – Disability support worker 8. Yes – Allied health professional 9. Yes - Other health professional (Specify) 10. Don't know
D6	Have you seen a health professional because of concerns about your mental health in the last 12 months? (Please select one response)	<ol style="list-style-type: none"> 1. Yes 2. No 3. Prefer not to answer 4. Don't know