Appendix - A

ADULT FORM

Coopersmith Inventory

Name ____________________________ Age __________
Institution ___________________________ Sex: M F __________
Occupation ____________________________ Date __________

Directions
On the other side of this form, you will find a list of statements about feelings. If a statement describes how you usually feel, put an X in the column “Like Me.” If a statement does not describe how you usually feel, put an X in the column “Unlike Me.” There are no right or wrong answers. Begin at the top of the page and mark all 25 statements.

<table>
<thead>
<tr>
<th>Like Me</th>
<th>Unlike Me</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Things usually don’t bother me.</td>
<td></td>
</tr>
<tr>
<td>2. I find it very hard to talk in front of a group.</td>
<td></td>
</tr>
<tr>
<td>3. There are lots of things about myself I’d change if I could.</td>
<td></td>
</tr>
<tr>
<td>4. I can make up my mind without too much trouble.</td>
<td></td>
</tr>
<tr>
<td>5. I’m a lot of fun to be with.</td>
<td></td>
</tr>
<tr>
<td>6. I get upset easily at home.</td>
<td></td>
</tr>
<tr>
<td>7. It takes me a long time to get used to anything new.</td>
<td></td>
</tr>
</tbody>
</table>
8. I'm popular with persons my own age.
9. My family usually considers my own age.
10. I give in very easily.
11. My family expects too much of me.
12. It's pretty tough to be me.
13. Things are all mixed up in my life.
14. People usually follow my ideas.
15. I have a low opinion of myself.
16. There are many times when I would like to leave home.
17. I often feel upset with my work.
18. I'm not as nice looking as most people.
19. If I have something to say, I usually say it.
20. My family understands me.
21. Most people are better liked than I am.
22. I usually feel as if my family is pushing me.
23. I often get discouraged with what I am doing.
24. I often wish I were someone else.
25. I can't be depended on.
Appendix - B

The Oxford Happiness Questionnaire

Below are a number of statements about happiness. Would you please indicate how much you agree or disagree with each by entering a number alongside it according to the following code:

1 = strongly disagree;  2 = moderately disagree;  3 = slightly disagree;
4 = slightly agree;      5 = moderately agree;     6 = strongly agree.

You will need to read the statements carefully because some are phrased positively and others negatively. Don’t take too long over individual questions; there are no ‘right’ or ‘wrong’ answers and no trick questions. The first answer that comes into your head is probably the right one for you. If you find some of the questions difficult, please give the answer that is true for you in general or for most of the time.

1. I don’t feel particularly pleased with the way I am
2. I am intensely interested in other people
3. I feel that life is very rewarding
4. I have very warm feelings towards almost everyone
5. I rarely wake up feeling rested
6. I am not particularly optimistic about the future
7. I find most things amusing
8. I am always committed and involved
9. Life is good
10. I do not think that the world is a good place
11. I laugh a lot
12. I am well satisfied about everything in my life
13. I don’t think I look attractive
14. There is a gap between what I would like to do and what I have done
15. I am very happy
16. I find beauty in some things
17. I always have a cheerful effect on others
18. I can fit in everything I want to
19. I feel that I am not especially in control of my life
20. I feel able to take anything on
21. I feel fully mentally alert
22. I often experience joy and elation
23. I do not find it easy to make decisions
24. I do not have a particular sense of meaning and purpose in my life
25. I feel I have a great deal of energy
26. I usually have a good influence on events
27. I do not have fun with other people
28. I don’t feel particularly healthy
29. I do not have particularly happy memories of the past
Appendix - C
Spirituality Index of Well Being

Below are a number of statements about happiness. Would you please indicate how much you agree or disagree with each by entering a number alongside it according to the following code:

1 = strongly disagree; 2 = disagree; 3 = neither agree nor disagree; 4 = agree; 5 = strongly agree.

