

**TRAUMA-INFORMED  
COMPASSION FATIGUE  
RESILIENCY**

**WORKBOOK**

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## Connecting the Concepts of Caring Safely

For each concept below, write out a definition that makes sense to you. You can also include a brief example of a time you've experienced each. Don't go into too much detail, just begin to notice when these experiences are happening for you.

**Compassion:**

**Compassion Satisfaction:**

**Compassion Fatigue:**

**Vicarious Trauma:**

**Burnout:**

**Post Traumatic Vicarious Growth:**

**Sustainable Caring:**

**Additional Notes:**

## Connecting the Concepts: Stages of Compassion Fatigue

For each stage below, write out a description of your experience. You can also include a brief example of a time you've experienced each (years/jobs). If you have not reached certain stages, you can leave this blank or put in what you've seen others experience.

### **Stage One - Compassion Satisfaction:**

### **Stage Two - Compassion Satisfaction - Compassion Fatigue:**

### **Stage Three - Compassion Fatigue:**

### **Stage Four - Compassion Fatigue - Burnout:**

### **Stage Five - Burnout:**

**Attrition**

**Sustainable Caring**

**Additional Notes:**

# Signs and Symptoms of Compassion Fatigue

## Behavioral

- Clingy
- Impatient
- Irritable
- Withdrawn
- Moody
- Regression
- Sleep Disturbances
- Appetite Changes
- Nightmares
- Hyper vigilance
- Negative Coping (smoking, alcohol, substance misuse, - STERBS)
- Accident proneness
- Losing things
- Self-harm behaviours
- Lowered frustration tolerance
- Increased outbursts of anger or rage

## Physical

- Rapid Heartbeat
- Breathing Difficulties
- Aches and pains
- Dizziness
- Impaired Immune system
- Headaches, Stomachaches

## Spiritual

- Questioning the meaning of life
- Loss of purpose
- Lack of self-satisfaction
- Pervasive hopelessness
- Anger at God
- Questioning prior religious beliefs

## Interpersonal

- Withdrawn
- Decreased interest in intimacy or sex Mistrust
- Isolation from Friends
- Impact on parenting (protectiveness)
- Projection of anger or blame Intolerance
- Loneliness
- Lowered functioning in non-professional situations
- Difficulty separation work from personal life

## Emotional

- Powerlessness
- Anxiety
- Guilt
- Anger/Rage
- Survivor Guilt Shutdown
- Numbness
- Fear
- Helplessness
- Sadness
- Depression
- Hypersensitivity
- Emotional roller coaster

- Overwhelmed
- Depleted
- Loss of Hope

## **Cognitive**

- Diminished Concentration
- Confusion
- Distracted/Feeling Spacey
- Loss of meaning
- Decreased self-esteem
- Preoccupation with trauma
- Intrusive thoughts/images of client's (or personal) situations/trauma Apathy
- Rigidity
- Disorientation
- Whirling thoughts
- Thoughts of Self Harm or Harm towards others
- Self-doubt
- Perfectionism
- Minimization

## **Work Related**

- Decreased feelings of work competence
- Dread of working with certain clients
- Increased transference/counter transference in work
- Diminished sense of purpose/enjoyment with career



## PROFESSIONAL QUALITY OF LIFE SCALE (PROQOL)

### COMPASSION SATISFACTION AND COMPASSION FATIGUE (PROQOL) VERSION 5 (2009)

When you [help] people you have direct contact with their lives. As you may have found, your compassion for those you [help] can affect you in positive and negative ways. Below are some-questions about your experiences, both positive and negative, as a [helper]. Consider each of the following questions about you and your current work situation. Select the number that honestly reflects how frequently you experienced these things in the last 30 days.

