Post-Discharge Coping Difficulty Scale © New Mother Form

Since your baby has been home from the hospital:

1. How stressful has your life been?	0 1 2 Not at all	3	4	5	6	7	8 9 10 Extremely
What has been stressful?							
2. How much difficulty have you had with your own recovery?What has been difficult?	0 1 2 None at all	3	4	5	6	7	8 9 10 A great deal
3. How much difficulty have you had with caring for your baby?What has been difficult?	0 1 2 None at all	3	4	5	6	7	8 9 10 A great deal
4. How much difficulty have you had with feeding your baby?What has been difficult?	0 1 2 None at all	3	4	5	6	7	8 9 10 A great deal
5. How difficult has the time been for your family members or other close persons?What has been difficult?	0 1 2 Not at all	3	4	5	6	7	8 9 10 Extremely
6. How much help have you needed with caring for your baby?	0 1 2 None at all	3	4	5	6	7	8 9 10 A great deal
7. How much emotional support have you needed?	0 1 2 None at all	3	4	5	6	7	8 9 10 A great deal

8. How confident have you felt in your ability to	0	1	2	3	4	5	6	7	8	9	10
care for own needs since the birth?	Not at all Com					ompl	etely				
9. How confident have you felt in your ability to	0	1	2	3	4	5	6	7	8	9	10
care for your baby since the birth?	Not at all Comp					ompl	etely				
10. How well have you adjusted to being at home	0	1	2	3	4	5	6	7	8	9	10
since the birth of your baby?	No	ot at al	1						Extre	mely	well

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