1. There is not much I can do to help myself.
2. Often, there is no way I can complete what I have started.
3. I can't begin to understand my problems.
4. I am overwhelmed when I have personal difficulties and problems.
5. I don’t know how to begin to solve my problems.
6. There is not much I can do to make a difference in my life.
7. I haven't yet found my life's purpose.
8. I don’t know who I am, where I came from or where I am going.
9. I have a lack of purpose in my life.
10. In this world, I don’t know where I fit in.
11. I am far from understanding the meaning of life.
12. There is a great void in my life at this time.
Appendix - D
Beck Depression Inventory - II

Instructions: This questionnaire consists of 21 groups of statements. Please read each group of statements carefully, and then pick out the one statement in each group that best describes the way you have been feeling during the past two weeks, including today. Circle the number beside the statement you have picked. If several statements in the group seem to apply equally well, circle the highest number for that group. Be sure that you do not choose more than one statement for any group, including Item 16 (Changes in Sleeping Pattern) or Item IX (Changes in Appetite).

1. Sadness
   0 I do not feel sad.
   1 I feel sad much of the time.
   2 I am sad all the time.
   3 I am so sad or unhappy that I can’t stand it.

2. Pessimism
   0 I am not discouraged about my future.
   1 I feel more discouraged about my future than I used to be.
   2 I do not expect things to work out for me.
   3 I feel my future is hopeless and will only get worse.

3. Past Failure
   0 I do not feel like a failure
   1 I have failed more than I should have
   2 As I look back, I see a lot of failure
   3 I feel I am a total failure as a person

4. Loss of Pleasure
   0 I get as much pleasure as I ever did from the things I enjoy
   1 I don’t enjoy things s much as I used to
   2 I get very little pleasure from the things I used to enjoy
   3 I can’t get any pleasure from the things I used to enjoy
5. Guilty feelings
   0  I don't feel particularly guilty
   1  I feel guilty over many things I have done or should have done
   2  I feel quite guilty most of the time
   3  I feel guilty all of the time

6. Punishment Feelings
   0  I don't feel I am being punished
   1  I feel I may be punished
   2  I expect to be punished
   3  I feel I am being punished

7. Self-Dislike
   0  I feel the same amount myself as ever
   1  I have lost confidence in myself
   2  I am disappointment in myself
   3  I dislike myself

8. Self-Criticalness
   0  I don't criticize or blame myself more than usual
   1  I am more critical of myself than I used to be
   2  I criticize myself for all of my faults
   3  I blame myself for everything bad that happens

9. Suicidal Thoughts or Wishes
   0  I don't have any thoughts of killing myself
   1  I have thoughts of killing myself, but I would not carry them own
   2  I would like to kill myself
   3  I would kill myself if I have the chance

10. Crying
    0  I don't cry anymore than I used to
    1  I cry more than I used to
    2  I cry over every little thing
    3  I feel like crying but I can't
11. **Agitation**
   0  I am no more restless or wound up than usual
   1  I feel more restless or wound up than usual
   2  I am so restless or agitated that it's hard to stay still
   3  I am so restless or agitated that I have to keep moving or doing something

12. **Loss of Interest**
   0  I have not lost interest in other people or activities
   1  I am less interested in other people or things than before
   2  I have lost most of my interest in other people or things
   3  It's hard to get interested in anything

13. **Indecisiveness**
   0  I make decisions about as well as ever
   1  I find it more difficult to make decisions than usual
   2  I have much greater difficulty in making decisions than I used to
   3  I have trouble making any decisions

14. **Worthlessness**
   0  I do not feel I am worthless
   1  I don't consider myself as worthwhile and useful as I used to
   2  I feel more worthless as compared to other
   3  I feel utterly worthless

15. **Loss of Energy**
   0  I have as much energy as ever
   1  I have less energy than I used to have
   2  I don't have enough energy to do very much
   3  I don't have enough energy to do anything

16. **Changes in Sleeping Pattern**
   0  I have not experienced any change in my sleeping pattern
   1a I sleep somewhat more than usual
   1b I sleep somewhat less than usual
   2a I sleep a lot more than usual
   2b I sleep a lot less than usual
3a I sleep most of the day
3b I wake up 1-2 hours early and can’t get back to sleep

