Families Under Stress

The following is a list of statements which reflect how people sometimes feel when taking care of another person. After each statement, indicate how often you feel that way: never, rarely, sometimes, quite often, or nearly always. There are no right or wrong answers.

1. Do you feel that your family member asks for more help than he/she needs?
□ 0 Never □1 Rarely □ 2 Sometimes □3 Quite often □4 Nearly always

2. Do you feel that because of the time you spend with your family member that you don't have enough time for yourself?
□ 0 Never □1 Rarely □ 2 Sometimes □3 Quite often □4 Nearly always

3. Do you feel stressed between caring for your family member and trying to meet other responsibilities for your family or work?
□ 0 Never □1 Rarely □ 2 Sometimes □3 Quite often □4 Nearly always

4. Do you feel embarrassed over your family member's behavior?
□ 0 Never □1 Rarely □ 2 Sometimes □3 Quite often □4 Nearly always

5. Do you feel angry when you are around your family member?
□ 0 Never □1 Rarely □ 2 Sometimes □3 Quite often □4 Nearly always

6. Are you afraid of what the future holds for your family member?
□ 0 Never □1 Rarely □ 2 Sometimes □3 Quite often □4 Nearly always

7. Do you feel that your family member is dependent upon you?
□ 0 Never □1 Rarely □ 2 Sometimes □3 Quite often □4 Nearly always

8. Do you feel that your family member currently affects your relationship with other family members or friends in a negative way?
□ 0 Never □1 Rarely □ 2 Sometimes □3 Quite often □4 Nearly always

9. Do you feel that your health has suffered because of your involvement with your family member?
□ 0 Never □1 Rarely □ 2 Sometimes □3 Quite often □4 Nearly always

10. Do you feel strained when you are around your family member?
□ 0 Never □1 Rarely □ 2 Sometimes □3 Quite often □4 Nearly always

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11. Do you feel that you don't have as much privacy as you would like because of your family member?
□ 0 Never □1 Rarely □ 2 Sometimes □3 Quite often □4 Nearly always

12. Do you feel that your social life has suffered because you are caring for your family member?
□ 0 Never □1 Rarely □ 2 Sometimes □3 Quite often □4 Nearly always

13. Do you feel uncomfortable about having friends over because of your family member?
□ 0 Never □1 Rarely □ 2 Sometimes □3 Quite often □4 Nearly always

14. Do you feel that your family member seems to expect you to take care of him/her, as if you were the only one that he/she could depend on?
□ 0 Never □1 Rarely □ 2 Sometimes □3 Quite often □4 Nearly always

15. Do you feel that you don't have enough money to care for your family member, in addition to the rest of your expenses?
□ 0 Never □1 Rarely □ 2 Sometimes □3 Quite often □4 Nearly always

16. Do you feel that you will be unable to take care of your family member for much longer?
□ 0 Never □1 Rarely □ 2 Sometimes □3 Quite often □4 Nearly always

17. Do you feel that you have lost control of your life since your family member's illness?
□ 0 Never □1 Rarely □ 2 Sometimes □3 Quite often □4 Nearly always

18. Do you wish that you could just leave the care of your family member to someone else?
□ 0 Never □1 Rarely □ 2 Sometimes □3 Quite often □4 Nearly always

19. Do you feel uncertain about what to do about your family member?
□ 0 Never □1 Rarely □ 2 Sometimes □3 Quite often □4 Nearly always

20. Do you feel that you should be doing more for your family member?
□ 0 Never □1 Rarely □ 2 Sometimes □3 Quite often □4 Nearly always

21. Do you feel that you could do a better job in caring for your family member?
□ 0 Never □1 Rarely □ 2 Sometimes □3 Quite often □4 Nearly always

22. Overall, how burdened do you feel in caring for your family member?
□ 0 Never □1 Rarely □ 2 Sometimes □3 Quite often □4 Nearly always

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