



wazzzup
mama!

ASSESSMENT EMOTIONAL WELLBEING

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1. During the past month, have you often been bothered by feeling down, depressed or hopeless?
2. During the past month, have you often been bothered by little interest or pleasure in doing things?
3. In the past month, have you worried so much that it affects your daily life?
4. Are there things that make it difficult for you during your pregnancy?

If YES to one or more questions:

On a scale from 0 t/m 10, can you indicate your ability to cope with how you are feeling?

0 = very able to cope - 10 = absolutely unable to cope

On a scale from 0 t/m 10, can you indicate if you need help to cope with it?

0 = I do not need help at all - 10 = I really need help urgently

INTERPRETATION SCORES

- 0-4 No actions required
- 5-7 Re-assess next visit, ideally within the next 2 weeks. Discuss the need for help.
- 8-10 Consult and/or refer to professional psychological healthcare professional.
Keep close contact with the woman until professional support is organized.