17. Irritability
0 I am no more irritable than usual
1 I am more irritable than usual
2 I am much more irritable than usual
3 I am irritable all the time

18. Changes in Appetite
0 I have not experienced any change in my appetite
1a My appetite is somewhat less than usual
1b My appetite is somewhat greater than usual
2a My appetite is much less than before
2b My appetite is much greater than usual
3a I have no appetite at all
3b I crave food all the time

19. Concentration Difficulty
0 I can concentrate as well as ever
1 I can’t concentrate as well as usual
2 It’s hard to keep my mind on anything for very long
3 I find I can’t concentrate on anything

20. Tiredness or Fatigue
0 I am no more tired or fatigued than usual
1 I get more tired or fatigued more easily than usual
2 I am too tired or fatigued to do a lot of the things I used to do
3 I am too tired or fatigued to do most of the things I used to do

21. Loss of Interest in Sex
0 I have not noticed any recent change in my interest in sex
1 I am less interested in sex than I used to be
2 I am much less interested in sex now
3 I have lost interest in sex completely
Appendix - E
Subjective Well-being Inventory

Instructions: People are different. They live in a variety of situations and they do not feel the same way about life and the world around them. From a practical viewpoint, it is important to know how different persons feel with regard to their day-to-day concerns like their health or family. Such acknowledge is necessary if an improvement in the quality of life of people is to be brought about.

This is a questionnaire on how you feel about some aspects of your life. Each question may be answered by any one of the given categories by putting a circle around the number which seems to represent your feeling best. For example, in the first question, if you feel that your life is very interesting, please put a circle around the response ‘1’. At times you may find that your feeling is not represented perfectly by any of the given response categories. In such cases, just choose the one closest to what you think.

All information given you will be treated as confidential and will be used only for research purposes.

1. Do you feel your life is interesting?
   - Very much: 1
   - To some extent: 2
   - Not so much: 3

2. Do you think you have achieved the standard of living and the social status that you had expected?
   - Very much: 1
   - To some extent: 2
   - Not so much: 3

3. How do you feel about the extent to which you have achieved success and are getting ahead?
   - Very good: 1
   - Quite good: 2
   - Not so good: 3
4. Do you normally accomplish what you want to?
   - Most of the time 1
   - Sometimes 2
   - Hardly ever 3

5. Compared with the past, do you feel you present life is:
   - Very happy 1
   - Quite happy 2
   - Not so happy 3

6. On the whole, how happy are you with the things you have been doing in recent years?
   - Most of the time 1
   - Sometimes 2
   - Hardly ever 3

7. Do you feel you can manage situations even when they do not turn out to be expected?
   - Very much 1
   - To some extent 2
   - Not so much 3

8. Do you feel confident that in the case of a crisis (anything which substantially upsets your life situation) you will be able to cope with it/facing it boldly?
   - Very much 1
   - To some extent 2
   - Not so much 3

9. The way things are going now do you feel confident in coping with the figure?
   - Very much 1
   - To some extent 2
   - Not so much 3

10. Do you sometimes feel that you and the things around you belong very much together and are integral parts of a common force?
    - Very much 1

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11. Do you sometimes experience moments of intense happiness almost like a kind of ecstasy or bliss?
   - Quite often 1
   - Sometimes 2
   - Hardly over 3

12. Do you sometimes experience a joyful feeling of being part of mankind as of one large family?
   - Quite often 1
   - Sometimes 2
   - Hardly over 3

13. Do you feel confident that relatives and/or friends will help you out if there is an emergency, e.g. if you lose what you have by fire or theft?
   - Very much 1
   - To some extent 2
   - Not so much 3

14. How do you feel about the relationship you and your children have?
   - Very good 1
   - Quite good 2
   - Not so good 3
   - Not applicable 4

15. Do you feel confident that relatives and/or friends will look after you if you are severely ill or meet with an accident?
   - Very much 1
   - To some extent 2
   - Not so much 3

16. Do you get easily upset if things don’t turn out as expected?
   - Very much 1
   - To some extent 2
   - Not so much 3
17. Do you sometimes feel sad without reason?
   Very much  1
   To some extent  2
   Not so much  3

