



Depression Self-Assessment

The 18 items below refer to how you have felt and behaved DURING THE PAST WEEK. For each item, indicate the extent to which it is true, by checking the appropriate box next to the item.

1. I do things slowly.
2. My future seems hopeless.
3. It is hard for me to concentrate on reading.
4. The pleasure and joy has gone out of my life.
5. I have difficulty making decisions.
6. I have lost interest in aspects of life that used to be important to me.
7. I feel sad, blue, and unhappy.
8. I am agitated and keep moving around.
9. I feel fatigued.
10. It takes great effort for me to do simple things.
11. I feel that I am a guilty person who deserves to be punished.
12. I feel like a failure.
13. I feel lifeless -- more dead than alive.
14. My sleep has been disturbed -- too little, too much, or broken sleep.
15. I spend time thinking about HOW I might kill myself.

16. I feel trapped or caught.

17. I feel depressed even when good things happen to me.

18. Without trying to diet, I have lost, or gained, weight.

If you can answer yes to at least seven of these questions, you may be clinically depressed and could benefit from therapy.