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Individual Development and Adaptation

STRESS, HEALTH AND WELL-BEING IN MIDLIFE

The 2004 stress study on men. Technical report.

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The reseaarch program Individual Development and Adaptation (IDA) was Initiated by David Magnusson in 1964 and was led by him until 1996 when Lars R. Bergman became the principal investigator.

Reports from the project Individual Development and Adaptation published from 2000 and onwards:

No. 70 Bergman, L.R. Women's health, work, and education in a life-span perspective. Technical report 1: Theoretical background and overview of the data collection. *(January 2000)*

No. 71 Isaksson, K., Johansson, G., Lindroth, S., & Sverke, M. Women's health, work, and education in a life-span perspective. Technical report 2: The coding of work biographies. *(November 2000)*

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No. 84 Wångby, M. Questions about life-style in 2002. Follow-up survey on the 1998 data collection among females in the IDA-project. Technical report. *(March 2004)*

No. 85 Trost, K., & Bergman, E. Men's work and well-being in a lifespan perspective. Technical report from the 2002-2003 data collection. *(September 2004)*

No. 86 Lindfors, P. Questions on women's situation, life satisfaction and health. The 2004 IDA follow-up survey on women. Technical report. *(October 2004)*

No. 87 Lindfors, P. Stress, health and well-being in midlife. The 2004 stress study on men. Technical report. *(December 2005)*

Foreword

This technical report describes a stress study of a subsample of the main group of males in the longitudinal research program Individual Development and Adaptation (IDA). The purpose of the study was to investigate psychological and physiological stress as related to well-being in middle-aged men. The report is written by Petra Lindfors.

The data collection was supported by grants to Ulf Lundberg from the Swedish Council for Working Life and Social Research and to Lars R. Bergman from the Swedish Research Coucil.

Stockholm, December 14, 2005

Lars R. Bergman
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ABSTRACT

This technical report describes the 2004 stress study on a subsample of men within the longitudinal research program Individual Development and Adaptation (IDA). The purpose of this study was to investigate psychological and physiological stress as related to well-being in middle-aged men. Self-ratings in questionnaires and salivary samples were collected via a mail survey that was sent to a subsample (n = 161) of those men who participated in the 2002-2003 follow-up study (N = 393). About 35.8% of the eligible men volunteered to participate in the stress study. The report covers details on the data collection procedure, the measures included in the questionnaire, frequency tables for each measure and drop-out. In addition, the report summarizes findings on salivary cortisol, stress and well-being.

Keywords: IDA, follow-up, men, salivary cortisol, stress, well-being

BACKGROUND

This is the technical report on the 2004 stress study of the men in the longitudinal research program Individual Development and Adaptation. The purpose of the survey was to study the stress in then about 49 year-old men.

The IDA-program

The longitudinal research program *Individual Development and Adaptation* (IDA) was initiated in the early 1960s by David Magnusson who remained principal investigator for more than 30 years. In 1996, Lars R. Bergman became the principal investigator, with Magnusson still taking active part in the program.

The first data collection within the IDA-program was performed in 1965 and included all children who were at the time about 10 years old and attended the third grade in compulsory school in Örebro during the terms of 1964/65. All children who subsequently enrolled in these classes in the 6th, 8th or 9th grades were also included in this cohort, which is referred to as *the main group*. The main group included about 1400 boys and girls and has now been followed up to middle-age.

The 2002-2003 follow-up study on men

In 2003, when most men in the IDA main group were about 48-49 years old, all men were contacted and asked to participate in a follow-up study. The purpose of this follow-up study was to collect information about the men's life situation, life satisfaction and health in midlife (for a detailed description, see Trost & Bergman, 2004). The 2002-2003 follow-up on men mostly reiterated questions posed to the women in 1998 investigation (for further details on the 1998 data collection, see Bergman, 2000; Näswall et al., 2002).

THE 2004 STRESS STUDY

In 2004, a subsample of the men who had participated in the 2002-2003 follow-up study was contacted and was asked to participate in a stress study. The purpose of that study was to collect information about psychological and physiological stress as related to well-being in midlife. To fulfil this purpose a questionnaire was constructed reiterating questions on health and well-being included in the 2002-2003 follow-up of the IDA men. The same questions were asked both at the time of the 2002-2003 data collection and in this follow-up. Additionally, the questionnaire included specific questions on the sampling of physiological data that was carried out by the participants. This study and the questionnaire will be referred to as *the 2004 stress study on men*; the complete questionnaire is included in Statistics Sweden (2005, Appendix 1:2).

The 2004 stress study on men was carried out by Statistics Sweden (for further details, see Statistics Sweden, 2005) with Michael Nilsson being responsible for the data collection and Fredrik Hult serving as production manager.

The 2004 stress study on men

The questionnaire that was distributed to the study participants included the following three sections: 1) details on how to collect physiological data on stress, 2) questions on the sampling procedure, and 3) questions on demographics, stress, health and well-being.

The first section consisted of detailed instructions on when and how study participants were to collect physiological samples. More specifically, all study participants were asked to provide samples of salivary cortisol immediately at awakening, 30 minutes after awakening and at 6 pm. Additionally, all participants were asked to, over a two week period, provide samples during a weekday (i.e., workday) and

during a day off work (i.e., during the weekend). Each individual was free to decide on the ordering between these two days. Table 1 summarizes the study protocol for saliva sampling.

Table 1. Study protocol for sampling of salivary cortisol on and off work.

Sample No.	Sampling schedule
1	Immediately after awakening, which means that a saliva sample is taken as soon as possible after waking up; the participant's eyes are open and suffienciently awake to provide a sample
2	30 minutes after the first sample
3	6 pm or as soon as close as possible to this time

All participants received a package for saliva sampling including six plastic tubes each containing a cotton roll. When sampling saliva, the cotton roll is removed from inside the tube and chewed on for a few minutes until it is thoroughly wet with saliva. Then the cotton roll is reinserted into the plastic tube. Finally, the plastic tube is sealed and stored in room temperature or refrigerator until all six samples have been collected. Furthermore, participants were instructed to refrain from intense physical activity the day before sampling. They were also instructed not to brush their teeth, eat, smoke or snuff the hour before sampling and not to sleep between sampling. These instructions were adapted from those used in previous studies and they are in line with common practice within this research area (Lindfors, 2002).

The second section of the questionnaire included detailed questions on the following parts of the sampling procedure: 1) time and date for sampling, 2) details on the sampling procedure, and 3) additional information (Table 2).

Table 2. Overview of questions on saliva sampling on and off work.

