

APPENDIX 1 – Perceived Stress Scale-4 questionnaire

Instructions: The questions in this scale ask you about your feelings and thoughts **during the last month**. In each case, please indicate your response by selecting the option representing *how often* you felt or thought a certain way.

In the last month, how often have you:

- felt that you were unable to control the important things in your life?
 - Never / Almost never / Sometimes / Fairly often / Very often
 - felt confident about your ability to handle your personal problems?
 - Never / Almost never / Sometimes / Fairly often / Very often
 - felt that things were going your way?
 - Never / Almost never / Sometimes / Fairly often / Very often
 - felt difficulties were piling up so high that you could not overcome them?
 - Never / Almost never / Sometimes / Fairly often / Very often
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Scoring Instructions: Total score is determined by adding together the scores of each of the four items.

Questions 2 and 3 are reverse coded.

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| <ul style="list-style-type: none">• Questions 1 and 4:<ul style="list-style-type: none">○ Never = 0○ Almost never = 1○ Sometimes = 2○ Fairly often = 3○ Very often = 4 | <ul style="list-style-type: none">• Questions 2 and 3:<ul style="list-style-type: none">○ Never = 4○ Almost never = 3○ Sometimes = 2○ Fairly often = 1○ Very often = 0 |
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REFERENCES

1. Cohen S, Kamarck T, Mermelstein R: **A Global Measure of Perceived Stress**. Journal of health and social behavior 1983, 24(4):385-396. <https://www.jstor.org/stable/2136404> DOI:10.2307/2136404
2. Warttig SL, Forshaw MJ, South J, White AK: **New, normative, English-sample data for the Short Form Perceived Stress Scale (PSS-4)**. J HEALTH PSYCHOL 2013, 18(12):1617-1628. <https://10.1177/1359105313508346> DOI:10.1177/1359105313508346