

Parenting Stress Index—Short Form Guidance Document*

When you use the PSI—SF

- This tool is required to participate in the HMG Home Visiting program
- A parent may not opt out of completing this tool and stay in the program
- You administer the tool at the following intervals
 - a. Within 30 days of the birth of the baby (when applicable)
 - b. When the child is age six months (within 30 days of 6 months old)
 - c. When the child is age one year (within 30 days of 1 year old)
 - d. When the child is age two years (within 30 days of 2 years old)
 - e. When the child is age three years (within 30 days of 3 years old)
- The home visitor provides the tool to the parent(s), but the parent(s) complete it
- It is only required of the primary caregiver labeled as such in Early Track
- Once the primary caregiver has completed it, that same individual needs to complete it every other time it is administered (to see changes over time)

Explaining the PSI—SF to Parent(s) before administration

Asking parents to complete the PSI—SF can be uncomfortable. However, if you understand the benefits that the information can give you in your work with families, you will feel more comfortable and that will allow the parent(s) to feel more comfortable. You can explain that it will provide you and them with information that will help identify the sources and different types of stress that every parent can experience. We know that young children, even infants, pick up on the stress their parents feel and when that stress interrupts their ability to parent in a nurturing way, it can have lasting emotional effects on their child. If you need some talking points to use with mom or dad, try these:

- Stress that parents feel can make life, which includes parenting, harder
- If we know how to talk about stress, not just the stress you can identify, but what this tool also identifies, we can work to reduce the stress
- Reducing stress you feel has benefits for both you and your child
- Recognizing the things about parenting which are hard will give us a roadmap for making those things easier
- Information about yourself is powerful. This tool gives you an objective view of what you may find stressful about parenting.

Once you are done with the tool, we will discuss it. We will use it together to talk about what we can do together to reduce the sources of stress it identifies.

*Created by BEIS as a guidance document only. Should not be used in place of the PSI Professional Manual

Instructions to Parent for Completing the PSI-SF

This tool only takes about ten minutes to complete. It is written at a fifth grade reading level. If a parent cannot read or does not understand the items, you may read the items to them and ask them to respond verbally. The PSI-SF has been validated in both English and non-English speakers.

- Provide the parent with one item booklet and a pen to write with
- Explain that any changes in their answers can be made by crossing out the unselected response and circling the selected response. Responses cannot be erased, even when using a pencil
- Encourage them to answer each question so you can both gain the most complete picture about the stresses related to parenting possible
- Every effort should be made to talk about the outcome of the tool that same visit. If this is not possible, make sure you address the scores and what they mean, as well as strategies for using this information in the program

Scoring the PSI-SF

1. After the tool has been completed by the primary caregiver, tear off the perforated strip on the top of the sheet.
2. Remove the top sheet.
3. Missing items: Only calculate the sub-scale scores when one or fewer responses has been skipped. Any more missing items in any one sub-scale can invalidate the results.
4. Add up the responses in the shaded area (items 1, 2, 3, 7, 8, 9, and 11) and put that number in the box labeled “Defensive Responding”
5. Add up the responses 1 – 12 and put that number in the box labeled “PD”
6. Add up the responses 13 – 24 and put that number in the box labeled “P-CDI”
7. Add up the responses 25 – 36 and put that number in the box labeled “DC”
8. Add up the numbers in boxes “PD,” “P-CDI,” and “DC” and put that number in the box labeled “Total Stress”

Understanding the scores on the PSI-SF

You will need to convert the raw scores you put into the boxes into percentile scores. You can do this in the profile section of the score sheet or by referring to the attached table. For each sub-scale (unless otherwise noted), a score which falls between the 15th and 80th percentile is considered typical. High scores are those at or above the 85th percentile

Defensive Responding. The score in this box will allow you to see the extent to which the parent is trying to answer in a way he/she thinks will make them look the best. Parents who score high on this scale may be trying to minimize any problems, stress, or negativity in their relationship with their child. However, a high score on this scale alone cannot determine to what extent the parent is trying to respond in an untrue, yet favorable way. It needs to be thought of as one piece of information you have which brings you to the conclusion. A score on this scale of 10 or less indicates responding in a defensive manner and indicates that caution should be used in interpreting any of the sub-scale or total stress scores. Low scores on this scale indicate high levels of defensive responding.

