



Australian Government
Department of Veterans' Affairs

Carer Strain Index

Disclaimer: This tool is only a guide and does not replace clinical judgement.

U.R. No.	LMO
SURNAME	GIVEN NAMES ADDRESS
PHONE	AGE D.O.B.
SEX	(Or attach Client I.D. Label)

Veteran File Number (VFN)		
I am going to read a list of things which other people have found to be difficult in caring for loved ones. Would you tell me whether any of these apply to you? (Give examples)	Yes = 1	No = 0
Sleep is disturbed (eg because _____ is in and out of bed or wanders around at night)		
It is inconvenient (eg because helping takes so much time or it's a long drive over to help)		
It is a physical strain (eg because of lifting in and out of chair, effort & concentration required)		
It is confining (eg helping restricts free time or cannot go visiting)		
There have been family adjustments (eg because helping has disrupted routine, there has been no privacy)		
There have been changes in personal plans (eg had to turn down a job; could not go on vacation)		
There have been other demands on my time (eg from other family members)		
There have been emotional adjustments (eg because of severe arguments)		
Some behaviour is upsetting (eg because of incontinence, _____ has trouble remembering things; or _____ accuses people of taking things)		
It is upsetting to find _____ has changed so much from his/her former self (eg he/she is a different person than he/she used to be)		
There have been work adjustments (eg because of having to take time off)		
It is a financial strain		
Feeling completely overwhelmed (eg because you worry about _____'s concerns about how you will manage)		
TOTAL SCORE (Count yes responses) _____ A positive response to seven or more items on the index would indicate a greater level of stress.		
Signature of nurse _____ Date / /	Action _____ _____ _____	
Source: Robinson (1983) in Butler, Fricke & Humphries		