INSTRUCTIONS: This questionnaire is about how you have been feeling during the past week. After each question there are 5 statements (numbered 0-4). Read all 5 statements carefully. Then decide which one best describes how you have been feeling. Choose only one statement per group. If more than one statement in a group applies to you, choose the one with the higher number.

(1) During the past week, have you been feeling sad or depressed?
0 No, not at all.
1 Yes, a little bit.
2 Yes, I have felt sad or depressed most of the time.
3 Yes, I have been very sad or depressed nearly all the time.
4 Yes, I have been extremely depressed nearly all the time.

(2) How many days in the past 2 weeks have you been feeling sad or depressed?
0 No days
1 A few days
2 About half the days
3 Nearly every day
4 Every day

(3) Which of the following best describes your level of interest in your usual activities during the past week?
0 I have not lost interest in my usual activities.
1 I have been less interested in 1 or 2 of my usual activities.
2 I have been less interested in several of my usual activities.
3 I have lost most of my interest in almost all of my usual activities.
4 I have lost all interest in all of my usual activities.

(4) How many days in the past 2 weeks have you been less interested in your usual activities?
0 No days
1 A few days
2 About half the days
3 Nearly every day
4 Every day

(5) Which of the following best describes the amount of pleasure you have gotten from your usual activities during the past week?
0 I have gotten as much pleasure as usual.
1 I have gotten a little less pleasure from 1 or 2 of my usual activities.
2 I have gotten less pleasure from several of my usual activities.
3 I have gotten almost no pleasure from most of the activities that I usually enjoy.
4 I have gotten no pleasure from any of the activities that I usually enjoy.

(6) How many days in the past 2 weeks have you gotten less pleasure from your usual activities?
0 No days
1 A few days
2 About half the days
3 Nearly every day
4 Every day

(7) During the past week, has your energy level been low?
0 No, not at all.
1 Yes, my energy level has occasionally been a little lower than it normally is.
2 Yes, I have clearly had less energy than I normally do.
3 Yes, I have had much less energy than I normally have.
4 Yes, I have felt exhausted almost all of the time.

(8) Which of the following best describes your level of physical restlessness during the past week?
0 I have not been more restless and fidgety than usual.
1 I have been a little more restless and fidgety than usual.
2 I have been very fidgety, and it has been somewhat difficult to sit still.
3 I have been extremely fidgety, and I have been pacing a little bit almost every day.
4 I have been pacing more than an hour a day, and I have been unable to sit still.

(9) Which of the following best describes your physical activity level during the past week?
0 I have not been moving more slowly than usual.
1 I have been moving a little more slowly than usual.
2 I have been moving more slowly than usual, and it takes me longer than usual to do most activities.
3 Normal activities are difficult because it has been tough to start moving.
4 I have been feeling extremely slowed down physically, like I am stuck in mud.

(10) During the past week, have you been bothered by feelings of guilt?
0 No, not at all.
1 Yes, I have occasionally felt a little guilty.
2 Yes, I have often been bothered by feelings of guilt.
3 Yes, I have often been bothered by strong feelings of guilt.
4 Yes, I have been feeling extremely guilty.

(11) During the past week, what has your self esteem been like?
0 My self-esteem has not been low.
1 Once in a while, my opinion of myself has been a little low.
2 I often think I am a failure.
3 I almost always think I am a failure.
4 I have been thinking I am a totally useless and worthless person.
(12) During the past week, have you been thinking about death or dying?
  0 No, not at all.
  1 Yes, I have occasionally thought that life is not worth living.
  2 Yes, I have frequently thought about dying in passive ways (such as going to sleep and not waking up).
  3 Yes, I have frequently thought about death, and that others would be better off if I were dead.
  4 Yes, I have been wishing I were dead.

(13) During the past week, have you been thinking about killing yourself?
  0 No, not at all.
  1 Yes, I had a fleeting thought about killing myself.
  2 Yes, several times I thought about killing myself, but I would not act on these thoughts.
  3 Yes, I have seriously thought about killing myself.
  4 Yes, I have thought of a specific plan for killing myself.

(14) Which of the following best describes your ability to concentrate during the past week?
  0 I have been able to concentrate as well as usual.
  1 My ability to concentrate has been slightly worse than usual.
  2 My attention span has not been as good as usual and I have had difficulty collecting my thoughts, but this hasn’t caused any serious problems.
  3 I have frequently had trouble concentrating, and it has interfered with my usual activities.
  4 It has been so hard to concentrate that even simple things are hard to do.

(15) During the past week, have you had trouble making decisions?
  0 No, not at all.
  1 Yes, making decisions has been slightly more difficult than usual.
  2 Yes, it has been harder and has taken longer to make decisions, but I have been making them.
  3 Yes, I have been unable to make some decisions that I would usually have been able to make.
  4 Yes, important things are not getting done because I have had trouble making decisions.