Area Content of question	Question No. Work	 Non-work
1) Time and date	1	11
Today's date	2	12
Time for awakening		
2) Details on sampling procedure		
Sample 1: Time	3	13
Sample 1: Code on tube	4	14
Sample 2: Time	5	15
Sample 2: Code on tube	6	16
Sample 3: Time	7	17
Sample 3: Code on tube	8	18
3) Additional information		
Consumption of coffee, tea, other beverage containing coffeine	9a	19a
Time	9b	19b
Amount consumed	9c	19c
Smoking or snuffing	10a	20a
Time	10b	20b
Amount smoked/snuffed	10c	20c

Table 3 summarizes the third section of the questionnaire which covered two areas: 1) demographic details and 2) stress, health and well-being. An in-depth description of the measures included in this section is provided in Appedix 1 which also describes how the different measures are related to those in previous questionnaires distributed within the IDA-program.

Table 3. Overview of the questionnaire for the 2004 stress study on men.

Area Content of question* or instrument	Question
1) Demographic details	21–24
Legal marital status	21
Grandchildren	22
Highest completed formal education	23
Current occupation	24.1–24.14
2) Stress, health and well-being	25
Current medication	25
Life event scale	26.1–26.36
Suffered from burnout	26.37
Ryff's Psychological Well-being Scales	27a–r

*Content of question is specified for those items not being included in longer measures.

Pre-testing of questionnaire

Prior to the study, four middle-aged men (one highly educated, one on long-term sick-leave, one blue-collar worker and one white-collar worker) not included in the IDA-study sample but belonging to a convenience sample were prior to the study asked to read through the instructions for measurement of salivary cortisol, provide one sample each (these saliva samples were not analyzed), answer the questions on saliva sampling and fill in the questionnaire. They were asked to do this at home and to take down in writing all inconsistencies experienced. After completing this procedure, brief individual interviews were conducted with the men. During this interview, questions were asked on the basis of their notes and comments. If they had had no spontaneous comments on the questionnaire and the instructions, they were asked additional questions concerning these issues (e.g., Can you please describe how to provide a saliva sample? What do you have to think about before sampling? Any inconsistencies in the instructions? If you look at the items in the questionnaire, what did you think about them? What do you think of the wording of these items? Any inconsistencies?).

Sample and response rate in the 2004 stress study on men

The IDA main group includes 519 men, which at least at one point in time belonged to the cohort (i.e., lived in Örebro and were in the appropriate grade). Of the men in the IDA main group, 479* were considered eligible for the 2002-2003 data collection. Of these eligible men, 393** (82%) volunteered to participate in the 2002-2003 follow-up. Since the budget was restricted, the 2004 stress study on men included a subsample of those men who participated in the 2002-2003 follow-up. To participate in the 2004 stress study, the following critera had to be fulfilled: 1) answered all questions included in the Ryff's Psychological Well-being Scales, 2) not on current medication and 3) not suffering from any chronic disease such as diabetes or rheumatoid diseases. The study aim included the linking of psychological well-being and physiological stress which necessitated the first criterion. The second and third critera were necessary since medication and chronic disease are known to influence cortisol secretion. Of the 393 men, 316 met the criteria and on the basis of their scores on Ryff's Psychological Well-being Scales, 161 (approximately 50%) individuals with high (total score above 89) and low (total score below 76) psychological well-being were included in the final sample.

The IDA research team distributed information concerning these 161 individuals to Statistics Sweden. Statistics Sweden matched this information with the Total Population Register system (TPR; Registret över totalbefolkningen [RTB]) to retrieve the correct postal addresses and background factors for the sample.

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* The budget for the 2002-2003 follow-up was limited and thus the data collection was restricted to include only the original cohort in 1965. Of the 519 men in the main group, 479 were eligible for the 2002-2003 data collection. Of the men not eligible, 8 were not included in the TPR, 9 no longer wished to participate in the IDA study, 22 were deceased, and 1 had a protected identity (Trost & Bergman, 2004).

** This figure does not cover partial drop-out that resulted from study participants not returning leave-afters. For further details on drop-out, see Trost and Bergman, 2004.

Statistics Sweden concluded that 1 man was no longer included in the TPR and that the eligible sample included 160 individuals. The questionnaire was distributed to all the eligible men. However, during the data collection, Statistics Sweden was informed that another man was no longer eligible and the final sample consisted of 159* individuals. Of these 159 individuals, 59 returned their questionnaires and 57 (35.8%) of these questionnaire were completed. However, only 44 (27.7%) returned samples of saliva. Individuals returning questionnaires only were reluctant to provide physiological material, referring to the ongoing Swedish debate on longitudinal projects and research ethics, but having participated in the IDA-program since the age of 10 they still wanted to take part in the data collection. Details of response rate during the data collection are presented in Table 4 (Statistics Sweden, 2005).

Table 4. Response rate during data collection.

	Incoming material	
Event	Frequency	Percentage
Package distributed for the first time	28	17.6
Combined thank-you and reminder	16	10.1
First reminder with new package enclosed	6	3.8
Second combined thank-you and reminder	6	3.8
Second reminder with new package enclosed	3	1.9

Note. Figures in Table 4 include study participants who returned their questionnaires. Two of these questionnaires were not completed.
Source: Statistics Sweden (2005).

Drop-out

Reasons for drop-out are presented in Table 5. The majority of the non-respondents did not return their questionnaires (Statistics Sweden, 2005).

Table 5. Reasons for drop-out.

	Drop-out	
Reason	Number of individuals	Percentage
Unreturned questionnaire*	95	59.7
Returned by postal office**	1	0.6
Declined participation***	4	2.5
Returned questionnaire	2	1.2

* 'Ej avhörd'.
** 'Postretur'.
***'Avböjd medverkan'.

*Addresses and information on background factors were retrieved from the TPR in November 2004. Of the 161 individuals included in the original sample, 2 were deceased, leaving 159 eligible men (Statistics Sweden, 2005). However, Statistics Sweden did not pass on information on the identities of the deceased men and consequently they are included in the frequency tables in Appendix 2.

For reason of comparison, background factors (i.e., country of birth, legal marital status and income) for the respondents and the full sample respectively are presented in Table 6. There were only minor differences in these factors.

Table 6. Background factors (country of birth, legal marital status, income) for respondents and full sample in the 2004 stress study on men.

	Respondents*		Full sample	
	n	%	*n*	%
Country of birth				
Sweden	58	98.3	158	99.4
Other	1	1.7	1	0.6
Legal marital status				
Married	33	55.9	92	57.9
Unmarried	14	23.7	38	23.9
Divorced	12	20.3	29	18.2
Income (Swedish krona)				
None	1	1.7	1	0.6
1–84 999	2	3.4	4	2.5
85 000–159 999	5	8.5	11	6.9
160 000–234 999	9	15.3	30	18.9
235 000–309 999	19	32.2	44	27.7
310 000–	23	39.0	69	43.4

* Two of the individuals included in this group did not fill in their questionnaire but returned them to Statistics Sweden.
Source: Statistics Sweden (2005).

