

Handout 2.2 Perceived Stress Scale (PSS)

For each question choose from the following alternatives:

- 0 = Never
- 1 = Almost never
- 2 = Sometimes
- 3 = Fairly often
- 4 = Very often

- _____ 1. In the last month, how often have you been upset because of something that happened unexpectedly?
- _____ 2. In the last month, how often have you felt that you were unable to control the important things in your life?
- _____ 3. In the last month, how often have you felt nervous and “stressed”?
- _____ 4. In the last month, how often have you felt confident about your ability to handle your personal problems?
- _____ 5. In the last month, how often have you felt that things were going your way?
- _____ 6. In the last month, how often have you found that you could not cope with all the things that you had to do?
- _____ 7. In the last month, how often have you been able to control irritations in your life?
- _____ 8. In the last month, how often have you felt that you were on top of things?
- _____ 9. In the last month, how often have you been angered because of things that happened that were outside of your control?
- _____ 10. In the last month, how often have you felt difficulties were piling up so high that you could not overcome them?

Figuring your PSS score:

You can determine your PSS score by following these directions: *First, reverse your scores for questions 4, 5, 7, and 8.* On these four questions, change the scores like this: 0 = 4, 1 = 3, 2 = 2, 3 = 1, and 4 = 0. For all other questions, use the number you wrote down as the score.

Now add up your scores for each item to get a total. **My total score is _____.**

Individual scores on the PSS can range from 0 to 40, with higher scores indicating higher perceived stress.

Scores ranging from 0-13 would be considered low perceived stress.

Scores ranging from 14-26 would be considered moderate perceived stress.

Scores ranging from 27-40 would be considered high perceived stress.

Handout 2.3 Inventory of College Students' Recent Life Experiences (ICSRLE)

The following is a list of experiences that many students have at some time or other. Indicate for each experience how much it has been a part of your life over the past month. Mark your answers according to the following guide:

Intensity of Experience over the Past Month

0 = Not at all part of my life

1 = Only slightly part of my life

2 = Distinctly part of my life

3 = Very much part of my life

- _____ 1. Conflicts with boyfriend's/girlfriend's/spouse's family
- _____ 2. Being let down or disappointed by friends
- _____ 3. Conflict with professor(s)
- _____ 4. Social rejection
- _____ 5. Too many things to do at once
- _____ 6. Being taken for granted
- _____ 7. Financial conflicts with family members
- _____ 8. Having your trust betrayed by a friend
- _____ 9. Separation from people you care about
- _____ 10. Having your contributions overlooked
- _____ 11. Struggling to meet your own academic standards
- _____ 12. Being taken advantage of
- _____ 13. Not enough leisure time
- _____ 14. Struggling to meet the academic standards of others
- _____ 15. A lot of responsibilities
- _____ 16. Dissatisfaction with school
- _____ 17. Decisions about intimate relationship(s)
- _____ 18. Not enough time to meet your obligations
- _____ 19. Dissatisfaction with your mathematical ability
- _____ 20. Important decisions about your future career
- _____ 21. Financial burdens
- _____ 22. Dissatisfaction with your reading ability
- _____ 23. Important decisions about your education

- _____ 24. Loneliness
- _____ 25. Lower grades than you hoped for
- _____ 26. Conflict with teaching assistant(s)
- _____ 27. Not enough time for sleep
- _____ 28. Conflicts with your family
- _____ 29. Heavy demands from extracurricular activities
- _____ 30. Finding courses too demanding
- _____ 31. Conflicts with friends
- _____ 32. Hard effort to get ahead
- _____ 33. Poor health of a friend
- _____ 34. Disliking your studies
- _____ 35. Getting “ripped off” or cheated in the purchase of services
- _____ 36. Social conflicts over smoking
- _____ 37. Difficulties with transportation
- _____ 38. Disliking fellow student(s)
- _____ 39. Conflicts with boyfriend/girlfriend/spouse
- _____ 40. Dissatisfaction with your ability at written expression
- _____ 41. Interruptions of your school work
- _____ 42. Social isolation
- _____ 43. Long waits to get service (at banks, stores, etc.)
- _____ 44. Being ignored
- _____ 45. Dissatisfaction with your physical appearance
- _____ 46. Finding course(s) uninteresting
- _____ 47. Gossip concerning someone you care about
- _____ 48. Failing to get expected job
- _____ 49. Dissatisfaction with your athletic skills

Scoring the ICSRLE

Add your total points: _____

Your score on the ICSRLE can range from 0 to 147. Higher scores indicate higher levels of exposure to hassles. From your results, focus on two key outcomes:

1. Determine your current level of stress by adding your score for each hassle and getting a total.
2. Discover which hassles play a greater part in your life. Items that you rated “3” indicate that those stressors are more of an issue for you.

