

## The General Well-Being Scale

As described earlier in this chapter, one measure of psychological status that has been used with good success in national surveys is the General Well-Being Scale (GWB). The GWB was designed by the National Center for Health Statistics, and consists of 18 questions covering such matters as energy level, satisfaction, freedom from worry, and self-control. A high score on the GWB reflects an absence of bad feelings and an expression of positive feelings. Results from national surveys have shown that higher scores for the GWB are significantly associated with increased amounts of physical activity for all age groups and for both men and women. (See: Stephens T. Physical Activity and Mental Health in the United States and Canada: Evidence from Four Population Surveys, *Prev Med* 17:35–47, 1988.)

### The General Well-Being Scale

*Instructions:* The following questions ask how you feel and how things have been going for you *during the past month*. For each question, mark an “x” for the answer that most nearly applies to you. Since there are no right or wrong answers, it’s best to answer each question quickly without pausing too long on any one of them.

1. How have you been feeling in general?
  - 5 ☐ In excellent spirits.
  - 4 ☐ In very good spirits.
  - 3 ☐ In good spirits mostly.
  - 2 ☐ I’ve been up and down in spirits a lot.
  - 1 ☐ In low spirits mostly.
  - 0 ☐ In very low spirits.
2. Have you been bothered by nervousness or your “nerves”?
  - 0 ☐ Extremely so—to the point where I could not work or take care of things.
  - 1 ☐ Very much so.
  - 2 ☐ Quite a bit.
  - 3 ☐ Some—enough to bother me.
  - 4 ☐ A little.
  - 5 ☐ Not at all.
3. Have you been in firm control of your behavior, thoughts, emotions, or feelings?
  - 5 ☐ Yes, definitely so.
  - 4 ☐ Yes, for the most part.
  - 3 ☐ Generally so.
  - 2 ☐ Not too well.
  - 1 ☐ No, and I am somewhat disturbed.
  - 0 ☐ No, and I am very disturbed.

4. Have you felt so sad, discouraged, or hopeless, or had so many problems that you wondered if anything was worthwhile?
- 0 ☐ Extremely so—to the point I have just about given up.
  - 1 ☐ Very much so.
  - 2 ☐ Quite a bit.
  - 3 ☐ Some—enough to bother me.
  - 4 ☐ A little bit.
  - 5 ☐ Not at all.
5. Have you been under or felt you were under any strain, stress, or pressure?
- 0 ☐ Yes—almost more than I could bear.
  - 1 ☐ Yes—quite a bit of pressure.
  - 2 ☐ Yes—some, more than usual.
  - 3 ☐ Yes—some, but about usual.
  - 4 ☐ Yes—a little.
  - 5 ☐ Not at all.
6. How happy, satisfied, or pleased have you been with your personal life?
- 5 ☐ Extremely happy—couldn't have been more satisfied or pleased.
  - 4 ☐ Very happy.
  - 3 ☐ Fairly happy.
  - 2 ☐ Satisfied—pleased.
  - 1 ☐ Somewhat dissatisfied.
  - 0 ☐ Very dissatisfied.
7. Have you had reason to wonder if you were losing your mind, or losing control over the way you act, talk, think, feel, or of your memory?
- 5 ☐ Not at all.
  - 4 ☐ Only a little.
  - 3 ☐ Some, but not enough to be concerned.
  - 2 ☐ Some, and I've been a little concerned.
  - 1 ☐ Some, and I am quite concerned.
  - 0 ☐ Much, and I'm very concerned.
8. Have you been anxious, worried, or upset?
- 0 ☐ Extremely so—to the point of being sick, or almost sick.
  - 1 ☐ Very much so.
  - 2 ☐ Quite a bit.
  - 3 ☐ Some—enough to bother me.
  - 4 ☐ A little bit.
  - 5 ☐ Not at all.

9. Have you been waking up fresh and rested?

- 5 ☐ Every day.
- 4 ☐ Most every day.
- 3 ☐ Fairly often.
- 2 ☐ Less than half the time.
- 1 ☐ Rarely.
- 0 ☐ None of the time.

10. Have you been bothered by any illness, bodily disorder, pain, or fears about your health?

- 0 ☐ All the time.
- 1 ☐ Most of the time.
- 2 ☐ A good bit of the time.
- 3 ☐ Some of the time.
- 4 ☐ A little of the time.
- 5 ☐ None of the time.

11. Has your daily life been full of things that are interesting to you?

- 5 ☐ All the time.
- 4 ☐ Most of the time.
- 3 ☐ A good bit of the time.
- 2 ☐ Some of the time.
- 1 ☐ A little of the time.
- 0 ☐ None of the time.

12. Have you felt downhearted and blue?

- 0 ☐ All the time.
- 1 ☐ Most of the time.
- 2 ☐ A good bit of the time.
- 3 ☐ Some of the time.
- 4 ☐ A little of the time.
- 5 ☐ None of the time.

13. Have you been feeling emotionally stable and sure of yourself?

- 5 ☐ All the time.
- 4 ☐ Most of the time.
- 3 ☐ A good bit of the time.
- 2 ☐ Some of the time.
- 1 ☐ A little of the time.
- 0 ☐ None of the time.

14. Have you felt tired, worn out, used up or exhausted?

- 0 ☐ All the time.  
1 ☐ Most of the time.  
2 ☐ A good bit of the time.  
3 ☐ Some of the time.  
4 ☐ A little of the time.  
5 ☐ None of the time.

*Note:* For each of the four scales below, the words at each end describe opposite feelings. Circle any number along the bar that seems closest to how you have felt generally during the past month.

15. How concerned or worried about your health have you been?

Not concerned at all    10    8    6    4    2    0    Very concerned

16. How relaxed or tense have you been?

Very relaxed                10    8    6    4    2    0    Very tense

17. How much energy, pep, and vitality have you felt?

No energy at all,  
listless                      0    2    4    6    8    10    Very energetic,  
dynamic

18. How depressed or cheerful have you been? Very depressed?

Very depressed            0    2    4    6    8    10    Very cheerful

*Directions:* Add up all the points from the boxes you have checked for each question. Compare your total score with the norms listed below.

#### **National Norms for the General Well-Being Scale**

| <b>Stress State</b>      | <b>Total Stress Score</b> | <b>% Distribution U.S. Population</b> |
|--------------------------|---------------------------|---------------------------------------|
| Positive well-being      | 81–110                    | 55%                                   |
| Low positive             | 76–80                     | 10%                                   |
| Marginal                 | 71–75                     | 9%                                    |
| Indicates stress problem | 56–70                     | 16%                                   |
| Indicates distress       | 41–55                     | 7%                                    |
| Serious                  | 26–40                     | 2%                                    |
| Severe                   | 0–25                      | less than 1%                          |