Furthermore, statistical analyses (*t*-tests) were performed to investigate the representativeness of the study participants. Included in these initial analyses were key variables relevant for the overall aim of the 2004 stress study: Ryff's Psychological Well-being Scales (autonomy, environmental mastery, personal growth, positive relations with others, purpose in life and self-acceptance), self-rated health, an overall rating of one's current life conditions and an overall rating of one's currenct economical situation. These variables came from the 2002-2003 follow-up on men. Comparisons between those individuals who provided completed their questionnaires (n = 57) and non-participants showed no significant differences on any of these variables. Additional comparisons included those individuals who provided questionnaire data and saliva samples (n = 44) and the remaining study group (non-respondents and those who completed questionnaires only)*.

* Men (n = 34) providing complete samples were also compared with the others and these analyses produced results similar to those including the 44 men who provided salivary samples.

Statistical analyses showed that men who provided saliva samples had significantly higher levels of self-acceptance and better self-rated health than did the other individuals. To conclude, these analyses show that men who took part in all parts of the 2004 stress study had higher self-rated health than did others. However, the sample does not seem severely biased on these health-related measures. More importantly, there were no significant differences in overall ratings of one's current life conditions or in ratings of one's current economical situation.

Data collection

Statistics Sweden carried out the data collection as a mail survey with four reminders (Table 4). In November 2005, all men received a package including the questionnaire, an information letter, instructions on salivary sampling, six tubes for sampling of salivary cortisol, a prepaid envelope for returning the questionnaire and salivary samples, and a leaflet on stress and restoration in middle-aged men. Seven to ten days after the first package was mailed to the study participants, a combined thank-you and reminder letter was distributed to all participants. Enclosed with the subsequent reminder was a new package. Reminders were then mailed with intervals of seven to ten days. The final reminder included a complete package and was distributed at the end on April 2005. Apart from the first combined reminder and thank-you letter, reminders were only sent to those men who had not yet returned their material to Statistics Sweden. The returned material, including questionnaires and saliva samples, were successively forwarded to the IDA research team at the Department of Psychology, Stockholm University. The data collection ended in May 2005*.

Information about confidentiality

Attached to the questionnaire was an information letter describing the overall aim of the study and research ethics** and confidentiality. In the information letter, the study participants were informed that Statistics Sweden carried out the data collection and that the data provided by the study participants along with a data file, including background factors for the sample would be transferred to the IDA research team. Furthermore, it was pointed out that all staff at Statistics Sweden were obligated to observe professional confidentiality and that there is a very strict secrecy code followed within the IDA-program to ensure confidentiality. The letter is included in Statistics Sweden (2005, Appendix 1:1).

Data processing

Data were entered manually by Nordic Tab*** then distributed to the IDA-research team in the form of two Excel-files. These Excel-files were subsequently converted into SPSS and frequencies of all items were checked and impossible values were rectified.

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* The data collection started November 4, 2004 and was ended May 31, 2005.

** An ethical committee approved of the study.

*** Information about Nordic Tab can be found at: http://www.nordictab.se/

Coding

The code numbers used for the response alternatives on each item correspond to those included in the questionnaire (Statistics Sweden, 2005, Appendix 1:2). The questionnaire also included open-ended questions where the respondents were asked to write down their answers. All open response format questions including text written by the respondent were coded as '1'. The data file also includes code values for non-responses and missing data. Both non-responses to open response format questions and missing data were coded as blank.

Analysis of salivary cortisol

At Stockholm University, the saliva samples were immediately frozen (-18°C) until later thawed, centrifuged (3500 rpm in 40 sec) and analysed for cortisol in a randomized order using radioimmunoassay (RIA) with commercially available kits (Orion Diagnostica, Helsinki, Finland): intra-assay precision < 5% (1.7–4.1 %), inter-assay precision < 10% (4.3–9.0 %). Cortisol values were expressed in pmol/ml.

Cortisol

Figure 1 shows cortisol values for all individuals who provided salivary cortisol. All individuals had cortisol values within the normal range. The typical diurnal variations in cortisol levels emerged: lower levels at awakening, higher values 30 min after awakening and lower values in the evening. Additionally, and in line with previous research (Lindfors, 2002), cortisol levels were somewhat higher during workdays.

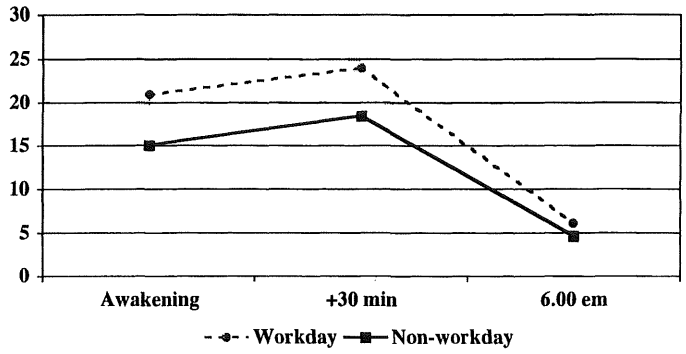

Figure 1. Cortisol values for study participants who provided saliva samples.

Evaluation of the saliva sampling procedure

To evaluate whether the men who took part in all parts of the 2004 stress study and provided complete salivary samples (n = 34) had understood the instructions and behaved accordingly, all diary entries were closely inspected. This inspection showed that all these study participants had provided detailed notes of when they sampled saliva and when they woke up. They also provided detailed information on caffeine and nicotine consumption. All participants were asked to note the date for saliva sampling and examination of the dates showed that most men scheduled their saliva sampling within a time-frame of a couple of days. This means that they sampled saliva a couple of days apart and then returned the material to Statistics Sweden. With respect of the timing of the saliva sampling, participants' notes showed that a majority sampled saliva within a reasonable time period after awakening and then took a second sample about 30 min after the first sample. Most participants took the third sample around 6 pm (median value for the workday and the non-workday) with variations in time most probably being due to the fact that individuals postponed sampling until they had returned home after having spent the day away from home.

Cortisol output is associated with time of awakening (Pruessner et al., 1997) and there were large variations in time of awakening: some men rose very early (around 3 am) on the workday while most others rose around 6 am (range 3.05–8.20 am, median 6.09 am.). In contrast, there was less variation in time of awakening during the non-workday when most participants rose around 8 am (range 6.10–9.55 am, median 8 am.). The fact that some men woke up early may have influenced their cortisol levels but regulating the time of awakening to specific hours would not have been feasible: these individuals are likely to rise early due to shift work and so on and they might not have participated unless they were free to follow their routine. In sum, and given that the self-reports in the diaries are considered valid, all study participants seem to have understood and adhered to the written instructions.

Salivary cortisol, stress and well-being.

The associations between salivary cortisol at different points in time are shown in Table 7. Apart from the evening measures from the non-workday, the expected significant associations between cortisol output at different points in time emerged.

Table 7. Correlations (r_p) between salivary cortisol at different points in time (n = 34).

	1.	2.	3.	4.	5.	6.
Workday						
1. Awakening	1.00					
2. + 30 min	.48**	1.00				
3. 6 pm	.65***	.45**	1.00			
Non-workday						
4. Awakening	.40*	.55***	.56***	1.00		
5. + 30 min	.47**	.54***	.45**	.39*	1.00	
6. 6 pm	.23	.04	.49**	.15	.14	1.00

Note. n = 34 after listwise deletion.