18. Do you feel too easily irritated, too sensitive?
   Very much  1
   To some extent  2
   Not so much  3

19. Do you feel disturbed by feelings of anxiety and tension?
   Most of the time  1
   Sometimes  2
   Hardly over  3

20. Do you consider it a problem for you that you sometimes lose your temper over minor things?
   Very much  1
   To some extent  2
   Not so much  3

21. Do you consider your family a source of help to you in finding solutions to most of the problems you have?
   Very much  1
   To some extent  2
   Not so much  3

22. Do you think that most of the members of your family feel closely attached to one another?
   Very much  1
   To some extent  2
   Not so much  3

23. Do you think you would be looked after well by your family in case you were seriously ill?
   Very much  1
24. Do you feel your life is boring/uninteresting?
   Very much 1
   To some extent 2
   Not so much 3

25. Do you worry about your future?
   Very much 1
   To some extent 2
   Not so much 3

26. Do you feel your life is useless?
   Very much 1
   To some extent 2
   Not so much 3

27. Do you sometimes worry about the relationship you and your wife/husband have?
   Very much 1
   To some extent 2
   Not so much 3
   Not applicable 4

28. Do you feel your friends / relatives would help you out if you were in need?
   Very much 1
   To some extent 2
   Not so much 3

29. Do you sometimes worry about the relationship you and your children have?
   Very much 1
   To some extent 2
   Not so much 3
   Not applicable 4

30. Do you feel that minor things upset you more than necessary?
   Very much 1

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31. Do you get easily upset if you are criticized?
   Most of the time 1
   Sometimes 2
   Hardly ever 3

32. Would you wish to have more friends than you actually have?
   Very much 1
   To some extent 2
   Not so much 3

33. Do you sometimes feel that you miss a real close friend?
   Very much 1
   To some extent 2
   Not so much 3

34. Do you sometimes worry about your health?
   Very much 1
   To some extent 2
   Not so much 3

35. Do you suffer from pains in various parts of your body?
   Most of the time 1
   Sometimes 2
   Hardly ever 3

36. Are you disturbed by palpitations / a thumping heart?
   Most of the time 1
   Sometimes 2
   Hardly ever 3

37. Are you disturbed by a feeling of giddiness?
   Most of the time 1
   Sometimes 2
   Hardly ever 3

38. Do you feel you get tired too easily?
39. Are you troubled by disturbed sleep?
   Most of the time
   Sometimes
   Hardly ever

40. Do you sometimes worry that you do not have close personal relationship with other people?
   Very much
   To some extent
   Not so much


Appendix - F

P.G.I. HEALTH QUESTIONNAIRE N-1

निर्देश: आपने आपके शारीरिक व मानसिक स्वास्थ्य के बारे में कुछ प्रश्न लिखे हैं। इनका ध्यान से पढ़िए और जो बातें आपके बारे में अधिकतर ठीक हैं उनके सामने वाले खाने में सही का निशान (✓) बनाइये।

Area – A

1. मैं जल्दी थक जाता हूं। 
2. मैं अक्सर बीमार रहता हूं। 
3. मैं सेहत के बारे में बहुत परेशान रहता हूं। 
4. मुझे भूख कम लगती है। 
5. मुझे कब्ज की शिकायत रहती है। 
6. मुझे अक्सर सिर दर्द रहता है। 
7. मुझे सदी-जुकाम जल्दी हो जाता है। 
8. मुझे गला बार-बार साफ करना पड़ता है। 
9. मुझे चक्कर आते हैं। 
10. मुझे बार-बार पैशाब करने जाना पड़ता है। 
11. मुझे नींद देर से आती है या जल्दी टूट जाती है। 
12. मेरी सांस फूल जाती है। 
13. मेरा पेट अक्सर खराब रहता है। 
14. मेरा दिल जोर-जोर से धड़कने लगता है। 
15. मेरे शरीर में दर्द रहता है। 
16. मेरे पेट से कोड़े निकलते हैं।

