Positive Affect – Short Form 8a

Please respond to each question or statement by marking one box per row.

	In the past 7 days…	**Never**	**Rarely**	**Sometimes**	**Often**	**Always**
SWB_P_027_PXR1	My child felt happy	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
SWB_P_025_PXR1	My child felt great	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
SWB_P_026_PXR1	My child felt cheerful	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
SWB_P_029_PXR1	My child felt joyful.....	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
SWB_P_037_PXR1	My child was in a good mood	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
SWB_P_049_PXR1	My child felt refreshed	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
SWB_P_001_PXR1	My child felt calm	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
SWB_P_004_PXR1	My child felt peaceful.....	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5

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