

# 10 Step Check-Up for Mental Health

|   |  |                                    |
|---|--|------------------------------------|
| <b>1</b> How would you rank your energy levels?                               | <ul style="list-style-type: none"> <li>Rank 1-10 with 1 being "I barely have enough energy to get out of bed in the morning" and 10 being "I am full to the top from when I get up to when I go to bed."</li> </ul>  | 0 - 4 = +2<br>5 = +1<br>6 - 10 = 0 |
| <b>2</b> How would you best describe your workload?                           | <ul style="list-style-type: none"> <li>Sometimes I don't have enough to do so I can spread some projects out</li> <li>What they give me to do, and the time to do it works out just right</li> <li>I really have to push myself, but I always get things done</li> <li>I feel like the harder I work the farther I fall behind</li> </ul>  | -1<br>0<br>+1<br>+2                |
| <b>3</b> Do you experience any of the following on a regular basis?           | <ul style="list-style-type: none"> <li>Headache</li> <li>Chest pain</li> <li>Tight, dry throat</li> <li>Digestive problems</li> <li>Increased perspiration</li> <li>Skin irritation</li> <li>Clenched jaw, grinding teeth, muscle aches in the back and neck</li> </ul>  | +1 each                            |
| <b>4</b> How would you describe your body weight?                             | <ul style="list-style-type: none"> <li>It has been consistently where it is for a long time</li> <li>I have recently been gaining weight (Why?)</li> <li>I have recently been losing weight (Why?)</li> </ul>  | 0<br>+1<br>+1                      |
| <b>5</b> Which of these statements fits you best?                             | <ul style="list-style-type: none"> <li>I enjoy life and what I do, I have no problem getting things done</li> <li>I try to get everything done, but others make it difficult</li> <li>It seems the more I do the farther I fall behind</li> <li>I try hard, but things have become more confusing, I forget more</li> <li>It is tough to get things done, I am always restless and worrying</li> </ul> | 0<br>+1<br>+2<br>+2<br>+3          |
| <b>6</b> To wind down at the end of a difficult day you:                      | <ul style="list-style-type: none"> <li>Smoke or chew tobacco (+2)</li> <li>Drink 2+ alcoholic drinks (+2)</li> <li>Exercise (-2)</li> <li>Recreational Activities (-2)</li> <li>Watch 2+ hours of television (+1)</li> <li>Eat comfort food outside of meal times (+1)</li> <li>Spend time with family or friends (0)</li> <li>Spend time alone (0)</li> </ul>   |                                    |
| <b>7</b> Do you think any of these apply to you?                              | <ul style="list-style-type: none"> <li>I tend to lose my temper easily without reason</li> <li>I feel burnt out</li> <li>I sometimes feel down, blue, or sad for up to 2-3 weeks at a time</li> <li>I feel guilty about work or my personal life</li> <li>I occasionally have crying spells, sometimes for no reason</li> </ul>  | +1 each                            |
| <b>8</b> Which of the following best describes your sleeping habits?          | <ul style="list-style-type: none"> <li>I feel well rested each morning</li> <li>I have trouble getting to sleep, and when I do I wake up easily and often</li> <li>I don't get much sleep during the week, I try to make up for it on the weekends</li> </ul>  | -1<br>+1<br>+2                     |
| <b>9</b> Which statement best describes your recent interactions with others? | <ul style="list-style-type: none"> <li>I get along well and communicate effectively with others</li> <li>I feel easily frustrated and communication with others is difficult</li> <li>I avoid contact with others so I do not have a conflict</li> </ul>   | 0<br>+2<br>+2                      |
| <b>10</b> Do you have a chronic illness?                                      | <ul style="list-style-type: none"> <li>If yes: Why? Is there an understood link to stress? (e.g., "When I am stressed I have more asthma attacks")</li> </ul>  | +1<br>+2                           |

## Scoring Your Results:

0-6 = Mild Stress Effects  
 7-12 = Moderate Stress Effects  
 13+ = High Stress Effects

My Score: