Stress & Coping Self-Test

Instructions: Answer all 18 of the following questions about how you feel and how things have been going with you during the past month. Mark the response that best applies to you.

QUESTION	A	B	C	D	E	F
How have you been feeling in general?	☐ 5 In an excellent frame of mind	☐ 4 In a very good mood	☐ 3 In a good mood mostly	☐ 2 My mood has been up and down	☐ 1 In a poor frame of mind mostly	☐ 0 In a very poor frame of mind
Have you been bothered by nervousness?	☐ 5 Not at all	☐ 4 A little	☐ 3 Some – enough to bother me	☐ 2 Yes – quite a bit	☐ 1 Yes – very much so	☐ 0 Extremely so – to the point where I could not work or take care of things
Have you been in firm control of your behavior, thoughts, emotions, and feelings?	☐ 5 Yes, definitely so	☐ 4 Yes, for the most part	☐ 3 Generally so	☐ 2 Not too well	☐ 1 No, and I am somewhat troubled by that	☐ 0 No, and I am very troubled by that
Have you been feeling so sad, discouraged, or hopeless, or had so many problems that you wondered if anything was worthwhile?	☐ 5 Not at all	☐ 4 A little	☐ 3 Some – enough to bother me	☐ 2 Yes – quite a bit	☐ 1 Yes – very much so	☐ 0 Extremely so – to the point that I have just about given up
Have you been feeling that you were under any strain, stress, or pressure?	☐ 5 Not at all	☐ 4 A little	☐ 3 About the same amount as usual	☐ 2 Yes – more than usual	☐ 1 Yes – quite a bit of pressure	☐ 0 Yes – almost more than I could bear
How happy or satisfied have you been with your personal life?	☐ 5 Extremely happy	☐ 4 Very happy	☐ 3 Fairly happy	☐ 2 Somewhat satisfied	☐ 1 Somewhat dissatisfied	☐ 0 Very dissatisfied
Have you had any reason to wonder if you were losing your mind or memory, or losing control over the way you act, talk, think, or feel?	☐ 5 Not at all	☐ 4 Only a little	☐ 3 Some – but not enough to be concerned	☐ 2 Some, and I have been a little concerned	☐ 1 Some, and I am quite concerned	☐ 0 Yes, a lot, and I am very concerned
Have you been anxious, worried, or upset?	☐ 5 Not at all	☐ 4 A little	☐ 3 Some – enough to bother me	☐ 2 Yes – quite a bit	☐ 1 Yes – very much so	☐ 0 Yes – extremely so, to the point of being sick or almost sick
How often have you awakened refreshed and rested?	☐ 5 Every day	☐ 4 Almost every day	☐ 3 Fairly often	☐ 2 Less than half the time	☐ 1 Rarely	☐ 0 None of the time
Have you been bothered by an illness, bodily disorder, pain, or fear about your health?	☐ 5 Not at all	☐ 4 A little	☐ 3 Some of the time	☐ 2 Yes – a good bit of the time	☐ 1 Yes – most of the time	☐ 0 Yes – all of the time
Has your daily life been full of things that were interesting to you?	☐ 5 Yes – all of the time	☐ 4 Yes – most of the time	☐ 3 Yes – a good bit of the time	☐ 2 Some of the time	☐ 1 A little	☐ 0 Not at all
Have you been feeling down-hearted and blue?	☐ 5 Not at all	☐ 4 A little	☐ 3 Some of the time	☐ 2 Yes – a good bit of the time	☐ 1 Yes – most of the time	☐ 0 Yes – all of the time
Have you been feeling emotionally stable and sure of yourself?	☐ 5 Yes – all of the time	☐ 4 Yes – most of the time	☐ 3 Yes – a good bit of the time	☐ 2 Some of the time	☐ 1 A little	☐ 0 Not at all
Have you been feeling tired, worn out, used-up, or exhausted?	☐ 5 Not at all	☐ 4 A little	☐ 3 Some of the time	☐ 2 Yes – a good bit of the time	☐ 1 Yes – most of the time	☐ 0 Yes – all of the time

ADD UP THE NUMBERS NEXT TO EACH CHECKED BOX. ☐

QUESTION	Check the number on the scale (from 0-10) that seems closest to how you have generally been feeling during the past month
How concerned or worried have you been about your health?	☐ 10 ☐ 9 ☐ 8 ☐ 7 ☐ 6 ☐ 5 ☐ 4 ☐ 3 ☐ 2 ☐ 1 ☐ 0 Not concerned at all — Very concerned
How relaxed or tense have you been?	☐ 10 ☐ 9 ☐ 8 ☐ 7 ☐ 6 ☐ 5 ☐ 4 ☐ 3 ☐ 2 ☐ 1 ☐ 0 Very relaxed — Very tense
How much energy, pep, or vitality have you had?	☐ 10 ☐ 9 ☐ 8 ☐ 7 ☐ 6 ☐ 5 ☐ 4 ☐ 3 ☐ 2 ☐ 1 ☐ 0 Very energetic, dynamic — No energy at all, listless
How depressed or cheerful have you been?	☐ 10 ☐ 9 ☐ 8 ☐ 7 ☐ 6 ☐ 5 ☐ 4 ☐ 3 ☐ 2 ☐ 1 ☐ 0 Very cheerful — Very depressed

Scoring

Your score for each question is the number beside each check box. Add the scores for all questions to get a total score (use summary grid below). Your total score should be between 0 and 110.

What Your Score Means

Coping Score	Stress/Coping Description	Percent of Population
76-110	**Coping well.** You are in the "Positive Well Being" zone.	65.0%
71-75	Marginal	9.1%
56-70	**Not coping very well.** You are in the "Stress" zone.	16.3%
0-55	**Not coping well at all.** You are in the "Distress" zone.	9.6%

ADD UP THE NUMBERS NEXT TO EACH CHECKED BOX. ☐

WRITE IN YOUR TOTAL FROM PAGE 1. ☐

ADD THESE TOGETHER FOR YOUR TOTAL SCORE (Your total score should be between 0 and 110.) ☐

The higher your score the better you are coping with stress in your life. Scores of 76 or above indicate that you are coping well. A score of 71-75 is "marginal" and scores of 70 or less indicate you are having trouble coping and need to improve your coping skills. Read *Improving Coping Skills* below. Get additional help if needed from your health coach, a mental health counselor, or your doctor.

Source: National Center for Health Statistics. NHANES Study.