(16) During the past week, has your appetite been decreased?
  0 No, not at all.
  1 Yes, my appetite has been slightly decreased compared to how it normally is.
  2 Yes, my appetite has been clearly decreased, but I have been eating about as much as I normally do.
  3 Yes, my appetite has been clearly decreased, and I have been eating less than I normally do.
  4 Yes, my appetite has been very bad, and I have had to force myself to eat even a little.

(17) How much weight have you lost during the past week (not due to dieting)?
  0 None (or the only weight I lost was due to dieting)
  1 1-2 pounds
  2 3-5 pounds
  3 6-10 pounds
  4 More than 10 pounds

(18) During the past week, has your appetite been increased?
  0 No, not at all.
  1 Yes, my appetite has been slightly increased compared to how it normally is.
  2 Yes, my appetite has clearly been increased compared to how it normally is.
  3 Yes, my appetite has been greatly increased compared to how it normally is.
  4 Yes, I have been feeling hungry all the time.

(19) How much weight have you gained during the past week?
  0 None
  1 1-2 pounds
  2 3-5 pounds
  3 6-10 pounds
  4 More than 10 pounds

(20) During the past week, have you been sleeping less than you normally do?
  0 No, not at all.
  1 Yes, I have occasionally had slight difficulty sleeping.
  2 Yes, I have clearly been sleeping less than I normally do.
  3 Yes, I have been sleeping about half my normal amount of time.
  4 Yes, I have been sleeping less than 2 hours a night.

(21) During the past week, have you been sleeping more than you normally do?
  0 No, not at all.
  1 Yes, I have occasionally slept more than I normally do.
  2 Yes, I have frequently slept at least 1 hour more than I normally do.
  3 Yes, I have frequently slept at least 2 hours more than I normally do.
  4 Yes, I have frequently slept at least 3 hours more than I normally do.

(22) During the past week, have you been feeling pessimistic or hopeless about the future?
  0 No, not at all.
  1 Yes, I have occasionally felt a little pessimistic about the future.
  2 Yes, I have often felt pessimistic about the future.
  3 Yes, I have been feeling very pessimistic about the future most of the time.
  4 Yes, I have been feeling that there is no hope for the future.
INSTRUCTIONS
Indicate below how much symptoms of depression have interfered with, or caused difficulties in, the following areas of your life during the past week. (Circle DNA [Does Not Apply] if you are not married or have a boyfriend/ girlfriend.)

During the PAST WEEK, how much difficulty have symptoms of depression caused in your...

23. usual daily responsibilities (at a paid job, at home, or at school) ........................................ 0 1 2 3 4
24. relationship with your husband, wife, boyfriend, girlfriend, or lover ............................ DNA 0 1 2 3 4
25. relationships with close family members ................................................................. 0 1 2 3 4
26. relationships with your friends ............................................................................... 0 1 2 3 4
27. participation and enjoyment in leisure and recreation activities ................................. 0 1 2 3 4

28. Overall, how much have symptoms of depression interfered with or caused difficulties in your life?
   0) not at all
   1) a little bit
   2) a moderate amount
   3) quite a bit
   4) extremely

29. How many days during the past week were you completely unable to perform your usual daily responsibilities (at a paid job, at home, or at school) because you were feeling depressed? (circle one)
   0 days 1 day 2 days 3 days 4 days 5 days 6 days 7 days

INSTRUCTIONS
Indicate below your level of satisfaction with the following areas of your life (Circle DNA [Does Not Apply] if you are not married or have a boyfriend or girlfriend.)

During the PAST WEEK how satisfied have you been with your...

30. usual daily responsibilities (at a paid job, at home, or at school) ........................................ 0 1 2 3 4
31. relationship with your husband, wife, boyfriend, girlfriend, or lover ............................ DNA 0 1 2 3 4
32. relationship with close family members ................................................................. 0 1 2 3 4
33. relationships with your friends ............................................................................... 0 1 2 3 4
34. participation and enjoyment in leisure and recreation activities ................................. 0 1 2 3 4
35. mental health ........................................................................................................ 0 2 3 4
36. physical health ....................................................................................................... 0 2 3 4

37. In general, how satisfied have you been with your life during the past week?
   0) very satisfied
   1) mostly satisfied
   2) equally satisfied & dissatisfied
   3) mostly dissatisfied
   4) very dissatisfied

38. In general, how would you rate your overall quality of life during the past week?
   0) very good, my life could hardly be better
   1) pretty good, most things are going well
   2) the good and bad parts are about equal
   3) pretty bad, most things are going poorly
   4) very bad, my life could hardly be worse

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