

Perceived Stress Scale (PSS)

Author:	Sheldon Cohen
Date:	(Originally published) 1983
Constructs:	Child and Family Health, Family Relationships
Standardized:	Not specified
Instrument Type(s):	4-item self-report instrument with a five-point scale: (0 = never, 1 = almost never, 2 = sometimes, 3 = fairly often, 4 = very often). The PSS is also available in a 10 and 14 item self-report instrument with the same five-point scale.
Uses of Information:	<p>The 4-item version is appropriate for use in situations requiring a very brief measure of stress perceptions. It was previously employed when collecting perceived stress levels over the phone during follow-up interviews.</p> <p>It is not a diagnostic instrument, but intended to make comparisons of subjects' perceived stress related to current, objective events. The higher the degree and longer the duration of self-perceived stress, indicated by a higher score, is considered a risk factor for a clinical psychiatric disorder.</p>
Environment:	Not specified, but flexible
Description:	The short version, PSS-4, is an economical and simple psychological instrument to administer, comprehend, and score. It measures the degree to which situations in one's life over the past month are appraised as stressful. Items were designed to detect how unpredictable, uncontrollable, and overloaded respondents find their lives. The PSS-4 poses general queries about relatively current levels of stress experienced. All items begin with the same phrase: In the past month, how often have you felt...? Since the questions are of a general nature and are not directed at any particular sub-population group, using this abbreviated version (or any version) with a diverse population is predicted to yield equally reliable results.
References:	<p>(1.) Cohen, S., Kamarck, T., & Mermelstein, R. (1983). A global measure of perceived stress. <i>Journal of Health and Social Behavior</i>, 24, 385-396. Link to full-text (pdf)</p> <p>(2.) Cohen, S., & Williamson, G. (1988). Perceived stress in a probability sample of the U.S. In S. Spacapan & S. Oskamp (Eds.), <i>The social psychology of health: Claremont Symposium on Applied Social Psychology</i>. Newbury Park, CA: Sage. Link to full-text (pdf)</p> <p>http://www.psy.cmu.edu/~scohen/</p>
Cost:	<p>Permission for use of the scale is not necessary when use is for academic research or educational purposes.</p> <p>Use of the PSS in profit making ventures requires special permission and a nominal charge. Inclusion of the scale within a larger scale that will be copyrighted also requires specific permission. For permission, send a request letter to the contact person with a self-addressed and stamped envelope enclosed.</p>
Availability of Test Manual	N/A

Contact Info: Ellen Conser
 Department of Psychology
 Carnegie Mellon University
 5000 Forbes Avenue
 Pittsburgh, PA 15213
 conser@andrew.cmu.edu

Laurie Nelson
 Department of Psychology
 Carnegie Mellon University
 5000 Forbes Avenue
 Pittsburgh, PA 15213
 or email your request with your complete address included:
lanelson@andrew.cmu.edu

Utility

Instructions: Read to subject over the phone, in person, or the subject may read the questions her/himself.

Administrator: Not specified.

Qualification: Not specified, but must be able to read the questions, score the test, and/or operate a phone.

Training Required: No specified training

Administration Time: A few minutes

Respondents: Individuals with at least a junior high education

Scales/Item Options: Subjects' responses are measured on a five-point scale (0 = never, 1 = almost never, 2 =sometimes, 3 = fairly often, 4 = very often).

Scoring: PSS-4 scores are obtained by summing across all four items. Scoring items 2 and 3 require reverse coding. This involves assigning the opposite score. For example, a score of 0=4, 1=3, 2=2, 3=1, and 4=0. The higher the score, the more perceived stress.

Languages: English, Arabic, Chinese, Greek, Korean, Spanish, Vietnamese

Psychometric Properties: PSS-4 is based on psychometric principles and is considered to be sound. However, the limited four-item abridged scale suffers in internal reliability ($r=.60$). It provides a less adequate approximation of perceived stress levels than the larger scales. Test-Retest reliability and predictive validity is strongest for shorter time periods.

The 10- and 14-item self-report instruments have established reliability and validity ($r=0.85$).

Source for the annotation was the FRIENDS National Resource Center, <http://www.friendsnrc.org/>