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Area – B

17. मैं शर्मिंदा स्वभाव का हूँ।
18. मैं वात का जल्दी बुरा मान जाता हूँ।
19. मैं छोटी-छोटी बातों से घबरा जाता हूँ।
20. मैं चिंता बहुत करता हूँ।
21. मैं हर काम के लिए दूसरों की राय मांगता हूँ।
22. मैं किसी वात का जल्दी फैसला नहीं कर पाता।
23. मैं खोड़ी सी आलोचना से बहुत परेशान हो जाता हूँ।
24. अगर काम जल्दी करना हो तो मैं घबरा जाता हूँ।
25. मैं जानबूझकर धीरे-धीरे काम करता हूँ ताकि काम गलत न हो जाये।
26. मैं लोगों से मिलने या नई जगह जाने से घबराता हूँ।
27. मैं अक्सर उदास रहता हूँ।
28. मैं जल्दी रो पड़ता हूँ।
29. मैं जल्दी निराश हो जाता हूँ।
30. अगर जोर से आवाज हो तो मैं डर जाता हूँ।
31. अचानक कोई सामने से आ जाए तो मैं डर जाता हूँ।
32. किसी अफसर/बड़े आदमी के सामने मुझे पसीना आने लगता है।
33. मेरा स्वभाव चिड़चिड़ा हो जाता है।
34. मुझे गुस्सा जल्दी आ जाता है।
35. मुझे अचेते से डर लगता है।
36. मुझे डरावने समझने आते हैं।
37. मुझे जिन्दगी बेकार लगती है।
38. मेरी जिन्दगी से तो मीत अच्छी है।
Appendix – G
Satisfaction with Life Scale

निर्देश: नीचे आपके जीवन से सम्बंधित कुछ कथन दिए गए हैं। कृपया आप नीचे दिए गए कोड के अनुसार बताएं कि प्रत्येक कथन से आप कितने सहमत या असहमत हैं।

1. पूर्णत: असहमत 2. असहमत 3. कुछ असहमत
4. न सहमत न असहमत 5. कुछ सहमत 6. सहमत
7. पूर्णत: सहमत

1. अधिकांशतः मेरा जीवन मेरे आदर्शों के अनुरूप है। .............
2. मेरा जीवन उत्तम है। .............
3. मैं अपने जीवन से संतुष्ट हूँ। .............
4. वो महत्वपूर्ण चीजें जो मैं अपनी जिंदगी में चाहता हूँ, पहले प्राप्त कर चुका हूँ। .............
5. यदि मुझे अपना यही जीवन दोबारा जीना पड़े तो मैं कोई परिवर्तन नहीं चाहूँगा। .............
CARD 2

HAPPY  GAME
TIME   CURD
BOOK   LOCK
LEAF   DOOR
BIND   TABLE
TREE   CHAIR
SILK   BEER
TAPE   CELL
FOOD   STAR
PLATE  FLOOR
MILK   COME
BODY   GOD
CARD 3

RED
YELLOW
GREEN
ORANGE
BLUE
BROWN
RED
BLACK
BLUE
ORANGE
GREEN
YELLOW
RED
BLUE
ORANGE
GREEN
BROWN
BLACK
BLUE
GREEN
YELLOW
RED
BLUE
BLACK
GREEN
ORANGE
BROWN
BLACK
BLUE
YELLOW
RED

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CARD 4

RED  RED  BLUE
YELLOW BLACK BLUE
BROWN YELLOW BLACK
BLACK RED BLUE
BROWN ORANGE BLACK
BLUE BROWN GREEN
BLACK GREEN BLACK
RED ORANGE RED
YELLOW GREEN ORANGE
BLUE YELLOW RED
GREEN ORANGE RED
CARD 5

BLACK  YELLOW
GREEN   BLUE
RED     ORANGE
YELLOW  BLACK
BLUE    GREEN
BROWN   RED
BLACK   ORANGE
BROWN   BLUE
ORANGE  GREEN
RED     BLUE
BLACK   YELLOW
BLUE