

APPRAISAL OF CAREGIVING

Directions: Each of the statements below represents a feeling, belief, or attitude that someone like yourself might have about the illness of a family member and about your role of providing the care and support needed by your family member. We refer to this care and support as “caregiving.” We are aware that your feelings, as a caregiver, about the illness and treatment may fluctuate and change from day to day and week to week.

Please read the following statements. We would like to know how true each statement is of **your** own thoughts and feelings about caregiving. There are no right or wrong answers. Circle the answer that is closest to how you have been feeling over the last week including today.

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1. This situation has made me feel more appreciated by others.	1	2	3	4	5
2. This situation is not very stressful for me.	1	2	3	4	5
3. I feel things are going to get worse for me.	1	2	3	4	5
4. I haven't been doing very well since this most recent situation started	1	2	3	4	5
5. This situation does not affect my independence.	1	2	3	4	5
6. I feel a sense of loss at not being able to meet all my responsibilities.	1	2	3	4	5
7. I worry that I'll have to give up a lot of things in the future	1	2	3	4	5
8. My relationships with friends and family are not affected by this situation.	1	2	3	4	5
9. This situation does not affect how I feel about myself.	1	2	3	4	5
10. I'm afraid that in the future I won't have the energy and endurance I have now.	1	2	3	4	5
11. I've grown a lot since this most recent situation began.	1	2	3	4	5
12. It seems like there is nothing more I can do that makes a difference in how the person needing my care feels.	1	2	3	4	5

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
13. My responsibilities will continue to be what they've always been.	1	2	3	4	5
14. This situation does not affect my lifestyle.	1	2	3	4	5
15. This situation threatens to overwhelm me.	1	2	3	4	5
16. My relationships with others have become more meaningful since this situation began.	1	2	3	4	5
17. I'm afraid my own physical health will begin to suffer.	1	2	3	4	5
18. I worry that in the future I will be less able to do the things I like to do.	1	2	3	4	5
19. This situation does not affect my relationship with the person needing my care.	1	2	3	4	5
20. I believe good things will come my way because of how I am handling this difficult situation.	1	2	3	4	5
21. I worry that in the future I will not be able to help the person needing my care.	1	2	3	4	5
22. I worry that my emotional health will suffer.	1	2	3	4	5
23. Each day has become more meaningful since this most recent situation started.	1	2	3	4	5
24. I'm concerned that this situation will cause financial hardship for me in the future	1	2	3	4	5
25. I've discovered resources I never knew I had.	1	2	3	4	5
26. I'm not sure I will be able to handle this situation in the future.	1	2	3	4	5
27. This situation does not affect my emotional state.	1	2	3	4	5