

RECOGNIZING SIGNS OF STRESS

Read each of the statements below and decide, question by question, which score best describes your present physical and emotional state.

SCORING

Constantly 4 • Frequently 3 • Sometimes 2 • Rarely 1 • Never 0

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|---|--------------------------|---|--------------------------|
| 1 I get sudden feelings of fear and panic. | <input type="checkbox"/> | 16 I cannot "turn off" certain worrying thoughts. | <input type="checkbox"/> |
| 2 I feel tense, nervous, or wound up. | <input type="checkbox"/> | 17 I have lost interest in group activity. | <input type="checkbox"/> |
| 3 I am troubled by difficulty in going to sleep, staying asleep, or early wakening. | <input type="checkbox"/> | 18 I get palpitations or a sensation of butterflies in my stomach or chest. | <input type="checkbox"/> |
| 4 I worry something awful might happen. | <input type="checkbox"/> | 19 I lack confidence in myself. | <input type="checkbox"/> |
| 5 I feel irritable, edgy, and bad-tempered. | <input type="checkbox"/> | 20 I worry that I will not be able to cope. | <input type="checkbox"/> |
| 6 I have irregular eating patterns and either eat too much or too little. | <input type="checkbox"/> | 21 I get headaches or migraines. | <input type="checkbox"/> |
| 7 I smoke or drink too much, or take tranquilizers or other drugs. | <input type="checkbox"/> | 22 I feel life is not worth living. | <input type="checkbox"/> |
| 8 I suffer from an upset stomach, diarrhoea, or constipation. | <input type="checkbox"/> | 23 I feel pessimistic about the future. | <input type="checkbox"/> |
| 9 I have difficulty with concentration, memory, or making decisions. | <input type="checkbox"/> | 24 I feel under the strain. | <input type="checkbox"/> |
| 10 I feel exhausted and tired. | <input type="checkbox"/> | 25 I am obsessive about certain issues such as illness, cleanliness, or food. | <input type="checkbox"/> |
| 11 I worry that I will lose control, "crack up", or become ill. | <input type="checkbox"/> | 26 I get aches and pains that worry me. | <input type="checkbox"/> |
| 12 I feel apathetic – nothing matters. | <input type="checkbox"/> | 27 I feel very emotional and cry easily. | <input type="checkbox"/> |
| 13 I feel short of breath even when resting. | <input type="checkbox"/> | 28 I feel physically run down. | <input type="checkbox"/> |
| 14 I get tightness in my chest, neck, or head. | <input type="checkbox"/> | 29 I feel dizzy, remote, unreal, or faint. | <input type="checkbox"/> |
| 15 I avoid worrying situations. | <input type="checkbox"/> | 30 I put off seeing friends and have no interest in hobbies. | <input type="checkbox"/> |
| | | TOTAL SCORE | <input type="checkbox"/> |

INTERPRETING YOUR SCORE

Add up all your scores to find your total. This will give you an idea of whether you are being affected by harmful stress.

Over 40 High Stress

You seem to be suffering from many symptoms of stress. Look at the short-term solutions and then tackle the sources.

20 – 40 Moderate Stress

You appear to be fairly stressed. Look at the possible sources of your stress and aim to improve your coping skills.

Below 20 Low Stress

You do not show signs of suffering from significant symptoms of stress. Beware of The problems of too little stress.

Everyone responds differently to stress : you may experience anxiety symptoms such as panic attacks or headaches, or you may find it is your stomach and bowels that are affected. Research has suggested that there is a gender difference: men have a tendency to feel irritable and aggressive and are more likely to resort to addictive behaviours, while women are more prone to becoming withdrawn and feeling depressed. When stress hormones such as adrenaline are racing around

your body, you may lose sleep – although some people insist that no matter how stressed they feel, they always manage to sleep well. These signs of stress interact with one another, often having a knock-on effect, where one symptom triggers another. For example, stress may lead to panic, which may cause avoidance behaviour, the development of fears and phobias, or intrusive worrying thoughts, which may eventually result in feelings of low confidence and depression.

HOW YOU ANSWERED THE QUESTIONS

Now look at how you answered each question. Circle the individual questions where you have scored 3 or 4, as these are likely to indicate where stress is affecting you most.

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|----|--------------------------|----|-------------------------|----|-------------------------|
| 1 | Panic Attacks | 11 | General Stress | 21 | Headaches and Migraines |
| | Hyperventilation | 12 | Depression | 22 | Depression |
| 2 | General Stress | 13 | Hyperventilation | 23 | Depression |
| 3 | Sleep Problems | 14 | Headaches and Migraines | 24 | General Stress |
| 4 | Panic Attacks | 15 | Fears and Phobias | 25 | Obsessive Behaviour |
| | Depression | 16 | Obsessive Behaviour | 26 | Obsessive Behaviour |
| 5 | Irritability and Anger | 17 | Depression | | Panic Attacks |
| 6 | Eating Disorders | 18 | Panic Attacks | 27 | Depression |
| 7 | Excessive Drinking | 19 | Low Self-Esteem | 28 | General Stress |
| 8 | Irritable Bowel Syndrome | 20 | Depression | 29 | Hyperventilation |
| 9 | Depression | | | | Panic Attacks |
| 10 | Chronic Fatigue | | | 30 | Depression |
| | | | | | Fears and Phobias |