2. Please indicate whether the following is contributing to being emotionally upset:

[ ] NO  [ ] YES  

### Practical Problems
- [ ] Housing
- [ ] Insurance
- [ ] Work/School
- [ ] Transportation
- [ ] Childcare

### Family Problems
- [ ] Dealing with partner
- [ ] Dealing with children

### Emotional Problems
- [ ] Worry
- [ ] Fears
- [ ] Sadness
- [ ] Depression
- [ ] Nervousness

### Physical Problems
- [ ] Pain
- [ ] Nausea
- [ ] Fatigue
- [ ] Sleep
- [ ] Getting around
- [ ] Bathing/dressing
- [ ] Breathing
- [ ] Mouth Sores
- [ ] Eating
- [ ] Indigestion
- [ ] Constipation
- [ ] Diarrhea
- [ ] Changes in urination
- [ ] Fevers
- [ ] Skin dry/itchy
- [ ] Nose dry/congested
- [ ] Tingling in hands/feet
- [ ] Feeling swollen
- [ ] Sexual

### Spiritual/Religious Concerns
- [ ] Relating to God
- [ ] Loss of Faith

---

Other Problems:

________________________________________________________________________________________________________________________________________________________

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**Helpless/Hopeless and Fighting Spirit Scales**

**Instructions to complete assessment:** A number of statements are given below which describe people's feeling of hope. Please mark with a '√' or an 'x' your answer to each statement that indicates how far it applies to you at the present. For example, if the statement definitely does not apply to you then you should answer '1'.

<table>
<thead>
<tr>
<th>Statement</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>I see my illness as a challenge</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I feel like giving up</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I feel completely at a loss about what to do</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I try to fight the illness</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I can't handle it</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I am not hopeful about the future</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I feel there is nothing I can do to help myself</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I think it is the end of the world</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>I am very optimistic</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I feel that life is hopeless</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>I can't cope</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I am determined to fight this disease</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>


**Instructions to interpret assessment:** Add up all of your answers. If your score is less than 25, you should discuss your answers with your health professional.