

Stress and Burnout Questionnaire

This brief inventory has been designed to help you discover the warning signals of excessive stress. Relate the questions to your life over the last **3 -6 months**. Look particularly for **changes** in your ways of coping, not so much your normal behaviour.

Score 0 - for experiencing this only occasionally

Score 1 - This is true quite frequently (weekly)

Score 2 - This true often (usually daily)

- | | | | | |
|-------------------|---|---|--|---|
| 1 | Feeling constantly exhausted, tired or fatigued | [| |] |
| 2 | Becoming increasingly irritable with a shortening fuse | [| |] |
| 3 | Having less and less time for people, even family and friends | [| |] |
| 4 | Experiencing increasing difficulty making decisions | [| |] |
| 5 | Aware of increasing difficulty in concentration | [| |] |
| 6 | Feeling a sense of hopelessness, like <i>"Why bother? "; "Who cares anyway ?"</i> | [| |] |
| 7 | Chronic forgetfulness | [| |] |
| 8 | Regular sleep disturbance, wakefulness, never enough sleep | [| |] |
| 9 | Start the day feeling unrefreshed | [| |] |
| 10 | Frequent feelings of worthlessness | [| |] |
| 11 | Loss of enthusiasm or enjoyment of work | [| |] |
| 12 | Change in appetite; over-eating or loss of appetite | [| |] |
| 13 | Overlooking of normal duties or responsibilities | [| |] |
| 14 | Feeling unappreciated most of the time | [| |] |
| 15 | Feeling burdened by responsibilities and pressures | [| |] |
| 16 | Aware of accomplishing less and less in the time available | [| |] |
| 17 | Becoming excessively preoccupied with details | [| |] |
| 18 | Increasingly unable to say <i>"No!"</i> | [| |] |
| 19 | Becoming overly dogmatic, inflexible or <i>"fussy"</i> | [| |] |
| 20 | Aware that you are driving yourself too hard at work or home | [| |] |
| 21 | Becoming cynical or hyper-critical with friends and family | [| |] |
| 22 | Increasing boredom with work, homelife or life | [| |] |
| 23 | Losing a clear perspective on work or life | [| |] |
| 24 | A growing sense of being <i>"out of control"</i> in areas of life | [| |] |
| 25 | Frequent somatic symptoms such as:
Headache, chronic back ache, chest pain, abdominal cramps or wind, mouth ulcers,
diarrhea, indigestion, skin rash, persistent colds, allergies, sinusitis, accidents, etc
(1 point for each symptom) | [| |] |
| Total (50) | | [| |] |

Burnout Prevention Assessment

This brief checklist has been designed to help you assess for yourself important ways to prevent burnout. Record your score for each question (Note: some questions range from 5 to 0 others from 4 or 3 to 0)

- 1 Do you have a full day off to do what you like? []
(5 - Weekly, 4 - Mostly, 3 - Frequently, 1 - Occasionally, 0 - Never)
- 2 Do you have time out for yourself to think, reflect, meditate and pray? []
(5 - Daily, 3 - Frequently, 1 - Occasionally, 0 - Seldom or never)
- 3 Do you have good vacations, about 3 - 4 weeks in each year? []
(5 - Every year, 3 - Some years, 1 - Occasionally, 0 - Never)
- 4 Do you do some aerobic exercise for at least half an hour at a time? []
(5 - 3 to 5 times a week, 3 - Frequently, 1 - Occasionally, 0 - Seldom or never)
- 5 Do you do something for fun or enjoyment Eg. Game, movie, concert? []
(4 - Weekly, 3 - Monthly, 1 - Occasionally, 0 - Never)
- 6 Do you practice any muscle relaxation or slow breathing technique? []
(5 - Daily, 3 - Frequently, 1 - Occasionally, 0 - Seldom or never)
- 7 Do you listen to your body messages (symptoms, illnesses, etc)? []
(5 - Always, 3 - Mostly, 1 - Occasionally, 0 - Seldom or never)
- 8 IF SINGLE: Do you have friends with whom you can share at a feelings level? []
(5 - Regularly, 4 - Frequently, 3 - Occasionally, 0 - Seldom or never)
- 9 IF MARRIED (or in relationship): how often do you share intimately? []
(5 - Daily, 3 - Frequently, 1 - Occasionally, 0 - Seldom or never)
- 10 Do you share your *stressors [cares, problems, struggles, needs]* with others & God? []
(5 - Regularly, 3 - Frequently, 1 - Occasionally, 0 - Seldom or never)
- 11 How would you describe your ability to communicate with others? []
(5 - Excellent, 3 - Fair, 1 - Difficult, 0 - Poor)
- 12 Do you sleep well (8-9 hours per night)? []
(3 - Frequently, 1 - Occasionally, 0 - Seldom or never)
- 13 Are you able to say "No!" to inappropriate or excessive demands on you ? []
(3 - Always, 2 - Mostly, 1 - Occasionally, 0 - Seldom or never)
- 14 Do you set realistic goals for your life, both long and short term? []
(5 - Regularly, 3 - Frequently, 1 - Occasionally, 0 - Seldom or never)
- 15 Are you careful to eat a good balanced diet? []
(5 - Always, 3 - Mostly, 2 - Not often, 0 - A lot of junk food)
- 16 Is your weight appropriate for your height? []
(3 - Consistently, 2 - A battle to keep it down, 0 - Overweight)

- 17 How would you describe the amount of touch you get in your life? []
 (5 - Plenty, 3 - Just enough, 1 - I miss out, 0 - I am rarely touched)
- 18 Can you deal with anger without repressing or dumping it on others? []
 (5 - Always, 4 - Mostly, 2 - Occasionally, 1 - Rarely, 0 - Never)
- 19 Do you have a good "belly laugh"? []
 (3 - At least daily, 2 - Frequently, 1 - Seldom, 0 - never)
- 20 Do you have a creative hobby time (E.g. Gardening, reading, music)? []
 (4 - Weekly, 2 - Occasionally, 1 - Rarely, 0 - Never)
- 21 Do you nurture your self-esteem (E.g. with self affirmations)? []
 (5 - Regularly, 3 - Frequently, 1 - Occasionally, 0 - Rarely or never)
- 22 Do you practice forgiveness of others who have hurt you? []
 (5 - Regularly, 3 - Occasionally, 1 - Rarely, 0 - Never)
- 23 Have you dealt with old hurts and "baggage" from the past? []
 (5 - All that you are aware of, 3 - Most of it, 0 - A lot left yet)
- [Total (100)]** []

Over 60 – You have a wide range of preventative measures in place.

Over 40 – You have adequate measures in place but should adopt more.

Under 30 – You should make adoption of some of these measures a priority.

Ideas to develop preventative strategies....