



## Multidimensional Assessment of Interoceptive Awareness - Version 2 (MAIA-2)

### Instructions:

Below you will find a list of statements. Please indicate how often each statement applies to you generally in daily life.

|    |   | Never | Very Rarely | Rarely | Occasionally | Very Frequently | Always |
|----|---|-------|-------------|--------|--------------|-----------------|--------|
| 1  | When I am tense I notice where the tension is located in my body.                                   | 0     | 1           | 2      | 3            | 4               | 5      |
| 2  | I notice when I am uncomfortable in my body.  | 0     | 1           | 2      | 3            | 4               | 5      |
| 3  | I notice where in my body I am comfortable.   | 0     | 1           | 2      | 3            | 4               | 5      |
| 4  | I notice changes in my breathing, such as whether it slows down or speeds up.                       | 0     | 1           | 2      | 3            | 4               | 5      |
| 5  | I ignore physical tension or discomfort until they become more severe.                              | 5     | 4           | 3      | 2            | 1               | 0      |
| 6  | I distract myself from sensations of discomfort.  | 5     | 4           | 3      | 2            | 1               | 0      |
| 7  | When I feel pain or discomfort, I try to power through it.  | 5     | 4           | 3      | 2            | 1               | 0      |
| 8  | I try to ignore pain.   | 5     | 4           | 3      | 2            | 1               | 0      |
| 9  | I push feelings of discomfort away by focusing on something.  | 5     | 4           | 3      | 2            | 1               | 0      |
| 10 | When I feel unpleasant body sensations, I occupy myself with something else so I don't have to feel | 5     | 4           | 3      | 2            | 1               | 0      |
| 11 | When I feel physical pain, I become upset.  | 5     | 4           | 3      | 2            | 1               | 0      |
| 12 | I start to worry that something is wrong if I feel any discomfort.                                  | 5     | 4           | 3      | 2            | 1               | 0      |
| 13 | I can notice an unpleasant body sensation without worrying about it.                                | 0     | 1           | 2      | 3            | 4               | 5      |
| 14 | I can stay calm and not worry when I have feelings of discomfort or pain.                           | 0     | 1           | 2      | 3            | 4               | 5      |
| 15 | When I am in discomfort or pain I can't get it out of my mind.                                      | 5     | 4           | 3      | 2            | 1               | 0      |
| 16 | I can pay attention to my breath without being distracted by things happening around me.            | 0     | 1           | 2      | 3            | 4               | 5      |



|    |   | Never | Very Rarely | Rarely | Occasionally | Very Frequently | Always |
|----|---|-------|-------------|--------|--------------|-----------------|--------|
| 17 | I can maintain awareness of my inner bodily sensations even when there is a lot going on around me. | 0     | 1           | 2      | 3            | 4               | 5      |
| 18 | When I am in conversation with someone, I can pay attention to my posture.                          | 0     | 1           | 2      | 3            | 4               | 5      |
| 19 | I can return awareness to my body if I am distracted.   | 0     | 1           | 2      | 3            | 4               | 5      |
| 20 | I can refocus my attention from thinking to sensing my body.  | 0     | 1           | 2      | 3            | 4               | 5      |
| 21 | I can maintain awareness of my whole body even when a part of me is in pain or discomfort.          | 0     | 1           | 2      | 3            | 4               | 5      |
| 22 | I am able to consciously focus on my body as a whole.   | 0     | 1           | 2      | 3            | 4               | 5      |
| 23 | I notice how my body changes when I am angry.   | 0     | 1           | 2      | 3            | 4               | 5      |
| 24 | When something is wrong in my life I can feel it in my body.  | 0     | 1           | 2      | 3            | 4               | 5      |
| 25 | I notice that my body feels different after a peaceful experience.                                  | 0     | 1           | 2      | 3            | 4               | 5      |
| 26 | I notice that my breathing becomes free and easy when I feel comfortable.                           | 0     | 1           | 2      | 3            | 4               | 5      |
| 27 | I notice how my body changes when I feel happy / joyful.  | 0     | 1           | 2      | 3            | 4               | 5      |
| 28 | When I feel overwhelmed I can find a calm place inside.   | 0     | 1           | 2      | 3            | 4               | 5      |
| 29 | When I bring awareness to my body I feel a sense of calm.   | 0     | 1           | 2      | 3            | 4               | 5      |
| 30 | I can use my breath to reduce tension.  | 0     | 1           | 2      | 3            | 4               | 5      |
| 31 | When I am caught up in thoughts, I can calm my mind by focusing on my body/breathing.               | 0     | 1           | 2      | 3            | 4               | 5      |
| 32 | I listen for information from my body about my emotional state.                                     | 0     | 1           | 2      | 3            | 4               | 5      |
| 33 | When I am upset, I take time to explore how my body feels.  | 0     | 1           | 2      | 3            | 4               | 5      |
| 34 | I listen to my body to inform me about what to do.  | 0     | 1           | 2      | 3            | 4               | 5      |
| 35 | I am at home in my body.  | 0     | 1           | 2      | 3            | 4               | 5      |
| 36 | I feel my body is a safe place.   | 0     | 1           | 2      | 3            | 4               | 5      |



|                                | Never    | Very Rarely | Rarely   | Occasionally | Very Frequently | Always   |
|--------------------------------|----------|-------------|----------|--------------|-----------------|----------|
| 37 I trust my body sensations. | <b>0</b> | <b>1</b>    | <b>2</b> | <b>3</b>     | <b>4</b>        | <b>5</b> |

**Developer Reference:**

Mehling WE, Acree M, Stewart A, Silas J, Jones A (2018) The Multidimensional Assessment of Interoceptive Awareness, Version 2 (MAIA-2). PLoS ONE 13(12): e0208034. <https://doi.org/10.1371/journal.pone.0208034>

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