(14) Empowerment received

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| --- | --- | --- | --- | --- | --- | --- |
|  | Please select your situation in the last week | No | Rather little | Average | Rather a lot | Very much |
|  | Do things that are not important to you | 1 | 2 | 3 | 4 | 5 |
|  | Engage in activities that are meaningful to you | 1 | 2 | 3 | 4 | 5 |
|  | Do something meaningful to you | 1 | 2 | 3 | 4 | 5 |
|  | Gain confidence in your ability to do things | 1 | 2 | 3 | 4 | 5 |
|  | Affirm your work ability | 1 | 2 | 3 | 4 | 5 |
|  | Get the skills necessary to do things | 1 | 2 | 3 | 4 | 5 |
|  | Decide alone how to proceed | 1 | 2 | 3 | 4 | 5 |
|  | Lack of opportunity to do things independently | 1 | 2 | 3 | 4 | 5 |
|  | Have an impact on what happens around you | 1 | 2 | 3 | 4 | 5 |
|  | Can control what happens around you | 1 | 2 | 3 | 4 | 5 |