

Family Caregiver Inventory

This exploratory questionnaire describes the experience of family caregivers supporting someone who is ill, elderly, or living with a disability: workload and availability, fatigue and health, the impact on social, family, and work life, emotions, the relationship with the person cared for, and support and respite. It helps identify caregiver exhaustion and what can be acted on, from sharing the care to respite options.

Number of questions	24 questions
Estimated duration	6 minutes
Language	English
Original name	Family Caregiver Inventory
Target audience	Adults
Category	Burnout, Stress

Preview of the 24 questions

Over the past few months, how often has this been true for you?

I drop what I'm doing when the person I care for needs something.

Never | Rarely | Sometimes | Often | Very often

Over the past few months, how often has this been true for you?

I feel exhausted.

Never | Rarely | Sometimes | Often | Very often

Over the past few months, how often has this been true for you?

I give up outings or time with friends to look after the person I care for.

Never | Rarely | Sometimes | Often | Very often

Over the past few months, how often has this been true for you?

I worry about what could happen to the person I care for when I'm not with them.

Never | Rarely | Sometimes | Often | Very often

Over the past few months, how often has this been true for you?

I lose patience with the person I care for.

Never | Rarely | Sometimes | Often | Very often

Administer your questionnaires online

Send your patient a link: they answer from their phone or computer, and you receive the scored results by email.

View the questionnaire on mentaal.org ›

Scoring & interpretation

Scoring

Each statement is scored from 0 (never) to 4 (very often) based on its frequency over the past few months. Each domain combines 4 statements spread throughout the questionnaire, giving a score from 0 to 16.

Reading the profile

There is no total score. Domains are ranked from most to least elevated, each with a description of what it covers and points to explore in the interview. Following the caregiver stress process model, the profile distinguishes what caregiving demands (workload and availability), what it costs the caregiver (fatigue and health; social, family, and work life; emotions; the relationship with the person cared for), and the resources the caregiver lacks (support and respite). An elevated "Support and respite" domain points to concrete levers: sharing the care with family and friends, professional help, respite options.

Clinical cautions

Marked exhaustion calls for screening for depression or an anxiety disorder, which the questionnaire does not assess. Nor does it include any question about thoughts of suicide: these are assessed in the interview when exhaustion is marked. A very strained relationship with the person cared for or severe exhaustion should also lead to a nonjudgmental discussion in the interview of the risk of abusive words or actions, on either side.

Limitations

This exploratory questionnaire has not undergone psychometric validation and has no cutoffs. It supports the clinical interview and does not provide a diagnosis.

Scoring example

Scoring

Social, family, and work life 13 / 16

The impact of caregiving on friendships, leisure, the couple, the family, and work or school.

Areas to explore: what has been cut back or given up (going out, leisure, working hours), family disagreements about how the care is shared, possible arrangements at work.

Workload and availability 10 / 16

The amount of care provided, availability expected at all hours, and the mental load of organizing everything (care, appointments, paperwork).

Areas to explore: what the caregiver actually does (care, meals, bathing, supervision, paperwork), how much time it takes, what could be handed over to professionals or to other family members and friends.

See also: ZBI.

Fatigue and health 8 / 16

Physical and emotional exhaustion, unrefreshing sleep, pain, and health neglected for lack of time or energy.

Areas to explore: sleep, pain related to caregiving tasks, the care the caregiver puts off for themselves, their own medical follow-up.

Support and respite 8 / 16

Feeling alone in carrying the care, difficulty getting someone to step in or allowing oneself a break, not knowing what help is available.

Areas to explore: who else helps (family, friends, professionals), the services and respite options known or used (in-home care, adult day programs, short-term respite stays), what holds the caregiver back from using them (guilt, refusal by the person cared for, cost).

See also: MSPSS.

Relationship with the person cared for 6 / 16

Tension in the relationship, behaviors that are hard to live with, a bond that turns into a caregiving relationship.

Areas to explore: the history of the relationship before the illness or loss of independence, difficult behaviors (refusing help, aggression, demands, confusion), what is still shared outside of care.

Difficult emotions 2 / 16

Worry about the person cared for, guilt, anger at the situation, sadness at seeing the person change (anticipatory grief).

Areas to explore: the emotions the caregiver allows themselves or feels guilty about, fear of the future, grieving the relationship as it used to be, signs of depression or anxiety.

See also: PHQ-9, GAD-7.

No validated clinical or psychometric cutoffs have been established for this test yet. The results should therefore be considered exploratory indicators, meant to support the clinical interview, not diagnostic findings.

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 Emily T. - Online CBT Psychologist