



Postpartum Social Support Screening

Practical and emotional support is important in protecting against maternal mental health disorders; take this survey to see how your social support system measures up.



The following questions are about how much support you can count on from people around you.
 How often is each of the following kinds of support available to you if you need it?

Select only one option per line:	None of the time	A little of the time	Some of the time	Most of the time	All of the time
Someone you can count on to listen to you when you need to talk	_____	_____	_____	_____	_____
Someone to give you good advice about a problem	_____	_____	_____	_____	_____
Someone to take you or baby to the doctor if needed	_____	_____	_____	_____	_____
Someone you can laugh or just relax with	_____	_____	_____	_____	_____
Someone to help you get information or help you to solve a problem	_____	_____	_____	_____	_____
Someone to help you with chores or with taking care of the baby	_____	_____	_____	_____	_____
Someone to share your most private worries and fears with	_____	_____	_____	_____	_____
Someone to do something enjoyable with	_____	_____	_____	_____	_____
Someone to love you and make you feel special	_____	_____	_____	_____	_____

Who helps you the most with practical things (feeding baby, folding laundry, grocery store)?

_____ Spouse _____ Community Health Worker _____ Other family members
_____ Friends _____ Paid helper _____ Doctor _____ Nurse
_____ Case manager _____ No one _____ Other (specify) _____

With whom do you feel most comfortable sharing your feelings or talking about something that is worrying you?

_____ Spouse _____ Community Health Worker _____ Other family members
_____ Friends _____ Paid helper _____ Doctor _____ Nurse
_____ Case manager _____ No one _____ Other (specify) _____

Who helps you the most in with the transition to motherhood?

_____ Spouse _____ Community Health Worker _____ Other family members
_____ Friends _____ Paid helper _____ Doctor _____ Nurse
_____ Case manager _____ No one _____ Other (specify) _____

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