

Work and social adjustment scale

Practice:

Practitioner:

Date:

Client:

People's problems sometimes affect their ability to do certain day-to-day tasks in their lives. To rate your problems look at each section and determine on the scale provided how much your problem impairs your ability to carry out the activity.

Because of my problem...	Not at all	Slightly	Definitely	Markedly	Very Severely	OFFICE USE ONLY
1. My ability to work is impaired	<input type="checkbox"/> 0	<input type="checkbox"/> 2	<input type="checkbox"/> 4	<input type="checkbox"/> 6	<input type="checkbox"/> 8	<input type="checkbox"/>
2. My home management is impaired <i>(cleaning, tidying, shopping, cooking, looking after home or children, paying bills)</i>	<input type="checkbox"/> 0	<input type="checkbox"/> 2	<input type="checkbox"/> 4	<input type="checkbox"/> 6	<input type="checkbox"/> 8	<input type="checkbox"/>
3. My social leisure activities are impaired <i>(with other people e.g. parties, bars, clubs, outings, visits, dating, home entertaining)</i>	<input type="checkbox"/> 0	<input type="checkbox"/> 2	<input type="checkbox"/> 4	<input type="checkbox"/> 6	<input type="checkbox"/> 8	<input type="checkbox"/>
4. My private leisure activities are impaired <i>(done alone, such as reading, gardening, collecting, sewing, walking alone)</i>	<input type="checkbox"/> 0	<input type="checkbox"/> 2	<input type="checkbox"/> 4	<input type="checkbox"/> 6	<input type="checkbox"/> 8	<input type="checkbox"/>
5. My ability to form and maintain close relationships with others is impaired	<input type="checkbox"/> 0	<input type="checkbox"/> 2	<input type="checkbox"/> 4	<input type="checkbox"/> 6	<input type="checkbox"/> 8	<input type="checkbox"/>

TOTAL SCORE

Thank you for your time in completing this questionnaire