**1=Never**

**2=Rarely**

**3=Sometimes**

**4=Often**

**5=Very Often**

- \_\_\_\_\_ 1. I am happy.
- \_\_\_\_\_ 2. I am preoccupied with more than one person I [help].
- \_\_\_\_\_ 3. I get satisfaction from being able to [help] people.
- \_\_\_\_\_ 4. I feel connected to others.
- \_\_\_\_\_ 5. I jump or am startled by unexpected sounds.
- \_\_\_\_\_ 6. I feel invigorated after working with those I [help].
- \_\_\_\_\_ 7. I find it difficult to separate my personal life from my life as a [helper].
- \_\_\_\_\_ 8. I am not as productive at work because I am losing sleep over traumatic experiences of a person I [help].
- \_\_\_\_\_ 9. I think that I might have been affected by the traumatic stress of those I [help].
- \_\_\_\_\_ 10. I feel trapped by my job as a [helper].
- \_\_\_\_\_ 11. Because of my [helping], I have felt "on edge" about various things.
- \_\_\_\_\_ 12. I like my work as a [helper].
- \_\_\_\_\_ 13. I feel depressed because of the traumatic experiences of the people I [help].
- \_\_\_\_\_ 14. I feel as though I am experiencing the trauma of someone I have [helped].
- \_\_\_\_\_ 15. I have beliefs that sustain me.
- \_\_\_\_\_ 16. I am pleased with how I am able to keep up with [helping] techniques and protocols.
- \_\_\_\_\_ 17. I am the person I always wanted to be.
- \_\_\_\_\_ 18. My work makes me feel satisfied.
- \_\_\_\_\_ 19. I feel worn out because of my work as a [helper].
- \_\_\_\_\_ 20. I have happy thoughts and feelings about those I [help] and how I could help them.
- \_\_\_\_\_ 21. I feel overwhelmed because my case [work] load seems endless.
- \_\_\_\_\_ 22. I believe I can make a difference through my work.
- \_\_\_\_\_ 23. I avoid certain activities or situations because they remind me of frightening experiences of the people I [help].
- \_\_\_\_\_ 24. I am proud of what I can do to [help].
- \_\_\_\_\_ 25. As a result of my [helping], I have intrusive, frightening thoughts.
- \_\_\_\_\_ 26. I feel "bogged down" by the system.
- \_\_\_\_\_ 27. I have thoughts that I am a "success" as a [helper].
- \_\_\_\_\_ 28. I can't recall important parts of my work with trauma victims.
- \_\_\_\_\_ 29. I am a very caring person.
- \_\_\_\_\_ 30. I am happy that I chose to do this work.

## YOUR SCORES ON THE PROQOL: PROFESSIONAL QUALITY OF LIFE SCREENING

Based on your responses, place your personal scores below. If you have any concerns, you should discuss them with a physical or mental health care professional.

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### Compassion Satisfaction \_\_\_\_\_

Compassion satisfaction is about the pleasure you derive from being able to do your work well. For example, you may feel like it is a pleasure to help others through your work. You may feel positively about your colleagues or your ability to contribute to the work setting or even the greater good of society. Higher scores on this scale represent a greater satisfaction related to your ability to be an effective caregiver in your job.

The average score is 50 (SD 10; alpha scale reliability .88). About 25% of people score higher than 57 and about 25% of people score below 43. If you are in the higher range, you probably derive a good deal of professional satisfaction from your position. If your scores are below 40, you may either find problems with your job, or there may be some other reason—for example, you might derive your satisfaction from activities other than your job.

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### Burnout \_\_\_\_\_

Most people have an intuitive idea of what burnout is. From the research perspective, burnout is one of the elements of Compassion Fatigue (CF). It is associated with feelings of hopelessness and difficulties in dealing with work or in doing your job effectively. These negative feelings usually have a gradual onset. They can reflect the feeling that your efforts make no difference, or they can be associated with a very high workload or a non-supportive work environment. Higher scores on this scale mean that you are at higher risk for burnout.

The average score on the burnout scale is 50 (SD 10; alpha scale reliability .75). About 25% of people score above 57 and about 25% of people score below 43. If your score is below 43, this probably reflects positive feelings about your ability to be effective in your work. If you score above 57 you may wish to think about what at work makes you feel like you are not effective in your position. Your score may reflect your mood; perhaps you were having a “bad day” or are in need of some time off. If the high score persists or if it is reflective of other worries, it may be a cause for concern.

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### Secondary Traumatic Stress \_\_\_\_\_

The second component of Compassion Fatigue (CF) is secondary traumatic stress (STS). It is about your work related, secondary exposure to extremely or traumatically stressful events. Developing problems due to exposure to other's trauma is somewhat rare but does happen to many people who care for those who have experienced extremely or traumatically stressful events. For example, you may repeatedly hear stories about the traumatic things that happen to other people, commonly called Vicarious Traumatization. If your work puts you directly in the path of danger, for example, field work in a war or area of civil violence, this is not secondary exposure; your exposure is primary. However, if you are exposed to others' traumatic events as a result of your work, for example, as a therapist or an emergency worker, this is secondary exposure. The symptoms of STS are usually rapid in onset and associated with a particular event. They may include being afraid, having difficulty sleeping, having images of the upsetting event pop into your mind, or avoiding things that remind you of the event.

The average score on this scale is 50 (SD 10; alpha scale reliability .81). About 25% of people score below 43 and about 25% of people score above 57. If your score is above 57, you may want to take some time to think about what at work may be frightening to you or if there is some other reason for the elevated score. While higher scores do not mean that you do have a problem, they are an indication that you may want to examine how you feel about your work and your work environment. You may wish to discuss this with your supervisor, a colleague, or a health care professional.

## WHAT IS MY SCORE AND WHAT DOES IT MEAN?

In this section, you will score your test and then you can compare your score to the interpretation below.

To find your score on **each section**, total the questions listed on the left in each section and then find your score in the table on the right of the section.

### Compassion Satisfaction Scale:

3. \_\_\_\_\_  
 6. \_\_\_\_\_  
 12. \_\_\_\_\_  
 16. \_\_\_\_\_  
 18. \_\_\_\_\_  
 20. \_\_\_\_\_  
 22. \_\_\_\_\_  
 24. \_\_\_\_\_  
 27. \_\_\_\_\_  
 30. \_\_\_\_\_

The sum of my Compassion Satisfaction questions	So My Score Equals	My Level of Compassion
22 or less	43 or less	Low
Between 23 and 41	Around 50	Average
42 or more	57 or more	High

**Total:** \_\_\_\_\_

### Burnout Scale:

- \*1. \_\_\_\_\_ = \_\_\_\_\_  
 \*4. \_\_\_\_\_ = \_\_\_\_\_  
 8. \_\_\_\_\_  
 10. \_\_\_\_\_  
 \*15. \_\_\_\_\_ = \_\_\_\_\_  
 \*17. \_\_\_\_\_ = \_\_\_\_\_  
 19. \_\_\_\_\_  
 21. \_\_\_\_\_  
 26. \_\_\_\_\_  
 \*29. \_\_\_\_\_ = \_\_\_\_\_

The sum of my Burnout Questions	So My Score Equals	My Level of Burnout
22 or less	43 or less	Low
Between 23 and 41	Around 50	Average
42 or more	57 or more	High

Reverse the scores for those that are starred.

0=0, 1=5, 2=4, 3=3, 4=2, 5=1

**Total:** \_\_\_\_\_

### Secondary Trauma Scale:

2. \_\_\_\_\_  
 5. \_\_\_\_\_  
 7. \_\_\_\_\_  
 9. \_\_\_\_\_  
 11. \_\_\_\_\_  
 13. \_\_\_\_\_  
 14. \_\_\_\_\_  
 23. \_\_\_\_\_  
 25. \_\_\_\_\_  
 28. \_\_\_\_\_

The sum of my Secondary Traumatic Stress questions	So My Score Equals	My Level of Secondary Traumatic Stress
22 or less	43 or less	Low
Between 23 and 41	Around 50	Average
42 or more	57 or more	High

**Total:** \_\_\_\_\_

## Connecting the Concepts

### Trauma Informed Approach to Compassion Fatigue Resiliency

**What does ACEs stand for?**

**How does childhood exposure to toxic stress impact the developing body/brain?**

**The ACEs study showed a connection between early childhood adversity and long-term health and social problems, list some of the connections:**

**What is it important to take a trauma-informed approach to compassion fatigue resiliency:**

## Brief Resilience Scale (BRS)

Please respond to each item by marking <u>one box per row</u>		Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
BRS 1	I tend to bounce back quickly after hard times	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
BRS 2	I have a hard time making it through stressful events.	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1
BRS 3	It does not take me long to recover from a stressful event.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
BRS 4	It is hard for me to snap back when something bad happens.	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1
BRS 5	I usually come through difficult times with little trouble.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
BRS 6	I tend to take a long time to get over set-backs in my life.	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1

**Scoring:** Add the responses varying from 1-5 for all six items giving a range from 6-30.

Divide the total sum by the total number of questions answered.

