- 1. Sum responses to the light green shaded items—1, 2, 3, 7, 8, 9, 11 and record the number in the box labeled Defensive Responding
- 2. Calculate the subscale scores. Sum items 1-12 and record the number in the box labeled PD. Sum items 13-24 and record the number in the box labeled P-CDI. Sum items 25-36 and record the number in the box labeled DC.
- 3. Calculate the Total Stress by adding the subscales (PD + P-CDI + DC) and record the number in the box labeled Total Stress.
- 4. Profiling: Transfer the 3 subscale scores and the Total Stress score to the appropriate blanks at the bottom of the profile table. For each column, locate the raw score or range of raw scores in the body of the table, and mark each place with an "X". Look at the column at the far left or the far right to locate the percentile that corresponds to each raw score or range of raw scores. Connect the "X" marks with a line to create a profile of the respondent's scores. You may also use the spaced provided to record the percentile for each raw score.

PD=Parental Distress

P-CDI=Parent-Child Dysfunctional Interaction

DC=Difficult Child

## Some Examples for introducing the instrument:

- Introducing the battery of assessments: "We know that having a baby/child can a very joyful
  experience, however, we also recognize that it can introduce a number of new challenges for
  any parent. These questionnaires will help to give us an idea about what, if any, challenges you
  may be facing and how we can connect you with additional resources to help you meet those
  challenges."
- When introducing the PSI-4 SF within the larger battery, the home visitor might say, "this is a
  questionnaire that will help us to choose resources that reflect your strengths and needs in the
  role of parent to \_\_\_\_\_\_\_"
- Complete demographic info for client prior to home visit if possible
- Let the client know that it will take approx. 10 minutes to complete the form and to respond to the questions based on how they feel—there are no right or wrong answers

A couple of things to note...

\*Do not score the form in the presence of the client. Do, however, make sure they have responded to all questions.

\*Do not discuss the actual scores with clients during feedback sessions—only indicate the recommendations/interventions that have been designed as a result of the information obtained on all of the assessments.

REV June 2013

\* If families are seeking feedback about the tool, you can share with them that you'll need to carefully review their answers and you can discuss it next time.

## **Interpreting the Score**

Defensive Responding: pg 59 of the manual states: "Defensive Responding Scale (DRS) assesses the extent to which the respondent approaches the questionnaire with a strong bias to present the most favorable impression of him or herself or to minimize indications of problems or stress in the parent-child relationship. An extremely low DRS, a raw score of 10 or lower- suggest one of the three hypothesis:

- 1) The parent is trying to portray him or herself as a very competent individual who is free of the emotional stresses normally associated with parenting.
- 2) The parent is not invested in the role of parent and, therefore, is not experiencing the usual stresses associated with caring for a child.
- 3) The parent is, in fact, a very competent individual who handles the responsibilities of parenting well and has excellent relationships with others, including his or her spouse."

Total Stress Raw Score: See page 59-62 of the PSI-4 Manual for additional guidance

- 1) This score reflects Parenting stress, not other life stresses that the participant may be experiencing.
- 2) Scores of greater than 90% are considered clinically significant. We encourage you to review the score with your supervisor. Program leads are available for case conference with your supervisor as needed to assist with planning interventions for families with clinically significant scores.
- 3) The normal range of score is with in the  $16^{th}$  to  $84^{TH}$  percentiles.
  - a. Scores within 85th to 89th are considered high
  - b. Scores 90<sup>th</sup> or higher are clinically significant and further professional involvement may be indicated.

<sup>\*</sup> On the follow up visit after you've scored the tool in your office you can share with the family that they appear to be having similar stress to what other parents experience, or more per their score. You may want to share with the family that this questionnaire is limited to the stress they experience related to being a parent, but does not reflect their level of stress from other parts of their life (job stress, relationship stresses etc.)