E.R. Gopalakrishnan  
Lecturer (Selection Grade)  
Department of Corporate Secretaryship  
D.B. Jain College  
Thorappakkam, Chennai – 600 096.

Dear Sir / Madam,

Enclosed with this request, is a set of Questionnaire (These parts) needing your response.

This questionnaire and its responses are needed as part of fulfilling the requirement of my Doctoral thesis under the Supervision and Guidance of Dr. V. Balu, M.Com., M.Phil., Ph.D., M.B.A., Controller of Examinations, University of Madras.

The title of my study is “Stress Management – A study based on the conceptual frame work of Patanjali’s Yoga Sutra (with reference to Professionals in Chennai).

While I seek your co-operation in this endeavour, I assure you that the informations provided by you will be kept strictly confidential and used only for this study.

Thanking you,

Sincerely yours,

(E.R. GOPALAKRISHNAN)
PART – I

PERSONAL DATA

(Please (✓) tick wherever necessary)

1.1 Profession
   (a) Advocates (✓)   (b) Auditors ( )   (c) Doctors ( )

1.2 Age
   (a) Below 35 years (✓) (b) Between 36 and 50 years ( ) (c) Above 50 years ( )

1.3 Practice (Experience)
   (a) Below 10 years ( ) (b) Between 11 and 20 years ( ) (c) Above 50 years ( )

1.4 Sex
   (a) Male (✓)       (b) Female ( )

1.5 Marital Status
   (a) Married (✓)    (b) Unmarried ( )

1.6 No. of Children
   (a) Nil ( )        (b) One ( )     (c) Two ( )     (d) More than two ( )

1.7 Status of Spouse
   (a) Employed (✓)   Not Employed ( )

1.8 Annual Income of the Family
   (a) Below one lakh ( ) (b) Between Rs.1 lakh-3 lakhs ( ) (c) Above Rs 3 lakhs ( )
PART – II

RE-ACTIVITY SCALE – STRUCTURED BASED ON PATANJALI'S YOGA SUTRA

Given below are some of the effects traditionally believed to be the manifestations of a stressed mind.

The numbers 0, 1, 2 and 3 are given to the right side of each statement indicate the frequency with which a person is susceptible to stress influenced manifestations.

Read each manifestation you have been experiencing at least for the past one month and circle the number as applies to you.

<table>
<thead>
<tr>
<th>Frequency Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
</tr>
<tr>
<td>1</td>
</tr>
<tr>
<td>2</td>
</tr>
<tr>
<td>3</td>
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</tbody>
</table>

Frequency Value

Do you often have

(1) Cramps in your body 0 1 2 3
(2) Stiffness in the joints 0 1 2 3
(3) Stiffness in the neck 0 1 2 3
(4) Pain in the low back 0 1 2 3
(5) Palpitation / burning in the chest 0 1 2 3
(6) Loose motion 0 1 2 3
(7) Constipation 0 1 2 3
(8) Severe head ache 0 1 2 3
(9) Nausea and vomiting 0 1 2 3
(10) Twitching in the face / body 0 1 2 3
(11) Frequent flapping of eyes 0 1 2 3
(12) Skin eruption 0 1 2 3
(13) Tremor / shake in the body 0 1 2 3
(14) Feel loosing balance 0 1 2 3
(15) Feel uncomfortable in body position 0 1 2 3
(16) Lack of resistance to heat / chillness 0 1 2 3
II. Do you often

| (1) Feel Heavyness in Breathing | 0 | 1 | 2 | 3 |
| (2) Have noisy Breath           |   |   |   |   |
| (3) Gasp for Breath            |   |   |   |   |
| (4) Have Rapid / Short Breath  |   |   |   |   |

III. Do you often

| (1) Disturb others             | 0 | 1 | 2 | 3 |
| (2) Feel depressed             |   |   |   |   |
| (3) Feel shy or sensitive      |   |   |   |   |
| (4) Get nervous around strangers |     |   |   |   |
| (5) Feel Neglected             |   |   |   |   |
| (6) Feel Difficulty in relaxing|   |   |   |   |
| (7) Feel exhausted or tired    |   |   |   |   |
| (8) Have frightening dreams    |   |   |   |   |

IV

| (1) Feel Unhappy                | 0 | 1 | 2 | 3 |
| (2) Feel empty                  |   |   |   |   |
| (3) Feel constricted            |   |   |   |   |
| (4) Worry too much              |   |   |   |   |
PART – III

Life style scale – developed based on Patanjali’s Yoga Sutra

Given below are some of the activities traditionally believed to result in calm and peaceful state of mind, free from stress.

The numbers 0, 1, 2 and 3 are given to the right side of each statement indicate the frequency with which a person follows these activities.

Read each activity / behaviour you have been following atleast for the past one month and circle the number as applies to your life style.

Frequency Value
0 Never
1 Occasionally
2 Frequent
3 Regular

1.

(1) Considerate towards weak, innocent, suffering or in difficulty 0 1 2 3

(2) Truthful in words, gestures and writings 0 1 2 3

(3) Avoid possessing which does not belong to me 0 1 2 3

(4) Moderate in sensual pleasures 0 1 2 3

(5) Do not accept more than what I demand 0 1 2 3


II.

(1) Keep the body and surroundings neat and clean 0 1 2 3
(2) Contended and happy with what I have 0 1 2 3
(3) Get up early in the morning 0 1 2 3
(4) Retiring to Bed early 0 1 2 3
(5) Eat only when Hungry 0 1 2 3
(6) Eat only limited food 0 1 2 3
(7) Do not consume too much of spicy, salty and pungent foods 0 1 2 3
(8) Ghee is part of my daily intake 0 1 2 3
(9) Every day I eat fruits 0 1 2 3
(10) Drink Hot milk before going to bed 0 1 2 3
(11) Eat only warm / fresh food 0 1 2 3
(12) Regularly study books of self-knowledge 0 1 2 3
(13) Take time reflect everyday 0 1 2 3
(14) Visit places of worship 0 1 2 3
(15) Recite Mantras / Slokas / Prayers 0 1 2 3
(16) I believe that God is the ultimate saviour 0 1 2 3

III.

(1) Practice Yogasanas 0 1 2 3
(2) I do yogasanas with breath co-ordination 0 1 2 3
(3) I do yogasanas that is appropriate for me 0 1 2 3
(4) Regularly practice pranayama 0 1 2 3
(5) I do not practice hold after inhalation 0 1 2 3
IV.

(1) Not addicted to TV viewing

(2) Go for regular parties

(3) Go to clubs for time passing

(4) I am not used to alcohol/tobacco chewing/cigarettes

(5) Attend to spiritual discourses

(6) I do Japans

(7) Practice meditation

(8) I am totally absorbed in whatever I do

(9) My practices are under the guidance of a Teacher

(10) I am steadfast and regular in all my practices