* p <.05, ** p <.01, ***p <.001.

However, in comparison with previous studies on healthy samples (Pruessner et al., 1997), the intercorrelations between cortisol values for the two days were somewhat lower. This is likely to result from the fact that some individuals rose early during the workday but slept longer during the weekend and reflect the diurnal variations in cortisol output. Yet, the non-significant associations found for evening cortisol during the day off work suggests that there were large variations in the timing of this sample as well. Since cortisol values are lower in the evening, variations in time point are expected to produce non-significant associations.

There were no significant associations between stress in terms of number of life events during the past year and various cortisol measures (mean values of cortisol for different points in time across two days and change between morning and evening; these cortisol measures are identical to those in Table 8). Table 8 shows correlations between the different dimensions of Ryff's Psyhological Well-Being Scales and mean values of cortisol output across the two days of measurement. Contrasting previous findings (Lindfors, 2002), there were no significant associations between psychological well-being and cortisol*.

Table 8. Correlations (r_p) between psychological well-being and mean values of cortisol output for different points in time across two days at awakening and change in cortisol output during the day.

	Cortisol measure			
Psychological well-being	Awakening	+30 min	6 pm	Δ morning-evening
Autonomy	.20	.16	.14	−.01
Environmental mastery	.19	.18	.10	.04
Personal growth	.01	−.07	−.29	.06
Positive relations	.13	.04	−.14	.08
Purpose in life	−.11	−.10	−.31	−.04
Self-acceptance	.06	.10	−.04	.07
Total score	.00	.03	−.25	.07

Note. $n = 34$ after listwise deletion. Change in cortisol output was calculated subtracting evening values from values 30 min. after awakening. These values were then log transformed.

* Separate analyses of cortisol measures from the two days of measurement yielded comparable results with respect of stressful life events and psychological well-being. Controlling for time of awakening did not change the results. Education was not associated with cortisol output and controlling for education did not changes the results.

Feedback to study participants

In October 2005, feedback on salivary cortisol levels was distributed to all study participants who had provided saliva samples. Each individual received a letter including a figure (similar to Figure 1) describing individual cortisol values contrasted with corresponding values for all participants. In addition, the feedback letter covered details on how to interpret the individual's cortisol values.

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APPENDIX 1

The 2004 stress study on men: Description of the questionnaire

This appendix describes the single-items and longer measures included in the second section of the questionnaire that covered demographics and measures of stress, health and well-being (Table 3, p. 3). The numbering of items (i.e., Q21) refers to the item number in the questionnaire.

For every item/measure there is a note indicating whether the question is new or taken from previous questionnaires. When an item or a response alternative has been altered from previous questionnaires, it is referred to as a new item. There have been major as well as minor changes and, consequently, everyone who analyzes such new items and relates them to similar items from previous data collections has to consider the potential impact of these changes on the comparability of items from the different data collections.

Table 1. Details on questionnaire in 2004 stress study on men.

Area Item no.	**Area** (questions included) *Content of question* and comment
1)	**Demographics details** (Q21–24)
21	*Legal marital status* Response alternatives: (1) Unmarried, (2) Cohabitant/married, (3) Divorced, (4) Widowed, (5) Other (indicate). *Note:* Q21 is identical to Q1 in the 2004 follow-up on women.
22	*Grandchildren* Response alternatives: (1) No, (2) Yes. *Note:* Q22 is identical to Q3 in the 2004 follow-up on women.
23	*Highest completed educational level* Response alternatives: 1) Elementary school, (2) Vocational upper seconday school (2 years), (3) Post seconday education, (4) Upper secondary economics, engineering, social course (2 years), (5) Upper seconday school education, (6) Studies at university levels but no degree, (7) Degree from university/university college *Note:* Q23 is identical to Q6 in the 2004 follow-up on women

Table 1. Details on questionnaire in 2004 stress study on men cont'd.

Area Item no.	**Area** (questions included) *Content of question* and comment
1)	**Demographics details** (Q21–24)
24	*Current occupation* Employment status? Response alternatives: 1) Full-time work? 2) Part-time work? If working part-time respondent is asked to indicate percentage of fulltime, 3–7) Type of organization within which respondent works, 8) Unemployed or similar, 9) Pensioneer, 10) Student, 11) Managing own household, 12) Sick-leave. Asked to indicate since when, 13) Leave of absence. Asked to indicate since when, 14) Other. Asked to specify. *Note:* Q24 is identical to SCB110B1-B13 in the 2002-2003 follow-up on men.
2)	**Stress, health and well-being** (Q25–27)
25	*Do you currently take any medication that is available on prescription only?* Response alternatives: (1) No, (2) Yes. Asked to specify. *Note:* Q25 is identical to FH04 in the 2002-2003 follow-up on men.
26.1-36	*Life event scale* Key reference: Theorell, T., Lundberg, U., & Lind, E. (1973). Mönstret av levnadsförändringar hos infarktpatienter [Patterns of life changes in patients with myocardial infarction]. *Socialmedicinsk Tidskrift, 4,* 1-6. *Note:* Q26.1-36 are new items.
26.37	*Suffered from burnout* *Note:* Q26.27 is identical to Q90 in the 2004 follow-up on women. Q26.27 is similar to FH07 in the 2002-2003 follow-up on men: the response alternatives are different.
27a–r	*Ryff's Psychological Well-Being Scales* *Note:* Q80a–r are identical to FHM12a-r the 2002-2003 follow-up on men.

APPENDIX 2

The stress study on men: Frequency tables.

This appendix presents frequency tables for the single-items and scales included in the 2004 stress study on men. However, the items (Q1-8 and 11-18) on the timing and coding of saliva samples in the section on saliva sampling are not included since these items provide no meaningful frequency data. The numbering of items refers to the item number in the questionnaire. All frequency tables are based on raw data from questionnaires. Note that response alternatives were translated for this appendix, which means they do not necessarily correspond to response alternatives in the original English versions of single-items and scales. For open-ended questions, '1' indicates that there is text in questionnaire. No open-ended responses have been further processed.

Of the 161 individuals included in the original sample, 2 were deceased, leaving 159 eligible men. However, Statistics Sweden did not pass on information on the identities of the deceased men and consequently they are included among the drop-outs ("system missing") in the frequency tables in this Appendix.

