

# Depression Anxiety Stress Scale 21 (DASS21)

Name:

Date:

Please read each statement and circle a number **0, 1, 2 or 3**, which indicates how much the statement applied to you **over the past week**. There are no right or wrong answers. Do not spend too much time on any statement.

*The rating scale is as follows:*

**0** Did not apply to me at all - NEVER

**1** Applied to me to some degree, or some of the time - SOMETIMES

**2** Applied to me to a considerable degree, or a good part of time - OFTEN

**3** Applied to me very much, or most of the time - ALMOST ALWAYS

1	I found it hard to wind down	0	1	2	3
2	I was aware of dryness of my mouth	0	1	2	3
3	I couldn't seem to experience any positive feeling at all	0	1	2	3
4	I experienced breathing difficulty (eg, excessively rapid breathing, breathlessness in the absence of physical exertion)	0	1	2	3
5	I found it difficult to work up the initiative to do things	0	1	2	3
6	I tended to over-react to situations	0	1	2	3
7	I experienced trembling (e.g. in the hands)	0	1	2	3
8	I felt that I was using a lot of nervous energy	0	1	2	3
9	I was worried about situations in which I might panic and make a fool of myself	0	1	2	3
10	I felt that I had nothing to look forward to	0	1	2	3
11	I found myself getting agitated	0	1	2	3
12	I found it difficult to relax	0	1	2	3
13	I felt down-hearted and blue	0	1	2	3
14	I was intolerant of anything that kept me from getting on with what i was doing	0	1	2	3
15	I felt I was close to panic	0	1	2	3
16	I was unable to become enthusiastic about anything	0	1	2	3
17	I felt I wasn't worth much as a person	0	1	2	3

18	I felt that I was rather touchy	<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>
19	I was aware of the action of my heart in the absence of physical exertion (e.g. sense of heart rate increase, heart missing a beat)	<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>
20	I felt scared without any good reason	<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>
21	I felt that life was meaningless	<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>