

CES-D Figure 6

For the following statements, circle the number for each statement which best describes how often you felt this way DURING THE PAST WEEK.

<i>DURING THE PAST WEEK:</i>	Rarely or none of the time (less than 1 day)	Some or a little of the time (1-2 days)	Occasionally or a moderate amount of time (2-4 days)	Most or all of the time (5-7 days)
1. I was bothered by things that usually do not bother me.	0	1	2	3
2. I did not feel like eating; my appetite was poor.	0	1	2	3
3. I felt that I could not shake off the blues even with help from my family or friends.	0	1	2	3
4. I felt that I was just as good as other people.	3	2	1	0
5. I had trouble keeping my mind on what I was doing.	0	1	2	3
6. I felt depressed.	0	1	2	3
7. I felt that everything was an effort	0	1	2	3
8. I felt hopeful about the future.	3	2	1	0
9. I thought life had been a failure	0	1	2	3
10. I felt fearful.	0	1	2	3
11. My sleep was restless.	0	1	2	3
12. I was happy.	3	2	1	0
13. I talked less than usual.	0	1	2	3
14. I felt lonely.	0	1	2	3
15. People were unfriendly.	0	1	2	3
16. I enjoyed life.	3	2	1	0
17. I had crying spells.	0	1	2	3
18. I felt sad.	0	1	2	3
19. I felt that people disliked me.	0	1	2	3
20. I could not get "going".	0	1	2	3

To score this questionnaire, add up the numbers you've circled. The total is your score. Notice that some of the questions (numbers 4, 8, 12 and 16) are scored in reverse. You should add the number as they are printed on the questionnaire.

Your TOTAL is _____