Questions on saliva sampling: Workday

	Measure	Frequency	Percent	Valid Percent	Cumulative Percent
9a. *Additional details: Have you consumed coffe, tea or any other beverage containing caffeine?*					
Valid	(1) No	1	.6	1.8	1.8
	(2) Yes	54	33.5	98.2	100.0
	Total	55	34.2	100.0	
Missing	System	106	65.8		
Total		161	100.0		
9b. *Additional details: Caffeine intake, time*					
Valid	(0) No text	3	1.9	5.6	5.6
	(1) Text	51	31.7	94.4	100.0
	Total	54	33.5	100.0	
Missing	System	107	66.5		
Total		161	100.0		
9c. *Additional details: Caffeine intake, amount*					
Valid	(1) Text	54	33.5	100.0	100.0
Missing	System	107	66.5		
Total		161	100.0		
10a. *Additonal details: Have you smoked/snuffed today?*					
Valid	(1) No	36	22.4	65.5	65.5
	(2) Yes	19	11.8	34.5	100.0
	Total	55	34.2	100.0	
Missing	System	106	65.8		
Total		161	100.0		
10b. *Additional details: Nicotine consumption, time*					
Valid	(0) No text	1	.6	5.3	5.3
	(1) Text	18	11.2	94.7	100.0
	Total	19	11.8	100.0	
Missing	System	142	88.2		
Total		161	100.0		

Questions on saliva sampling: Workday cont'd

	Measure	Frequency	Percent	Valid Percent	Cumulative Percent
10c. *Additional details: Nicotine consumption, amount*					
Valid	3	1	.6	5.6	5.6
	4	2	1.2	11.1	16.7
	5	1	.6	5.6	22.2
	6	2	1.2	11.1	33.3
	7	2	1.2	11.1	44.4
	8	1	.6	5.6	50.0
	10	5	3.1	27.8	77.8
	15	2	1.2	11.1	88.9
	18	1	.6	5.6	94.4
	20	1	.6	5.6	100.0
	Total	18	11.2	100.0	
Missing	System	143	88.8		
Total		161	100.0		

Questions on saliva sampling: Non-workday

	Measure	Frequency	Percent	Valid Percent	Cumulative Percent
19a. *Additional details: Have you consumed coffe, tea or any other beverage containing caffeine?*					
Valid	(1) No	3	1.9	5.6	5.6
	(2) Yes	51	31.7	94.4	100.0
	Total	54	33.5	100.0	
Missing	System	107	66.5		
Total		161	100.0		
19b. *Additional details: Caffeine intake, time*					
Valid	(0) No text	1	.6	2.0	2.0
	(1) Text	50	31.1	98.0	100.0
	Total	51	31.7	100.0	
Missing	System	110	68.3		
Total		161	100.0		
19c. *Additional details: Caffeine intake, amount*					
Valid	(0) No text	1	.6	2.0	2.0
	(1) Text	50	31.1	98.0	100.0
	Total	51	31.7	100.0	
Missing	System	110	68.3		
Total		161	100.0		
20a. *Additonal details: Have you smoked/snuffed today?*					
Valid	(1) No	35	21.7	64.8	64.8
	(2) Yes	19	11.8	35.2	100,0
	Total	54	33.5	100.0	
Missing	System	107	66.5		
Total		161	100.0		

Questions on saliva sampling: Non-workday cont'd

	Measure	Frequency	Percent	Valid Percent	Cumulative Percent
20b. *Additional details: Nicotine consumption, time*					
Valid	(0) No text	2	1.2	10.5	10.5
	(1) Text	17	10.6	89.5	100.0
	Total	19	11.8	100.0	
Missing	System	142	88.2		
Total		161	100.0		
20c. *Additional details: Nicotine consumption, amount*					
Valid	3	1	.6	5.6	5.6
	4	2	1.2	11.1	16.7
	5	1	.6	5.6	22.2
	6	4	2.5	22.2	44.4
	10	5	3.1	27.8	72.2
	15	3	1.9	16.7	88.9
	18	1	.6	5.6	94.4
	20	1	.6	5.6	100.0
	Total	18	11.2	100.0	
Missing	System	143	88.8		
Total		161	100.0		

Demographic details

	Measure	Frequency	Percent	Valid Percent	Cumulative Percent
21. *Legal marital status*					
Valid	(1) Unmarried	6	3.7	10.5	10.5
	(2) Married/cohabitant	42	26.1	73.7	84.2
	(3) Divorced	5	3.1	8.8	93.0
	(5) Other (indicate)	4	2.5	7.0	100.0
	Total	57	35.4	100.0	
Missing	System	104	64.6		
Total		161	100.0		
22. *Grandchildren?*					
Valid	(1) No	51	31.7	89.5	89.5
	(2) Yes	6	3.7	10.5	100.0
	Total	57	35.4	100.0	
Missing	System	104	64.6		
Total		161	100.0		

Demographic details cont'd

	Measure	Frequency	Percent	Valid Percent	Cumulative Percent
23. *Highest completed formal education*					
Valid	(1) Elementary school	4	2.5	7.0	7.0
	(2) Vocational upper seconday school (2years)	4	2.5	7.0	14.0
	(4) Upper secondary economics, engineering, social course (2 years)	6	3.7	10.5	24.6
	(5) Upper seconday school education	10	6.2	17.5	42.1
	(6) Studies at university levels but no degree	5	3.1	8.8	50.9
	(7) Degree from university/university college	28	17.4	49.1	100.0
	Total	57	35.4	100.0	
Missing	System	104	64.6		
Total		161	100.0		
24.1. *Current occupation: Full-time*					
Valid	1	44	27.3	100.0	100.0
Missing	System	117	72.7		
Total		161	100.0		
24.2. *Current occupation: Part-time*					
Valid	1	3	1.9	100.0	100.0
Missing	System	158	98.1		
Total		161	100.0		
24.2b. *Current occupation: Part-time, percent of full-time*					
Valid	70	1	.6	33.3	33.3
	80	1	.6	33.3	66.7
	100	1	.6	33.3	100.0
	Total	3	1.9	100.0	
Missing	System	158	98.1		
Total		161	100.0		
24.3. *Farming*					
Valid	1	1	.6	100.0	100.0
Missing	System	160	99.4		
Total		161	100.0		
24.4. *Help in farming*					
Missing	System	161	100.0		
24.5. *Self-employed*					
Valid	1	13	8.1	100.0	100.0
Missing	System	148	91.9		
Total		161	100.0		

Demographic details cont'd

Measure		Frequency	Percent	Valid Percent	Cumulative Percent
24.6. *Help in family business*					
Missing	System	161	100.0		
24.7. *Art work*					
Valid	1	3	1.9	100.0	100.0
Missing	System	158	98.1		
Total		161	100.0		
24.8. *Unemployed*					
Valid	1	1	.6	100.0	100.0
Missing	System	160	99.4		
Total		161	100.0		
24.9. *Pensioneer*					
Valid	1	2	1.2	100.0	100.0
Missing	System	159	98.8		
Total		161	100.0		
24.10. *Student*					
Missing	System	161	100.0		
24.11. *Managing own household*					
Valid	1	7	4.3	100.0	100.0
Missing	System	154	95.7		
Total		161	100.0		
24.12. *On sick-leave*					
Valid	1	2	1.2	100.0	100.0
Missing	System	159	98.8		
Total		161	100.0		
24.12b. *On sick-leave since when (years)*					
Valid	1.67	1	.2	50.0	50.0
	7.00	1	.2	50.0	100.0
	Total	2	.4	100.0	
Missing	System	508	99.6		
Total		510	100.0		
24.13. *Leave of absence*					
Valid	1	1	.6	100.0	100.0
Missing	System	160	99.4		
Total		161	100.0		
24.13b. *On leave of absence since when (years)*					
Valid	7.00	1	.2	100.0	100.0
Missing	System	509	99.8		
Total		510	100.0		

