

PARENT STRESS LEVEL

ASSESSMENT

Please take time to answer these questions to the best of your ability.
Assign one of the following values to each statement in the assessment:

Never = 0 ; Rarely = 1 ; Sometimes = 2 ; Frequently = 3

DO YOU FEEL THAT YOUR PHYSICAL HEALTH IS SUFFERING? (I.E. CONSTANT HEADACHES, COLD/FLU, ETC.)

- | | | | |
|----|--------|----|------------|
| A. | NEVER | C. | SOMETIMES |
| B. | RARELY | D. | FREQUENTLY |

DO YOU HAVE TROUBLE SLEEPING OR CONSTANTLY FEEL TIRED?

- | | | | |
|----|--------|----|------------|
| A. | NEVER | C. | SOMETIMES |
| B. | RARELY | D. | FREQUENTLY |

DO YOU HAVE TROUBLE FOCUSING ON YOUR DAILY TASKS OR WORK?

- | | | | |
|----|--------|----|------------|
| A. | NEVER | C. | SOMETIMES |
| B. | RARELY | D. | FREQUENTLY |

DO FAMILY MEMBERS OR FRIENDS NOTICE YOU LOOK TIRED OR STRESSED?

- | | | | |
|----|--------|----|------------|
| A. | NEVER | C. | SOMETIMES |
| B. | RARELY | D. | FREQUENTLY |



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DO YOU FEEL THAT YOUR PARENTING JOURNEY HAS IMPACTED YOUR WORK PERFORMANCE?

- | | | | |
|----|--------|----|------------|
| A. | NEVER | C. | SOMETIMES |
| B. | RARELY | D. | FREQUENTLY |

DO YOU NEED MORE SUPPORT FROM YOUR FAMILY AND FRIENDS WITH CARING FOR YOUR BABY AND/OR KIDS?

- | | | | |
|----|--------|----|------------|
| A. | NEVER | C. | SOMETIMES |
| B. | RARELY | D. | FREQUENTLY |

DO YOU FEEL LIKE YOU ARE ISOLATED AND MISSING OUT ON LIFE? (I.E. SOCIAL LIFE OR EXTENDED FAMILY LIFE)

- | | | | |
|----|--------|----|------------|
| A. | NEVER | C. | SOMETIMES |
| B. | RARELY | D. | FREQUENTLY |

DO YOU FEEL A SENSE OF GUILT AND THINK YOU SHOULD BE DOING A BETTER JOB CARING FOR YOUR BABY & FAMILY?

- | | | | |
|----|--------|----|------------|
| A. | NEVER | C. | SOMETIMES |
| B. | RARELY | D. | FREQUENTLY |



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*DOES CARING FOR YOUR BABY AND FAMILY FEEL
OVERWHELMING?*

- | | | | |
|----|--------|----|------------|
| A. | NEVER | C. | SOMETIMES |
| B. | RARELY | D. | FREQUENTLY |

DO YOU FEEL EMOTIONALLY AND MENTALLY DRAINED?

- | | | | |
|----|--------|----|------------|
| A. | NEVER | C. | SOMETIMES |
| B. | RARELY | D. | FREQUENTLY |

*DO YOU SOMETIMES FEEL SAD OR RESENTFUL THAT YOU
HAVE TO CARE FOR YOUR BABY AND YOUR FAMILY?*

- | | | | |
|----|--------|----|------------|
| A. | NEVER | C. | SOMETIMES |
| B. | RARELY | D. | FREQUENTLY |

*DO YOU FEEL THAT YOU DO NOT HAVE ANY TIME FOR
YOURSELF AND NEED MORE PRIVACY?*

- | | | | |
|----|--------|----|------------|
| A. | NEVER | C. | SOMETIMES |
| B. | RARELY | D. | FREQUENTLY |



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Now that the self-assessment test is over, let's talk about your results!

Never = 0 ; Rarely = 1 ; Sometimes = 2 ; Frequently = 3

A SCORE OF 0-9 - MINIMAL STRESS LEVEL

YOUR STRESS LEVELS ARE EASILY MANAGED. CONTINUE TO ASSESS YOUR DAILY ROUTINE FOR ANY INCREASES IN STRESS LEVELS AND DON'T BE AFRAID TO ASK FOR HELP IF YOU NEED IT!

A SCORE OF 10-18 - MEDIUM STRESS LEVEL

YOUR STRESS LEVEL IS TOLERABLE. HOWEVER, IT IS IMPORTANT TO KNOW THAT YOU ARE NOT ALONE IN THE PARENTING JOURNEY. MAKE TIME FOR YOURSELF TO UNWIND AND/OR ASK FOR HELP

A SCORE OF 19-27 - MODERATE STRESS LEVEL

CONSIDER MAKING TIME FOR YOURSELF TO DO THINGS YOU ENJOY. IT IS RECOMMENDED TO ASK FAMILY & FRIENDS FOR HELP CARING FOR YOUR BABY AND FAMILY FOR AT LEAST 1-2 HOURS DURING THE WEEK.

A SCORE OF 26-36 - SEVERE STRESS LEVEL

IT IS TIME TO ASK FOR HELP FROM FAMILY & FRIENDS. CONSIDER JOINING A LOCAL MOTHERS' GROUP WHERE YOU CAN TALK AND CONNECT WITH OTHER MOMS. THIS CAN BE HELPFUL AND THERAPEUTIC.



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How should I proceed with my results?

STEPS YOU CAN TAKE AS A PARENT:

1) THE MOST IMPORTANT THING FOR YOU AND YOUR FAMILY IS TO FIND EFFECTIVE SOLUTIONS TO MANAGE YOUR STRESS. EXAMPLES OF THIS ARE TAI-CHI, EXERCISE, WALKING, GETTING INTO NATURE AND EVEN SPENDING TIME WITH FAMILY, FRIENDS OR YOUR SIGNIFICANT OTHER.

2) FINDING ADDITIONAL RESOURCES TO HELP YOU AND YOUR FAMILY CAN HELP YOU MANAGE YOUR STRESS AND MAKE TIME FOR YOURSELF. FINDING A RELIABLE BABYSITTER IF FAMILY, FRIENDS OR YOUR SIGNIFICANT OTHER IS NOT AVAILABLE IS BENEFICIAL.

3) CONNECTING WITH MOM OR PARENTING GROUPS CAN REMEDY FEELINGS OF ISOLATION OR BEING STUCK AT HOME. TALKING WITH OTHER MOMS OR PARENTS WHO EXPERIENCE SIMILAR SITUATIONS IS COMFORTING. PARENTS CAN SHARE THEIR INSIGHT AND EXPERIENCES WITH YOU. THEY MAY EVEN GIVE YOU NEW TIPS TO TRY.

4) TAKE CARE OF YOURSELF. IF YOU EXHAUST YOURSELF OR GET SICK, YOU WON'T BE ABLE TO CARE FOR YOUR BABY & FAMILY. EACH DAY, TRY TO EAT HEALTHY FOODS, TAKE TIME FOR YOURSELF, AND GET A GOOD NIGHT'S SLEEP.