Handout 2.5 Student Stress Scale

For each event that occurred in your life within the past year, record the corresponding score. If an event occurred more than once, multiply the score for that event by the number of times the event occurred, and record that score. Total all the scores.

Life Event	Value	Your Score
1. Death of a close family member	100	
2. Death of a close friend	73	
3. Divorce of parents	65	
4. Jail term	63	
5. Major personal injury or illness	63	
6. Marriage	58	
7. Getting fired from a job	50	
8. Failing an important course	47	
9. Change in the health of a family member	45	
10. Pregnancy	45	
11. Sex problems	44	
12. Serious argument with a close friend	40	
13. Change in financial status	39	
14. Change of academic major	39	
15. Trouble with parents	39	
16. New girlfriend or boyfriend	37	
17. Increase in workload at school	37	
18. Outstanding personal achievement	36	
19. First semester/quarter in college	36	
20. Change in living conditions	31	
21. Serious argument with an instructor	30	
22. Getting lower grades than expected	29	
23. Change in sleeping habits	29	
24. Change in social activities	29	
25. Change in eating habits	28	
26. Chronic car trouble	26	
27. Change in number of family get-togethers	26	
28. Too many missed classes	25	

Life Event	Value	Your Score
29. Changing colleges	24	
30. Dropping more than one class	23	
31. Minor traffic violations	20	
	Your Total Score	

Score Interpretation: Researchers determined that if your total score is:

300 or more—Statistically you stand an almost 80 percent chance of getting sick in the near future.

150 to 299—You have a 50-50 chance of experiencing a serious health change within two years.

149 or less—You have about a 30 percent chance of a serious health change.

Handout 2.6 Stress Vulnerability Questionnaire

The stress vulnerability questionnaire helps you determine your current vulnerability to stress and helps you identify areas where you can reduce your vulnerability to stress.

Item		Strongly Agree	Mildly Agree	Mildly Disagree	Strongly Disagree
1.	I try to incorporate as much physical activity as possible into my daily schedule.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
2.	I exercise aerobically 20 minutes or more at least three times per week.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
3.	I regularly sleep 7 to 8 hours per night.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
4.	I take my time eating at least one hot, balanced meal a day.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
5.	I drink fewer than two cups of coffee (or equivalent) per day.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
6.	I am at recommended body weight.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
7.	I enjoy good health.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
8.	I do not use tobacco in any form.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
9.	I limit my alcohol intake to no more than one drink for women or two drinks for men per day.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
10.	I do not use hard drugs.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
11.	I have someone I love, trust, and can rely on for help if I have a problem or need to make an essential decision.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
12.	There is love in my family.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
13.	I routinely give and receive affection.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
14.	I have close personal relationships with other people who provide me with a sense of emotional security.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
15.	There are people close by whom I can turn to for guidance in times of stress.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
16.	I can speak openly about feelings, emotions, and problems with people I trust.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
17.	Other people rely on me for help.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
18.	I am able to keep my feelings of anger and hostility under control	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
19.	I have a network of friends who enjoy the same social activities I do.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>

Item		Strongly Agree	Mildly Agree	Mildly Disagree	Strongly Disagree
20.	I take time to do something fun at least once a week.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
21.	My religious beliefs provide guidance and strength to my life.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
22.	I often provide service to others.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
23.	I enjoy my job (major or school).	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
24.	I am a competent worker.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
25.	I get along well with co-workers (or students).	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
26.	My income is sufficient for my needs.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
27.	I manage my time adequately.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
28.	I have learned to say "no" to additional commitments when I am already pressed for time.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
29.	I take daily quiet time for myself.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
30.	I practice stress management as needed.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
Total Points					
Rating: 0-30 points.....Excellent (great resistance to stress) 31-40 points.....Good (little vulnerability to stress) 41-50 points.....Average (somewhat vulnerable to stress) 51-60 points.....Fair (vulnerable to stress) ≥61 points.....Poor (highly vulnerable to stress)					