

Stress Questionnaire

Directions: In the blank in front of each item, write the number that best indicates how intense of stress that item is for you. Add additional items to the end if needed. *Remember to keep this questionnaire. You will need it for the rest of the workshops.*

Stress Intensity Ratings

0 = Not at all 1 = Somewhat 2 = Moderate 3 = Severe

- _____ Health problem or injury of myself or family member
- _____ Too much to do or long work hours
- _____ Machinery breakdown or stock problem
- _____ Purchased new machinery, building, or land
- _____ Crop or stock loss
- _____ Unreliable prices for the products I raise
- _____ Handling pesticide
- _____ Financial difficulties in my farm or business, including too much debt
- _____ Problems with government regulations, legal issues, or bank
- _____ Not enough money for family needs
- _____ Dealing with the weather
- _____ Conflict with operating partner or farm help
- _____ Conflict with my spouse or life partner
- _____ Conflict with my kids
- _____ Difficulties with relatives, including in-laws
- _____ Helping an older relative with health or home management
- _____ Conflicts with friends or neighbors
- _____ Difficulty getting or keeping a job or second job, or job conflicts
- _____ No one to talk with about my troubles
- _____ Not enough time to do the farm/or job things I want to do
- _____ Too little time for my family
- _____ Not enough hobbies, recreation, and entertainment
- _____ Too much time on my hands in some seasons
- _____ Dealing with recent death of someone close to me
- _____ Dealing with Divorce or separation
- _____ Pregnancy or recent birth in our family
- _____ Change in living situation, including child growing up and moving out
- _____ Marriage, big personal achievement, etc.
- _____ Promotion, retirement, or job changes
- _____ Other stress: _____
- _____ Other stress: _____
- _____ Other stress: _____

_____ **TOTAL**

Total Stress Intensity Levels

High = 30 and higher Medium = 15-29 Low = 14 and under