**Total Score** \_\_\_\_\_ / 6 = **Score of** \_\_\_\_\_.

**According to the authors of the BRS, scores can be interpreted as follows:**

Low resilience: 1.00-2.99

Normal resilience: 3.00-4.30

High resilience: 4.31-5.00

Smith, B. W., Dalen, J., Wiggins, K., Tooley, E., Christopher, P., & Bernard, J. (2008). The brief resilience scale: assessing the ability to bounce back. *International journal of behavioral medicine, 15*(3), 194-200.

Smith, B.W., Epstein, E.E., Ortiz, J.A., Christopher, P.K., & Tooley, E.M. (2013). The Foundations of Resilience: What are the critical resources for bouncing back from stress? In Prince-Embury, S. & Saklofske, D.H. (Eds.), *Resilience in children, adolescents, and adults: Translating research into practice*, The Springer series on human exceptionality (pp. 167-187). New York, NY: Springer

## Vicarious Resilience Scale

Please reflect on your experience working with persons who have survived severe traumas. Since you began this work, you may have undergone changes in how you view your clients, your approach to this work, and/or your own experience or worldview. Please read each of the following statements about your attitudes, experiences, and how your view of your life *since you began this work*, and indicated the degree to which you disagree or agree:

Did not experience this = 0

Experienced this to a *very small* degree = 1

Experienced this to a *small* degree = 2

Experienced this to a *moderate* degree = 3

Experienced this to a *great* degree = 4

Experienced this to a *very great* degree = 5

**Determine your 0 to 5 score for each of the 27 questions below.**

1. Better able to reassess dimensions of problems ( )
2. Better able to keep perspective ( )
3. See life as more manageable ( )
4. Better able to cope with uncertainties ( )
5. More resourceful ( )
6. Learn how to deal with difficult situations ( )
7. More connected to people and life ( )
8. Life goals and priorities have evolved ( )

Adapted from Killian, Hernandez-Wolfe, Engstrom, Gangsei, & Kendall-Tackett, Kathleen. (2017). Development of the Vicarious Resilience Scale (VRS): A Measure of Positive Effects of Working With Trauma Survivors. *Psychological Trauma: Theory, Research, Practice, and Policy*, 9(1), 23-31.

9. More compassion for people ( )
10. More time and energy into relationships ( )
11. Ideas about what is important changed ( )
12. More mindful and reflective ( )
13. In tune with body ( )
14. More time for meditative, mindful or spiritual practices ( )
15. Better able to assess level of stress ( )
16. Better at self-care ( )
17. Inspired by peoples' capacity to persevere ( )
18. Hopeful about people's capacity to heal and recover from traumas ( )
19. More hopeful and engaged when focusing on strengths ( )
20. Clients' spiritual practices source of inspiration ( )
21. Recognize spirituality as component of clients' survival ( )
22. Highlight clients' spiritual/religious beliefs to promote resilience ( )
23. Ethnicity, gender, class, sexual orientation and religion ( )
24. Race, class gender, sexual orientation and privilege, access, resources ( )
25. When experience distressing through am able to just notice them ( )
26. Better able to remain present when hearing trauma narratives ( )
27. Notices client trauma narratives without getting lost in them ( )

Adapted from Killian, Hernandez-Wolfe, Engstrom, Gangsei, & Kendall-Tackett, Kathleen. (2017). Development of the Vicarious Resilience Scale (VRS): A Measure of Positive Effects of Working With Trauma Survivors. *Psychological Trauma: Theory, Research, Practice, and Policy*, 9(1), 23-31.

**Calculate your total score and your total for each sub scale:**

**Increased resourcefulness:** Your total score for questions 1-6 = \_\_\_\_\_(30)

**Changes in life goals:** Your total score for questions 7-12 = \_\_\_\_\_(30)

**Increased self-awareness:** Your total score for questions 13-16 = \_\_\_\_\_(20)

**Client inspired hope:** Your total score for questions 17-19 = \_\_\_\_\_(15)

**Increased recognition of spirituality:** Your total score for questions 20-22 \_\_\_\_\_(15)

**Increased consciousness of power:** Your total score for questions 23-24 \_\_\_\_\_(10)

**Increased capacity to remain present:** Your total score for questions 25-27 \_\_\_\_\_(15)

**Total Score:** \_\_\_\_\_(**135**)

Adapted from Killian, Hernandez-Wolfe, Engstrom, Gangsei, & Kendall-Tackett, Kathleen. (2017).  
Development of the Vicarious Resilience Scale (VRS): A Measure of Positive Effects of Working With  
Trauma Survivors. *Psychological Trauma: Theory, Research, Practice, and Policy*, 9(1), 23-31.



## Connecting the Concepts of Empathy

For each concept below, write out a definition that fits for you. You can also include a brief example of a time you've experienced each. Don't go into too much detail, just begin to notice when these experiences are happening for you with your clients.

**Emotional Contagion:**

**Empathy:**

**Unconscious Empathy and Conscious Empathy:**

**Self-Regulation:**

**Practicing Safe Empathy:**

# Strategy #1: Human Stress Response and Warning Signs

## Signs of the Human Stress Response

- fight, flight, or freeze response
- release of stress hormones (cortisol, adrenaline)
- rapid heart rate
- increased blood pressure
- tense muscles
- sharpened senses
- slowed digestion (nausea/irritable bowel symptoms may occur)

## Your Stress-Response Warning Signs

What are the first three things you notice when you are stressed?

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

These are your warning signs to use a stress-management strategy.

## Strategy #9: Deep Breathing: Extended Exhale

**To ensure you are taking deep breaths and not shallow breaths, try the following exercise.**

- Sitting in a chair, standing, or lying on your back, place one hand on your chest and one hand on your stomach.
- Take a minute to breathe as you normally do.
- Check whether your chest is rising or your belly is rising.
- If your chest is rising and your belly is not moving, you are shallow breathing.
- If your belly is rising, you are taking full, deep breaths and will trigger relaxation in your body.
- Focus your attention on your breath until you are taking deep breaths and your stomach is rising.
- If you are sitting in a chair or lying down, you may feel your lower back press against the surface when you do deep breathing.
- You may have to play around and push your stomach out if this type of breathing is new to you. Aim for smooth, deep breaths.
- Practice until you can tell the difference between a deep breath and a shallow breath and you know how to shift into deep breathing as soon as you notice your warning signs.

### Extended exhale

The purpose of the extended exhale is to trigger the relaxation response. The longer you exhale, the quicker you relax your body. Try one of the following counting sequences as you breathe.

- Inhale through your nose for a count of three and then exhale through your mouth for a count of six (3–6 breathing).
- Inhale through your nose for a count of four, hold your breath for a count of two, and then exhale for a count of six (4–2–6 breathing).

Practice this five times per day for two minutes when you are not stressed, and practice as soon as you notice your stress warning signs.



#### AUDIO FILE

*Audio file #2: Deep Breathing: Extended Exhale ([www.brushededucation.ca/stress](http://www.brushededucation.ca/stress))*

## Controlling Facial Mimicry

Increase your awareness and experiences of facial mirroring:

### Observing and controlling your smiling reflex:

1. On your next trip to the grocery store, see how many people you can catch smiling in response to your smiling at them. As you walk down the aisle and check out, purposely smile and notice how people respond.
2. During an average day or outing, count how often you smile in response to a smile from another.
3. Then, on several more outings, practice not smiling reflexively in response to some strangers smile – warning: this may be harder than you think, so don't be discouraged if it takes you several tries to get the hang of it.

### Controlling your facial mimicry of athletes and actors:

1. While either watching television ,or at the movies, pay attention to your facial expression when an athlete or actor is expressing a strong emotion.
2. Identify which expressions are the most habitual for you to copy.
3. Practice not copying those expressions during subsequent television programs or films.

### Controlling your facial mimicry of people you are helping:

1. When you feel comfortable with awareness and control of your facial expression, begin to control your facial mimicry with the people you are helping.
2. Put something in your line of sight to remind you to reflect and manage your facial expression.

Adapted from Rothschild (2006). Helper for the Helper: Self-Care Strategies for Managing Burnout and Stress

## Strategy #20: Setting Boundaries and Saying No

Part of managing stress is setting boundaries and saying no to things you do not have the time or desire to do. Most people who struggle with stress are juggling many roles and responsibilities each day. By learning how to set boundaries and say no, you will be able to create more time and energy to do the things you enjoy and to engage in more self-care activities.

