Perceived Stress Scale 4 (PSS-4)

(Cohen et al. 1983)

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.

Never; Almost never; Sometimes; Fairly often; Very often

1. In the last month, how often have you felt that you were unable to control the important things in your life?
2. In the last month, how often have you felt confident about your ability to handle your personal problems?
3. In the last month, how often have you felt that things were going your way?
4. In the last month, how often have you felt difficulties were piling up so high that you could not overcome them?

Scoring Instructions:
Total score is determined by adding together the scores of each of the four items. Questions 2 and 3 are reverse coded.

Questions 1 and 4: 0 = Never; 1 = Almost never; 2 = Sometimes; 3 = Fairly often; 4 = Very often
Questions 2 and 3: 4 = Never; 3 = Almost never; 2 = Sometimes; 1 = Fairly often; 0 = Very often

Citation: