



Do-It-Yourself happiness

ID: _____
Date: _____

DIY Happiness Baseline Form

Dear DIY Happiness Participant

We would like to evaluate the impact of the Wheel of Wellbeing Programme.

You can help us by answering a few questions before you start the course. We will ask you some similar questions at the end of the 8 session course.

All your responses will be anonymous so that you will not be identifiable in any way. Instead of writing your name on this form, we will assign you a unique ID number.

Thank you for your help!

- Below are some statements about your feelings and thoughts. Please tick the box that best describes your experience over the past 2 weeks.

STATEMENTS	None of the time	Rarely	Some of the time	Often	All of the time
I've been feeling optimistic about the future					
I've been feeling useful					
I've been feeling relaxed					
I've been feeling interested in other people					
I've had energy to spare					
I've been dealing with problems well					
I've been thinking clearly					
I've been feeling good about myself					
I've been feeling close to other people					
I've been feeling confident					
I've been able to make up my own mind about things					
I've been feeling loved					
I've been interested in new things					



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I've been feeling cheerful

1. How would you rate your understanding of what 'wellbeing' means?

No understanding Basic Average Good Very good

2. How would you rate your understanding of the science and theory behind the concept of 'wellbeing'?

No understanding Basic Average Good Very good

3. How often do you talk to family, friends or other people you know about wellbeing (outside of the workplace)?

Never Rarely Sometimes Often Very often

4. If you are working (either in a paid or voluntary role), how often do you talk to colleagues or others (clients, service users, customers, etc.) about wellbeing?

Never Rarely Sometimes Often Very often

5. How would you rate your knowledge of what you can do to improve your own wellbeing?







No knowledge Basic Average Good Very good



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During the DIY Happiness course, we will introduce different actions that can help us to look after our ‘wellbeing’: being active and healthy eating (body); keep learning (mind); helping others and practicing gratitude (spirit); connecting (people); taking notice of your surroundings and spending time in green spaces (place); caring for the environment (planet).






6. How often do you think you engage in these different activities?

STATEMENTS	Rarely or never	Once a month	Once a week	Once a day	More than once a day
 Being Active: anything that gets our body moving around counts as being active (e.g., walking, dancing, doing housework, jogging)	1	2	3	4	5
 Healthy eating	1	2	3	4	5
 Keep Learning: this includes any type of learning (e.g., learning a recipe, a sport, doing a creative activity, reading a book, attending a course, learning some words in another language, etc.)	1	2	3	4	5
 Give: Helping others in any way, which includes small acts of kindness	1	2	3	4	5
 Practicing Gratitude: This is about when we notice and appreciate what we are grateful for in life (e.g., this could be by writing it down, talking to someone else about it, or just thinking about it)	1	2	3	4	5
 Connecting with others (e.g., family, friends, neighbours, people in your local community, colleagues, etc.)	1	2	3	4	5
 Taking notice of your surroundings.	1	2	3	4	5
 Spending time in a green space (e.g., a garden, park, forest, countryside)	1	2	3	4	5
 Caring for the environment: any actions you are taking to look after the planet (e.g., recycling, using the same shopping bag, walking instead of driving, looking after a garden, etc.)	1	2	3	4	5



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7. How happy are you about these different aspects of your life?

STATEMENTS	Very unhappy	Quite unhappy	Neither happy nor unhappy	Quite happy	Very happy
 Being Active: anything that gets our body moving around counts as being active (e.g., walking, dancing, doing housework, jogging)	1	2	3	4	5
 Healthy eating	1	2	3	4	5
 Keep Learning: this includes any type of learning (e.g., learning a recipe, a sport, doing a creative activity, , reading a book, attending a course, learning some words in another language, etc.)	1	2	3	4	5
 Give: Helping others in any way, which includes small acts of kindness	1	2	3	4	5
 Practicing Gratitude: This is about when we notice and appreciate what we are grateful for in life (e.g., this could be by writing it down, talking to someone else about it, or just thinking about it)	1	2	3	4	5
 Connecting with others (e.g., family, friends, neighbours, people in your local community, colleagues, etc.)	1	2	3	4	5
 Taking notice of your surroundings.	1	2	3	4	5
 Spending time in a green space (e.g., a garden, park, forest, countryside)	1	2	3	4	5
 Caring for the environment: any actions you are taking to look after the planet (e.g., recycling, using the same shopping bag, walking instead of driving, looking after a garden, etc.)	1	2	3	4	5
How happy are you about your life as a whole?	1	2	3	4	5



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8. What was the name of the course you attended? _____

9. In which location (i.e., town/city) did you attend the course? _____

10. What is your age?

24 or under 25-34 35-49 50-64 65 or older Prefer not to say

11. What is your gender? _____

12. What is your ethnicity? _____

13. Do you identify as someone with a disability? Y N Prefer not to say

Please give more detail if you like: _____

14. Do you identify as someone with a mental health problem?

Y N Prefer not to say

Please give more detail if you like _____



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Consent Form

1. I am happy for my personal data (including my name and contact details) to be processed by *Relationships Australia Qld* and the *Queensland Mental Health Commission* for the following purposes:

a. To contact me about details of the course during the course itself

Yes No

b. To contact me up to three to six months after the DIY Happiness course has finished (in order to complete a feedback form about the course)

Yes No

c. To share my personal data with *Implemental*, our partners in delivering DIY Happiness courses.

Yes No

2. I am happy to receive communications about other *UOW* events related to the DIY Happiness course.

Yes No

Name: _____

Signature: _____

Date: _____

Address: _____