

UW Caregiver Stress Scale 3 + 2-Item Short Form V. 2.0©

**Instructions:** Please choose the response that best describes how you **usually** feel about caregiving. By **caregiving** we mean all aspects of taking care of a child or children under 18 years -- that is providing help and support (typically unpaid and typically by a parent or guardian) for their physical, psychological, or developmental needs. When choosing your answers consider how having a child or children you take care of affects all areas of your life.

		<b>Not at All</b>	<b>A little bit</b>	<b>Some-what</b>	<b>Quite a bit</b>	<b>Very much</b>
<b>1.</b>	How difficult is it for you to take care of yourself because of caregiving?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>2.</b>	How difficult is it to do activities you like to do because of caregiving	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<b>Never</b>	<b>Rarely</b>	<b>Some-times</b>	<b>Often</b>	<b>Always</b>
<b>3.</b>	On a typical day, how often do you feel overwhelmed by caregiving?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<b>N/A</b> (I don't currently work)	<b>Never</b>	<b>Rarely</b>	<b>Some-times</b>	<b>Often</b>	<b>Always</b>
<b>4.</b>	How often do you need to miss work because of caregiving?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<b>N/A</b> (I don't have a partner)	<b>Not at All</b>	<b>A little bit</b>	<b>Some-what</b>	<b>Quite a bit</b>	<b>Very much</b>
<b>5.</b>	How much does caregiving strain your relationship with your partner?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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