Name	Section	Date



Lab AI-I The General Well-Being Scale

For each question, choose the answer that best describes how you have felt and how things have been going for you *during the past month*.

1.	How have you been feeling in general?
	5 In excellent spirits
	4 In very good spirits
	3 In good spirits mostly
	2 I've been up and down in spirits a lot
	1 In low spirits mostly
	0 In very low spirits
2.	Have you been bothered by nervousness or your "nerves"?
	0 Extremely so—to the point where I could not work or take care of things
	1 Very much so
	2 Quite a bit
	3 Some—enough to bother me
	4 A little
	5 Not at all
3.	Have you been in firm control of your behavior, thoughts, emotions, or feelings?
	5 Yes, definitely so
	4 Yes, for the most part
	3 Generally so
	2 Not too well
	1 No, and I am somewhat disturbed
	0 No, and I am very disturbed
4.	Have you felt so sad, discouraged, hopeless, or had so many problems that you wondered if anything was worthwhile?
	0 Extremely so—to the point I have just about given up
	1 Very much so
	2 Quite a bit
	3 Some—enough to bother me
	4 A little bit
	5 Not at all

LABAI-I (continued)

5.	Have yo	ou been under or felt you were under any strain, stress, or pressure?	
	0	Yes—almost more than I could bear	
	1	Yes—quite a bit of pressure	
	2	Yes—some, more than usual	
	3	Yes—some, but about usual	
	4	_Yes—a little	
	5	Not at all	
6.	How ha	ppy, satisfied, or pleased have you been with your personal life?	
	5	Extremely happy—couldn't have been more satisfied or pleased	
	4	_Very happy	
	3	_ Fairly happy	
	2	_ Satisfied—pleased	
	1	Somewhat dissatisfied	
	0	_ Very dissatisfied	
7.	ou had reason to wonder if you were losing your mind, or losing control over the way you ac nk, feel, or of your memory?	t,	
	5	_ Not at all	
	4	Only a little	
	3	Some, but not enough to be concerned	
	2	Some, and I've been a little concerned	
	1	_ Some, and I am quite concerned	
	0	Much, and I'm very concerned	
8.	Have yo	ou been anxious, worried, or upset?	
	0	Extremely so—to the point of being sick, or almost sick	
		Very much so	
	2	Quite a bit	
		Some—enough to bother me	
	4	_ A little bit	
	5	Not at all	
9.	Have vo	ou been waking up fresh and rested?	
	•	_ Every day	
		_ Most every day	
		Fairly often	
		Less than half the time	
	1		
		None of the time	(over)
			(UYUI)

LABAI-I (continued)

10.	Have you been bothered by any illness, bodily disorder, pain, or fears about your health?
	0 All the time
	1 Most of the time
	2 A good bit of the time
	3 Some of the time
	4 A little of the time
	5 None of the time
11.	Has your daily life been full of things that are interesting to you?
	5 All the time
	4 Most of the time
	3 A good bit of the time
	2 Some of the time
	1 A little of the time
	0 None of the time
12.	Have you felt downhearted and blue?
	0 All of the time
	1 Most of the time
	2 A good bit of the time
	3 Some of the time
	4 A little of the time
	5 None of the time
13.	Have you been feeling emotionally stable and sure of yourself?
	5 All of the time
	4 Most of the time
	3 A good bit of the time
	2 Some of the time
	1 A little of the time
	0 None of the time
14.	Have you felt tired, worn out, used up, or exhausted?
	0 All of the time
	1 Most of the time
	2 A good bit of the time
	3 Some of the time
	4 A little of the time
	5 None of the time

LABAI-I (continued)

Circle the number that seems closest to how you have felt generally *during the past month*.

15. How concerned or worried about your health have you been?

Not concern at all		8	6	4	2	0	Very concerned
16. How rela	ked or tense ha	ıve you been	.?				
Very relaxe		8	6	4	2	0	Very tense
17. How much energy, pep, and vitality have you felt?							
No ener at all listles		2	4	6	8	10	Very energetic, dynamic
18. How depressed or cheerful have you been?							
Very depress		2	4	6	8	10	Very cheerful

Scoring

Add up all the points for the answers you have chosen, and find your score in the table below.

81-110	Positive well-being
76–80	Low positive
71–75	Marginal
56-70	Stress problem
41-55	Distress
26-40	Serious
0–25	Severe