Demographic details cont'd

	Measure	Frequency	Percent	Valid Percent	Cumulative Percent
24.14. *Other*					
Valid	1	2	1.2	100.0	100.0
Missing	System	159	98.8		
Total		161	100.0		

Stress, health and well-being

	Measure	Frequency	Percent	Valid Percent	Cumulative Percent
25. *Medication?*					
Valid	(1) No	49	30.4	87.5	87.5
	(2) Yes	7	4.3	12.5	100.0
	Total	56	34.8	100.0	
Missing	System	105	65.2		
Total		161	100.0		
25b. *Medication specified*					
Valid	1	6	3.7	100.0	100.0
Missing	System	155	96.3		
Total		161	100.0		
26.1. *Life events: Job change*					
Valid	(1) No	51	31.7	89.5	89,5
	(2) Yes	6	3.7	10.5	100.0
	Total	57	35.4	100.0	
Missing	System	104	64.6		
Total		161	100.0		
26.2. *Life events: Stopped working*					
Valid	(1) No	55	34.2	96.5	96.5
	(2) Yes	2	1.2	3.5	100.0
	Total	57	35.4	100.0	
Missing	System	104	64.6		
Total		161	100.0		
26.3. *Life events:Change in work-schedule*					
Valid	(1) No	50	31.1	89.3	89.3
	(2) Yes	6	3.7	10.7	100.0
	Total	56	34.8	100.0	
Missing	System	105	65.2		
Total		161	100.0		
26.4. *Life events: More responsibility at work*					
Valid	(1) No	47	29.2	82.5	82.5
	(2) Yes	10	6.2	17.5	100.0
	Total	57	35.4	100.0	
Missing	System	104	64.6		
Total		161	100.0		

Stress, health and well-being

	Measure	Frequency	Percent	Valid Percent	Cumulative Percent
26.5. *Life events: Less responsibility at work*					
Valid	(1) No	56	34.8	98.2	98.2
	(2) Yes	1	.6	1.8	100.0
	Total	57	35.4	100.0	
Missing	System	104	64.6		
Total		161	100.0		
26.6. *Life events: Problems with supervisor*					
Valid	(1) No	51	31.7	89.5	89.5
	(2) Yes	6	3.7	10.5	100.0
	Total	57	35.4	100.0	
Missing	System	104	64.6		
Total		161	100.0		
26.7. *Life events: Problems with coworkers or employees*					
Valid	(1) No	50	31.1	87.7	87.7
	(2) Yes	7	4.3	12.3	100.0
	Total	57	35.4	100.0	
Missing	System	104	64.6		
Total		161	100.0		
26.8. *Life events: Unemployed more than a month*					
Valid	(1) No	50	31.1	89.3	89.3
	(2) Yes	6	3.7	10.7	100.0
	Total	56	34.8	100.0	
Missing	System	105	65.2		
Total		161	100.0		
26.9. *Life events: Worklife changes*					
Valid	(1) No	47	29.2	82.5	82.5
	(2) Yes	10	6.2	17.5	100.0
	Total	57	35.4	100.0	
Missing	System	104	64.6		
Total		161	100.0		
26.10. *Life events: Started or ended small jobs*					
Valid	(1) No	55	34.2	96.5	96.5
	(2) Yes	2	1.2	3.5	100.0
	Total	57	35.4	100.0	
Missing	System	104	64.6		
Total		161	100.0		
26.11. *Life events: Work-relates courses or studies*					
Valid	(1) No	47	29.2	82.5	82.5
	(2) Yes	10	6.2	17.5	100.0
	Total	57	35.4	100.0	
Missing	System	104	64.6		
Total		161	100.0		

Stress, health and well-being cont'd

	Measure	Frequency	Percent	Valid Percent	Cumulative Percent
26.12. *Life events: Income changes*					
Valid	(1) No	41	25.5	71.9	71.9
	(2) Yes	16	9.9	28.1	100.0
	Total	57	35.4	100.0	
Missing	System	104	64.6		
Total		161	100.0		
26.13. *Life events:Other economical changes*					
Valid	(1) No	50	31.1	87.7	87.7
	(2) Yes	7	4.3	12.3	100.0
	Total	57	35.4	100.0	
Missing	System	104	64.6		
Total		161	100.0		
26.14. *Life events: Marriage or other partnership?*					
Valid	(1) No	53	32.9	94.6	94.6
	(2) Yes	3	1.9	5.4	100.0
	Total	56	34.8	100.0	
Missing	System	105	65.2		
Total		161	100.0		
26.15. *Life events: Separation or divorce*					
Valid	(1) No	55	34.2	96.5	96.5
	(2) Yes	2	1.2	3.5	100.0
	Total	57	35.4	100.0	
Missing	System	104	64.6		
Total		161	100.0		
26.16. *Life events: Definitely divorced*					
Valid	(1) No	56	34.8	98.2	98.2
	(2) Yes	1	.6	1.8	100.0
	Total	57	35.4	100.0	
Missing	System	104	64.6		
Total		161	100.0		
26.17. *Life events: Conflicts with partner*					
Valid	(1) No	43	26.7	78.2	78.2
	(2) Yes	12	7.5	21.8	100.0
	Total	55	34.2	100.0	
Missing	System	106	65.8		
Total		161	100.0		
26.18. *Life events: Conflicts within family*					
Valid	(1) No	46	28.6	80.7	80.7
	(2) Yes	11	6.8	19.3	100.0
	Total	57	35.4	100.0	
Missing	System	104	64.6		
Total		161	100.0		