### The USE model of communication

**U**NDERSTAND: Let the other person know you understand the situation from his or her point of view.

**S**TATE: Say the facts of the situation from your point of view.

**E**XPLAIN: Describe what you would like to see done about the situation now and in the future.

### Example:

**U**NDERSTAND: *“I understand that this work is important to you and you are feeling stressed about getting it completed on time.”*

**S**TATE: *“I am concerned that I won’t have enough time to help you and also get my errands done in time to get home for our family dinner.”*

**E**XPLAIN: *“If you want help in the future, please let me know in advance so I can plan for it and help you out.”*

Now spend a couple of minutes coming up with a statement you can use to set a boundary or say no so that you will have less to do and experience less stress.

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## GAD-7

Over the last 2 weeks, how often have you been bothered by the following problems?

*(Use "✓" to indicate your answer)*

	Not at all	Several days	More than half the days	Nearly every day
1. Feeling nervous, anxious or on edge	0	1	2	3
2. Not being able to stop or control worrying	0	1	2	3
3. Worrying too much about different things	0	1	2	3
4. Trouble relaxing	0	1	2	3
5. Being so restless that it is hard to sit still	0	1	2	3
6. Becoming easily annoyed or irritable	0	1	2	3
7. Feeling afraid as if something awful might happen	0	1	2	3

***(For office coding: Total Score T\_\_\_\_\_ = \_\_\_\_\_ + \_\_\_\_\_ + \_\_\_\_\_ )***

## Patient Health Questionnaire (PHQ-9)

Patient name: \_\_\_\_\_ Date: \_\_\_\_\_

1. Over the last 2 weeks, how often have you been bothered by any of the following problems?

	Not at all (0)	Several days (1)	More than half the days (2)	Nearly every day (3)
a. Little interest or pleasure in doing things.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Feeling down, depressed, or hopeless.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Trouble falling/staying asleep, sleeping too much.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Feeling tired or having little energy.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Poor appetite or overeating.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Feeling bad about yourself, or that you are a failure, or have let yourself or your family down.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Trouble concentrating on things, such as reading the newspaper or watching TV.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Moving or speaking so slowly that other people could have noticed. Or the opposite; being so fidgety or restless that you have been moving around more than usual.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Thoughts that you would be better off dead or of hurting yourself in some way.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. If you checked off any problem on this questionnaire so far, how difficult have these problems made it for you to do your work, take care of things at home, or get along with other people?

Not difficult  
at all

Somewhat  
difficult

Very  
difficult

Extremely  
difficult

**TOTAL SCORE** \_\_\_\_\_

## Instructions – How to Score the PHQ-9

### Major depressive disorder is suggested if:

- Of the 9 items, 5 or more are checked as at least ‘more than half the days’
- Either item a. or b. is positive, that is, at least ‘more than half the days’

### Other depressive syndrome is suggested if:

- Of the 9 items, a., b. or c. is checked as at least ‘more than half the days’
- Either item a. or b. is positive, that is, at least ‘more than half the days’

Also, PHQ-9 scores can be used to plan and monitor treatment. To score the instrument, tally each response by the number value under the answer headings, (not at all=0, several days=1, more than half the days=2, and nearly every day=3). Add the numbers together to total the score on the bottom of the questionnaire. Interpret the score by using the guide listed below.

### Guide for Interpreting PHQ-9 Scores

Score	Recommended Actions
0-4	Normal range or full remission. The score suggests the patient may not need depression treatment.
5-9	Minimal depressive symptoms. Support, educate, call if worse, return in 1 month.
10-14	Major depression, mild severity. Use clinical judgment about treatment, based on patient’s duration of symptoms and functional impairment. Treat with antidepressant or psychotherapy.
15-19	Major depression, moderate severity. Warrants treatment for depression, using antidepressant, psychotherapy or a combination of treatment.
20 or higher	Major depression, severe severity. Warrants treatment with antidepressant and psychotherapy, especially if not improved on monotherapy; follow frequently.

### Functional Health Assessment

The instrument also includes a functional health assessment. This asks the patient how emotional difficulties or problems impact work, things at home, or relationships with other people. Patient responses can be one of four: Not difficult at all, Somewhat difficult, Very difficult, Extremely difficult. The last two responses suggest that the patient’s functionality is impaired. After treatment begins, functional status and number score can be measured to assess patient improvement.

For more information on using the PHQ-9, visit [www.depression-primarycare.org](http://www.depression-primarycare.org)



## Caring Safely 12 Month Plan

What changes can you make in the following:

Week:

Month:

Year:

What will happen if you don't make any changes?

What/Who can support you in making healthy changes?