“PD” Parental Distress. This scale examines to what extent the parent is experiencing stress in his/her role as a parent. It measures sense of parenting competence, stresses associated with restrictions on his/her life, conflict with child’s other parent, social support and depression. When this score is at or above the 90th percentile (see attached table) in combination with a DC score below the 75th percentile, the parent could benefit from activities and education aimed at raising self esteem and/or sense of parental competency. Connecting the parent to a social support or parent-child play group may be another strategy for those who score above the 90th percentile on this sub-scale.

“P-CDI” Parent-Child Dysfunctional Interaction. This sub-scale assesses the extent to which the parent believes that his/her child does not meet their expectations and their interactions are not satisfying. High scores in this sub-scale can indicate that the parent sees the child as a disappointment, feels rejected or alienated by/from the child, or has not properly bonded with the child. These feelings can result in a lack of warmth or initiating interactions with the child by the parent. When this score is at or above the 85th percentile, the parent should be given age-appropriate activities (with the home visitor modeling the interaction when appropriate) to do with their child. They should be given information to enhance their confidence and competence in their ability to interact with their child. Every opportunity should be provided so that the parent can feel positive and good about playing/interacting. Positive feedback should be given

“DC” Difficult Child. This sub-scale tells us how easy or difficult the parent perceives his/her child. If the child is less than 18 months old and the parent scores at or above the 90th percentile, this could indicate that the child is having problems with self-regulatory processes. In these cases, the home visitor can suggest visiting the child’s pediatrician to rule out an allergy or colic. When the child is 2 years old or older and the parent scores at or above the 90th percentile, this could indicate that the parent is having a hard time gaining the child’s cooperation and/or managing the child’s behavior. In this situation, parents will usually benefit greatly from strategies to handle challenging behavior; age appropriate discipline.

Total Stress. This is the measure of the stresses the parent is experiencing in his/her role as a parent. It does not include all life stress, just the stress they may be feeling when they are parenting. When this score is at or above the 90th percentile (see attached table), the parent may benefit from a referral to a social worker or mental health professional who can address parental distress.

Talking about the PSI-SF scores with parents

The results of a parent’s scores on this tool should be talked about with sensitivity. You do not want them to be put on the defensive or worry about where the results will end up. Approach the discussion using the tool as a teaching aid. We do not recommend that you reveal the sub-scale headings using the words defensive, distress, dysfunctional or difficult. Instead, approach high scores with strategies to address what the tool is showing you.

For example, a parent who scores high in the difficult child sub-scale could be told, “This tool is indicating that some of your stress comes from how your child behaves. Tell me more. Are there certain situations where he/she is difficult or stressful?” Then, depending on their answer, discuss strategies for

appropriate discipline. If the child is an infant, see above for the suggestion for the parent to consult his/her pediatrician about the difficulties the child is having.

There is no manual for how to discuss these results with parents. Most importantly, we want you to be sensitive, use kind and strength-based words, and use the results of the tool as a teaching instrument. You will come up with the scripts you use in time and practice of having these discussions. They will become easier over time. The three guidelines listed should help you get started. If you are experiencing stress yourself in having one of these conversations with a parent or you are unsure, we hope that you would talk to your clinical supervisor and come up with strategies together.

The PSI-SF scores in Early Track

Scores for all areas of the PSI-SF must be entered plus the total score.

- Defensive Responding
- Parental Distress
- Dysfunctional Interaction
- Difficult Child
- Total

Home Visiting Tools List Home Visiting Tools Detail Status of Requirements

*Tools PSI

*Home Visit Tool Name: PSI-SF

*Home Visit Tool Date: / /

* Child's age in months at time of Home Visit Tool: Get Age

* Administered By:

* Defensive Responding:

* Parental Distress:

* Dysfunctional Interaction:

* Difficult Child:

* Total:

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