Stress, health and well-being cont'd

	Measure	Frequency	Percent	Valid Percent	Cumulative Percent
26.19. *Life events: Conflicts with relatives*					
Valid	(1) No	47	29.2	82.5	82.5
	(2) Yes	10	6.2	17.5	100.0
	Total	57	35.4	100.0	
Missing	System	104	64.6		
Total		161	100.0		
26.20. *Life events: Been separated from partner because of work*					
Valid	(1) No	53	32.9	94.6	94.6
	(2) Yes	3	1.9	5.4	100.0
	Total	56	34.8	100.0	
Missing	System	105	65.2		
Total		161	100.0		
26.21. *Life events: Partner has experienced worklife changes*					
Valid	(1) No	54	33.5	96.4	96.4
	(2) Yes	56	34.8	100.0	
Missing	System	105	65.2		
Total		161	100.0		
26.22. *Life events: Adopted child*					
Valid	(1) No	56	34.8	100.0	100.0
Missing	System	105	65.2		
Total		161	100.0		
26.23. *Life events: Sexual changes*					
Valid	(1) No	56	34.8	98.2	98.2
	(2) Yes	1	.6	1.8	100.0
	Total	57	35.4	100.0	
Missing	System	104	64.6		
Total		161	100.0		
26.24. *Life events: Partner very ill*					
Valid	(1) No	55	34.2	98.2	98.2
	(2) Yes	1	.6	1.8	100.0
	Total	56	34.8	100.0	
Missing	System	105	65.2		
Total		161	100.0		
26.25. *Life events: Partner deceased*					
Valid	(1) No	56	34.8	100.0	100.0
Missing	System	105	65.2		
Total		161	100.0		
26.26. *Life events: Child very ill*					
Valid	(1) No	55	34.2	96.5	96.5
	(2) Yes	2	1.2	3.5	100.0
	Total	57	35.4	100.0	
Missing	System	104	64.6		
Total		161	100.0		

Stress, health and well-being cont'd

	Measure	Frequency	Percent	Valid Percent	Cumulative Percent
26.27. *Life events: Child deceased*					
Valid	(1) No	57	35.4	100.0	100.0
Missing	System	104	64.6		
Total		161	100.0		
26.28. *Life events: Relative very ill*					
Valid	(1) No	49	30.4	86.0	86.0
	(2) Yes	8	5.0	14.0	100.0
	Total	57	35.4	100.0	
Missing	System	104	64.6		
Total		161	100.0		
26.29. *Life events: Relative deceased*					
Valid	(1) No	51	31.7	89.5	89.5
	(2) Yes	6	3.7	10.5	100.0
	Total	57	35.4	100.0	
Missing	System	104	64.6		
Total		161	100.0		
26.30. *Life events: Close friend very ill*					
Valid	(1) No	55	34.2	96.5	96.5
	(2) Yes	2	1.2	3.5	100.0
	Total	57	35.4	100.0	
Missing	System	104	64.6		
Total		161	100.0		
26.31. *Life events: Closed friend deceased*					
Valid	(1) No	55	34.2	96.5	96.5
	(2) Yes	2	1.2	3.5	100.0
	Total	57	35.4	100.0	
Missing	System	104	64.6		
Total		161	100.0		
26.32. *Life events: Moved*					
Valid	(1) No	53	32.9	93.0	93.0
	(2) Yes	4	2.5	7.0	100.0
	Total	57	35.4	100.0	
Missing	System	104	64.6		
Total		161	100.0		
26.33. *Life events: Someone moved into your home*					
Valid	(1) No	57	35.4	100.0	100.0
Missing	System	104	64.6		
Total		161	100.0		
26.34 *Life events: Someone moved from home*					
Valid	(1) No	48	29.8	84.2	84.2
	(2) Yes	9	5.6	15.8	100.0
	Total	57	35.4	100.0	
Missing	System	104	64.6		
Total		161	100.0		

Stress, health and well-being cont'd

	Measure	Frequency	Percent	Valid Percent	Cumulative Percent
26.35. *Life events: Other changes in homesituation*					
Valid	(1) No	47	29.2	82.5	82.5
	(2) Yes	10	6.2	17.5	100.0
	Total	57	35.4	100.0	
Missing	System	104	64.6		
Total		161	100.0		
26.36. *Life events: Changes circle of friends*					
Valid	(1) No	51	31.7	89.5	89.5
	(2) Yes	6	3.7	10.5	100.0
	Total	57	35.4	100.0	
Missing	System	104	64.6		
Total		161	100.0		
26.37. *Burnout*					
Valid	(1) No	51	31.7	94.4	94.4
	(2) Yes	3	1.9	5.6	100.0
	Total	54	33.5	100.0	
Missing	System	107	66.5		
Total		161	100.0		
27a. *Ryff's Psychological Well-being Scales: In charge*					
Valid	(1) Disagree strongly	1	.6	1.8	1.8
	(2) Disagree moderately	3	1.9	5.3	7.0
	(3) Disagree slightly	3	1.9	5.3	12.3
	(4) Agree slightly	5	3.1	8.8	21.1
	(5) Agree moderately	31	19.3	54.4	75.4
	(6) Agree strongly	14	8.7	24.6	100.0
	Total	57	35.4	100.0	
Missing	System	104	64.6		
Total		161	100.0		
27b. *Ryff's Psychological Well-being Scales: Pleased*					
Valid	(1) Disagree strongly	3	1.9	5.3	5.3
	(2) Disagree moderately	3	1.9	5.3	10.5
	(3) Disagree slightly	4	2.5	7.0	17.5
	(4) Agree slightly	13	8.1	22.8	40.4
	(5) Agree moderately	22	13.7	38.6	78.9
	(6) Agree strongly	12	7.5	21.1	100.0
	Total	57	35.4	100.0	
Missing	System	104	64.6		
Total		161	100.0		

Stress, health and well-being cont'd

	Measure	Frequency	Percent	Valid Percent	Cumulative Percent
27c. Ryff's Psychological Well-being Scales: Maintaining close relationships					
Valid	(1) Disagree strongly	21	13.0	36.8	36.8
	(2) Disagree moderately	24	14.9	42.1	78.9
	(3) Disagree slightly	7	4.3	12.3	91.2
	(4) Agree slightly	2	1.2	3.5	94.7
	(5) Agree moderately	2	1.2	3.5	98.2
	(6) Agree strongly	1	.6	1.8	100.0
	Total	57	35.4	100.0	
Missing	System	104	64.6		
Total		161	100.0		
27d. Ryff's Psychological Well-being Scales: Demands of everyday life					
Valid	(1) Disagree strongly	20	12.4	35.1	35.1
	(2) Disagree moderately	27	16.8	47.4	82.5
	(3) Disagree slightly	4	2.5	7.0	89.5
	(4) Agree slightly	3	1.9	5.3	94.7
	(5) Agree moderately	3	1.9	5.3	100.0
	Total	57	35.4	100.0	
Missing	System	104	64.6		
Total		161	100.0		
27e. Ryff's Psychological Well-being Scales: One day at a time					
Valid	(1) Disagree strongly	3	1.9	5.3	5.3
	(2) Disagree moderately	17	10.6	29.8	35.1
	(3) Disagree slightly	19	11.8	33.3	68.4
	(4) Agree slightly	7	4.3	12.3	80.7
	(5) Agree moderately	10	6.2	17.5	98.2
	(6) Agree strongly	1	.6	1.8	100.0
	Total	57	35.4	100.0	
Missing	System	104	64.6		
Total		161	100.0		
27f. Ryff's Psychological Well-being Scales: Managing responsibilities					
Valid	(3) Disagree slightly	7	4.3	12.3	12.3
	(4) Agree slightly	9	5.6	15.8	28.1
	(5) Agree moderately	26	16.1	45.6	73.7
	(6) Agree strongly	15	9.3	26.3	100.0
	Total	57	35.4	100.0	
Missing	System	104	64.6		
Total		161	100.0		
27g. Ryff's Psychological Well-being Scales: New experiences					
Valid	(1) Disagree strongly	2	1.2	3.5	3.5
	(2) Disagree moderately	6	3.7	10.5	14.0
	(3) Disagree slightly	10	6.2	17.5	31.6
	(4) Agree slightly	11	6.8	19.3	50.9
	(5) Agree moderately	15	9.3	26.3	77.2
	(6) Agree strongly	13	8.1	22.8	100.0
	Total	57	35.4	100.0	
Missing	System	104	64.6		
Total		161	100.0		

