

QUESTIONNAIRE

Friends,

In daily life we generally come across many problems and difficult situations. In the process of handling them, we feel anxious and stressed. Here are certain questions which will help us to understand this aspect. Please answer them honestly. This information will be used only for research purpose and it will be confidential.

BACKGROUND INFORMATION

(Please tick in the boxes given)

1. Name _____
2. Age

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 Years
3. Date of Birth

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Date Month Year
4. School _____
5. Sex (1) Male (2) Female
6. Class (1) X (2) XI (3) XII
7. Type of family (1) Joint (2) Nuclear
8. No. of family members

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9. No. of siblings (*brother/sister*)

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10. Ordinal position

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11. Total family income

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 Rs. / month
12. Educational Qualification
 - a. Mother H.S.C. Graduation Post graduation
 - b. Father H.S.C. Graduation Post graduation

1. Do you like to go to school ?

Yes No

2. At school have you ever felt

Upset Frustrated Anxious

(Upset - disturbed temper, Frustrated - prevent from achieving, Anxious - troubled and uneasy mind)

3. If yes, then what generally are the reasons ?

Which of these reasons leads to stress?

(You can tick more than one option).

- 1) Excess home work
- 2) Excess course content
- 3) Forcible engagement in co-curricular activities
- 4) Deprivation from co-curricular activities
- 5) Examination pressure
- 6) Teachers behaviors or attitude towards you
- 7) Marks obtained
- 8) Evaluation system
- 9) Any other reason please specify : _____

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4. Do you ever have conflicts with your friends ?

Yes No

5. If yes, what are the areas of conflict (Fight)?

Which of these conflicts leads to stress?

(You can tick more than one option)

- 1) Conflict /rivalry with friends
- 2) Fight between friends
- 3) Non acceptance in the peer group
- 4) Disagreement in values / rules
- 5) Feeling inferior to friends in curricular / extra curricular activities
- 6) Academic rivalry / competition
- 7) Material possessions
- 8) Heterosexual (opposite sex) relationships
- 9) Any other please specify : _____

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6. Have you ever experienced any conflicts or disagreements at home ?

Yes No

7. Generally with whom do you have conflicts ?

1) Parents 2) Siblings (brothers / sisters)

3) Any others, specify _____

11. If no what are the reasons *(You can tick more than one option)* | Which of these reasons leads to stress?
- | | | |
|---|--------------------------|--------------------------|
| 1) Bodily changes | <input type="checkbox"/> | <input type="checkbox"/> |
| 2) Physical appearance | <input type="checkbox"/> | <input type="checkbox"/> |
| 3) Health reasons | <input type="checkbox"/> | <input type="checkbox"/> |
| 4) Development of sex organs | <input type="checkbox"/> | <input type="checkbox"/> |
| 5) Emotions such as jealousy, fear, anger | <input type="checkbox"/> | <input type="checkbox"/> |
| 6) Any other please specify _____ | | |
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- 12 How do you feel when you experience conflicts ? *(You can tick more than one option)*
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|---|--------------------------|
| 1) Unhappy | <input type="checkbox"/> |
| 2) Neglected <i>(fail to take proper care)</i> | <input type="checkbox"/> |
| 3) Angry | <input type="checkbox"/> |
| 4) Frustrated | <input type="checkbox"/> |
| 5) Helpless <i>(unable to manage)</i> | <input type="checkbox"/> |
| 6) Guilty <i>(feeling of having done wrong)</i> | <input type="checkbox"/> |
| 7) Anxiety | <input type="checkbox"/> |
| 8) Upset | <input type="checkbox"/> |
| 9) Any other please specify _____ | |
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- 13 What do you do when you feel stressed ? *(You can tick more than one option)*
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|--|--------------------------|
| 1) Cry | <input type="checkbox"/> |
| 2) Be angry at others & scream | <input type="checkbox"/> |
| 3) Bang doors and things | <input type="checkbox"/> |
| 4) Do not talk to anyone | <input type="checkbox"/> |
| 5) Fight with the people around | <input type="checkbox"/> |
| 6) Withdraw <i>(go away from a place)</i> from people | <input type="checkbox"/> |
| 7) Withdraw <i>(go away from a place)</i> from activity | <input type="checkbox"/> |
| 8) Go to activity of choice | <input type="checkbox"/> |
| 9) Go to sleep | <input type="checkbox"/> |
| 10) Share with friends | <input type="checkbox"/> |
| 11) Do relaxation <i>(become less tense)</i> / mediation technique | <input type="checkbox"/> |
| 12) Any other please specify _____ | |
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8. What are the reasons of conflicts with the parents ?

(You can tick more than one option)

- 1) Helping in household work
- 2) Selection of music
- 3) Selection of TV channel
- 4) Spending time in viewing T.V.
- 5) Choice of subjects/career
- 6) Parental pressure regarding academic work/school work
- 7) Not able to fulfill parental expectations
- 8) Following family rules & religious beliefs
- 9) Attending social functions like pooja or marriages or parties
- 10) Dissatisfaction with pocket money
- 11) Selection of friends
- 12) Spending time with friends
- 13) Long phone calls
- 14) Any other please specify : _____

Which of these conflicts leads to stress?

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9. With siblings, what are the reasons for conflicts?

(You can tick more than one option)

- 1) Sharing of articles / room
- 2) Sharing of household chores/work
- 3) Parental preference for the sibling
- 4) Comparison between brothers & sisters
- 5) Academic competition with brothers & sisters
- 6) Teasing each other
- 7) Complaining about each other
- 8) Any other please specify : _____

Which of these conflicts leads to stress?

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10 Do you like yourself ?

Yes No

14 Regarding these areas do you seek help from some body ?

Yes

No

15 If yes – then from whom do you seek help? *(You can tick more than one option)*

1) Teachers

2) Parents

3) Elder siblings

4) Friends

5) Any other please specify _____

Log of significant learning

1. My personal learning from the session today.
2. How do I plan to use this learning? (In personal /
Social / Family / Classroom set up)
3. Examples of new behaviors as a result of new
learning?
4. How do I feel about the new behavior mentioned
under no. 3 ?