

Kingston Caregiver Stress Scale

ADMINISTRATION AND INTERPRETATION MANUAL

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The Kingston Scales and Manuals can be freely downloaded from:

www.providencecare.ca → [Clinical Services](#) → [Geriatric Psychiatry](#) → [Kingston Scales](#)
or e mail: kscales@queensu.ca

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Purpose:

The Kingston Caregiver Stress Scale (KCSS) is primarily a scale used to monitor change, that is, to allow us to follow a family caregiver's stress level as his or her situation changes. The scale is designed for community living lay caregivers, not institutional care staff.

Administration:

The caregiver is the individual who provides care on a day-to-day basis in the home; usually a spouse or other relative. The scale may be handed to the caregiver for completion, or you can read the items to the caregiver and ask for a response. Since more than one person may be involved in an individual's care, each person can be interviewed separately and followed over time with the KCSS.

Say to the caregiver **“Some people report feelings of stress surrounding certain aspects of care giving. To what extent, if any, do these apply to you in your role of care giving to your spouse or relative? Using a 5 point rating scale, where 1 indicates no stress and 5 indicates extreme stress, indicate the extent of the stress or frustration you feel surrounding the following issues.”**

Review the 5 points of the scale before beginning, and circle the appropriate number beside each statement.

Interpretation:

Some caregiver stress scales try to determine how much stress an individual *should* be experiencing. There is evidence that these levels do not correlate well with reality, and therefore the KCSS takes a more direct approach by asking how much stress the caregiver feels. Instead of asking the one simple question “how much stress do you feel”, we have derived, from a review of the literature, a set of ten questions that represent potential sources of stress to the lay caregiver. We have observed that caregivers seem to be able to compartmentalize their stress and attribute it to the different areas provided, rather than just give one score for all.

These ten responses can be further divided (based on statistical analysis) into 3 categories; namely caregiving, family, and financial issues. Therefore the questions are divided into these 3 groupings.

The person filling out the form merely circles the number to the right of the question corresponding to the stress level associated with that item. By looking at the circles one can easily see a profile for each caregiver. See examples below.

The scale should be considered a scale for monitoring change in an individual caregiver. As we are assessing a subjective condition, i.e. stress, a score for one person probably does not mean the same thing as a similar score for another.

Figure 1

ISSUES					
worked,	1	2	3	4	5
ur spouse/relative?	1	2	3	4	5
commitments	1	2	3	4	5
/ the responsibilities	1	2	3	4	5
ence in your ability	1	2	3	4	5
ds of your	1	2	3	4	5

ISSUES					
are decisions?	1	2	3	4	5
he amount	1	2	3	4	5

ISSUES					
with care giving?	1	2	3	4	5

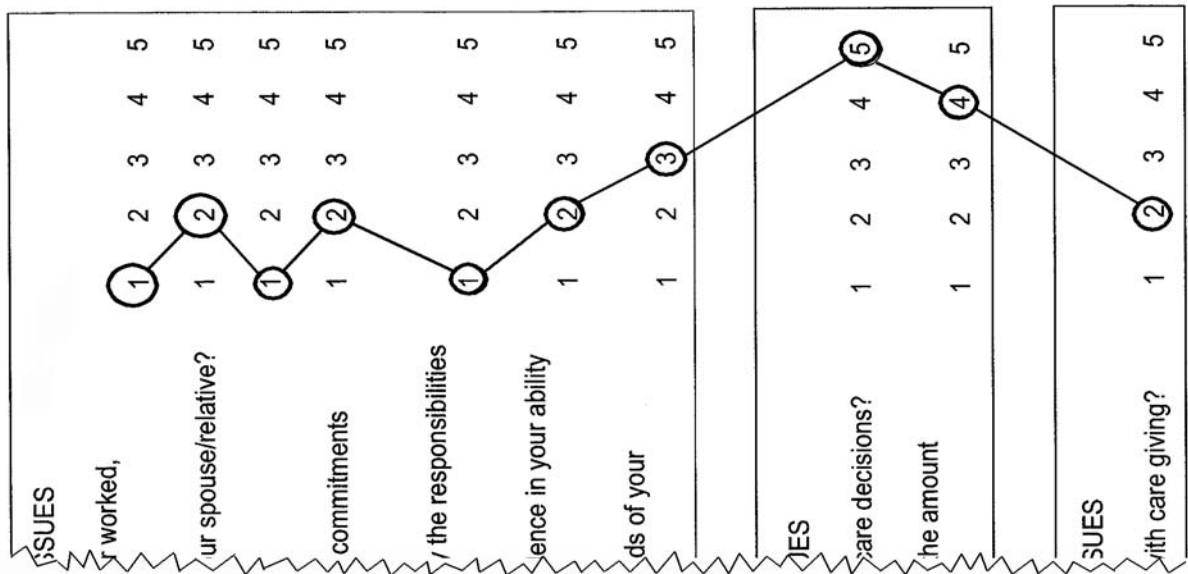


Figure 2