Stress, health and well-being cont'd

	Measure	Frequency	Percent	Valid Percent	Cumulative Percent
27h. *Ryff's Psychological Well-being Scales: Like personality*					
Valid	(2) Disagree moderately	4	2.5	7.1	7.1
	(3) Disagree slightly	7	4.3	12.5	19.6
	(4) Agree slightly	16	9.9	28.6	48.2
	(5) Agree moderately	23	14.3	41.1	89.3
	(6) Agree strongly	6	3.7	10.7	100.0
	Total	56	34.8	100.0	
Missing	System	105	65.2		
Total		161	100.0		
27i. *Ryff's Psychological Well-being Scales: Influenced by strong opinions*					
Valid	(1) Disagree strongly	11	6.8	19.3	19.3
	(2) Disagree moderately	27	16.8	47.4	66.7
	(3) Disagree slightly	12	7.5	21.1	87.7
	(4) Agree slightly	5	3.1	8.8	96.5
	(5) Agree moderately	1	.6	1.8	98.2
	(6) Agree strongly	1	.6	1.8	100.0
	Total	57	35.4	100.0	
Missing	System	104	64.6		
Total		161	100.0		
27j. *Ryff's Psychological Well-being Scales: Disappointed*					
Valid	(1) Disagree strongly	23	14.3	40.4	40.4
	(2) Disagree moderately	22	13.7	38.6	78.9
	(3) Disagree slightly	6	3.7	10.5	89.5
	(4) Agree slightly	3	1.9	5.3	94.7
	(5) Agree moderately	3	1.9	5.3	100.0
	Total	57	35.4	100.0	
Missing	System	104	64.6		
Total		161	100.0		
27k. *Ryff's Psychological Well-being Scales: Giving person*					
Valid	(1) Disagree strongly	1	.6	1.8	1.8
	(2) Disagree moderately	9	5.6	15.8	17.5
	(3) Disagree slightly	11	6.8	19.3	36.8
	(4) Agree slightly	14	8.7	24.6	61.4
	(5) Agree moderately	18	11.2	31.6	93.0
	(6) Agree strongly	4	2.5	7.0	100.0
	Total	57	35.4	100.0	
Missing	System	104	64.6		
Total		161	100.0		
27l. *Ryff's Psychological Well-being Scales: Confident*					
Valid	(2) Disagree moderately	4	2.5	7.0	7.0
	(3) Disagree slightly	9	5.6	15.8	22.8
	(4) Agree slightly	13	8.1	22.8	45.6
	(5) Agree moderately	22	13.7	38.6	84.2
	(6) Agree strongly	9	5.6	15.8	100.0
	Total	57	35.4	100.0	
Missing	System	104	64.6		
Total		161	100.0		

Stress, health and well-being cont'd

	Measure	Frequency	Percent	Valid Percent	Cumulative Percent
27m. *Ryff's Psychological Well-being Scales: No trusting relationships*					
Valid	(1) Disagree strongly	18	11.2	31.6	31.6
	(2) Disagree moderately	18	11.2	31.6	63.2
	(3) Disagree slightly	10	6.2	17.5	80.7
	(4) Agree slightly	3	1.9	5.3	86.0
	(5) Agree moderately	5	3.1	8.8	94.7
	(6) Agree strongly	3	1.9	5.3	100.0
	Total	57	35.4	100.0	
Missing	System	104	64.6		
Total		161	100.0		
27n. *Ryff's Psychological Well-being Scales: Not aimless*					
Valid	(1) Disagree strongly	1	.6	1.8	1.8
	(2) Disagree moderately	6	3.7	10.5	12.3
	(3) Disagree slightly	10	6.2	17.5	29.8
	(4) Agree slightly	10	6.2	17.5	47.4
	(5) Agree moderately	17	10.6	29.8	77.2
	(6) Agree strongly	13	8.1	22.8	100.0
	Total	57	35.4	100.0	
Missing	System	104	64.6		
Total		161	100.0		
27o. *Ryff's Psychological Well-being Scales: Learning, change and growth*					
Valid	(1) Disagree strongly	1	.6	1.8	1.8
	(2) Disagree moderately	9	5.6	15.8	17.5
	(3) Disagree slightly	5	3.1	8.8	26.3
	(4) Agree slightly	16	9.9	28.1	54.4
	(5) Agree moderately	17	10.6	29.8	84.2
	(6) Agree strongly	9	5.6	15.8	100.0
	Total	57	35.4	100.0	
Missing	System	104	64.6		
Total		161	100.0		
27p. *Ryff's Psychological Well-being Scales: Done all there is to do*					
Valid	(1) Disagree strongly	23	14.3	40.4	40.4
	(2) Disagree moderately	26	16.1	45.6	86.0
	(3) Disagree slightly	3	1.9	5.3	91.2
	(4) Agree slightly	2	1.2	3.5	94.7
	(5) Agree moderately	1	.6	1.8	96.5
	(6) Agree strongly	2	1.2	3.5	100.0
	Total	57	35.4	100.0	
Missing	System	104	64.6		
Total		161	100.0		

Stress, health and well-being cont'd

	Measure	Frequency	Percent	Valid Percent	Cumulative Percent
27q. *Ryff's Psychological Well-being Scales: Gave up improvements*					
Valid	(1) Disagree strongly	21	13.0	36.8	36.8
	(2) Disagree moderately	18	11.2	31.6	68.4
	(3) Disagree slightly	10	6.2	17.5	86.0
	(4) Agree slightly	4	2.5	7.0	93.0
	(5) Agree moderately	3	1.9	5.3	98.2
	(6) Agree strongly	1	.6	1.8	100.0
	Total	57	35.4	100.0	
Missing	System	104	64.6		
Total		161	100.0		
27r. *Ryff's Psychological Well-being Scales: Judge myself*					
Valid	(1) Disagree strongly	1	.6	1.8	1.8
	(2) Disagree moderately	4	2.5	7.0	8.8
	(3) Disagree slightly	10	6.2	17.5	26.3
	(4) Agree slightly	12	7.5	21.1	47.4
	(5) Agree moderately	20	12.4	35.1	82.5
	(6) Agree strongly	10	6.2	17.5	100.0
	Total	57	35.4	100.0	
Missing	System	104	64.6		
Total		161	100.0		