

UW Caregiver Stress Scale 6 + 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.

		Not at All	A little bit	Some-what	Quite a bit	Very much	
1.	How difficult is it for you to get a good night's sleep because of caregiving?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2.	How difficult is it to find time to spend with your friends because of caregiving?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3.	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"/>	
4.	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"/>	
		Never	Rarely	Some-times	Often	Always	
5.	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"/>	
6.	How often do you feel socially isolated because of caregiving?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		N/A (I don't currently work)	Never	Rarely	Some-times	Often	Always
7.	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"/>	
		N/A (I don't have a partner)	Not at All	A little bit	Some-what	Quite a bit	Very much
8.	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"/>	