

Questionnaire 5

RESEARCHER – Please turn the response pack to the Questionnaire 5 set of responses, and then read the following statement out loud to the respondent:

OVER THE LAST 2 WEEKS have you been bothered by any of the following problems? – Please select the most appropriate response:

1. Little interest or pleasure in doing things

| Not at all | Several days | More than half the days | Nearly every day |
|-----------------------|-----------------------|-------------------------|-----------------------|
| 0 | 1 | 2 | 3 |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

2. Feeling down, depressed or hopeless

| Not at all | Several days | More than half the days | Nearly every day |
|-----------------------|-----------------------|-------------------------|-----------------------|
| 0 | 1 | 2 | 3 |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

3. Trouble falling or staying asleep, or sleeping too much

| Not at all | Several days | More than half the days | Nearly every day |
|-----------------------|-----------------------|-------------------------|-----------------------|
| 0 | 1 | 2 | 3 |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

4. Feeling tired or having little energy

| Not at all | Several days | More than half the days | Nearly every day |
|-----------------------|-----------------------|-------------------------|-----------------------|
| 0 | 1 | 2 | 3 |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

5. Poor appetite or overeating

| Not at all | Several days | More than half the days | Nearly every day |
|-----------------------|-----------------------|-------------------------|-----------------------|
| 0 | 1 | 2 | 3 |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

6. Feeling bad about yourself - or that you are a failure or have let yourself or your family down

| Not at all | Several days | More than half the days | Nearly every day |
|----------------------------|----------------------------|----------------------------|----------------------------|
| 0 <input type="radio"/> | 1 <input type="radio"/> | 2 <input type="radio"/> | 3 <input type="radio"/> |

7. Trouble concentrating on things, such as reading the newspaper or watching television

| Not at all | Several days | More than half the days | Nearly every day |
|----------------------------|----------------------------|----------------------------|----------------------------|
| 0 <input type="radio"/> | 1 <input type="radio"/> | 2 <input type="radio"/> | 3 <input type="radio"/> |

8. Moving or speaking so slowly that other people could have noticed? Or the opposite - being so fidgety or restless that you have been moving around a lot more than usual

| Not at all | Several days | More than half the days | Nearly every day |
|----------------------------|----------------------------|----------------------------|----------------------------|
| 0 <input type="radio"/> | 1 <input type="radio"/> | 2 <input type="radio"/> | 3 <input type="radio"/> |

9. Thoughts that you would be better off dead, or of hurting yourself in some way

| Not at all | Several days | More than half the days | Nearly every day |
|----------------------------|----------------------------|----------------------------|----------------------------|
| 0 <input type="radio"/> | 1 <input type="radio"/> | 2 <input type="radio"/> | 3 <input type="radio"/> |