

Social Functioning Questionnaire
Version Attached: Full Test

PsycTESTS Citation:

Tyrer, P., Nur, U., Crawford, M., Karlsen, S., McLean, C., Rao, B., & Johnson, T. (2005). Social Functioning Questionnaire [Database record]. Retrieved from PsycTESTS. doi: <http://dx.doi.org/10.1037/t03074-000>

Instrument Type:

Inventory/Questionnaire

Test Format:

Each of the 8 items of the SFQ is scored on a four point scale (0-3) with a total possible score of 24.

Source:

Tyrer, Peter, Nur, Ula, Crawford, Mike, Karlsen, Saffron, McLean, Claire, Rao, Bharti, & Johnson, Tony (2005). The Social Functioning Questionnaire: A Rapid and Robust Measure of Perceived Functioning. *International Journal of Social Psychiatry*, Vol 51(3), 265-275. doi: 10.1177/0020764005057391, © 2005 by SAGE Publications. Reproduced by Permission of SAGE Publications.

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Social Functioning Questionnaire SFQ

Items

Please look at the statements below and tick the reply that comes closest to how you have been recently (or in the past two weeks for studies involving repeated measurement)

- | | | |
|---|----------------------|----------------------------|
| I complete my tasks at work and home satisfactorily. | Most of the time | <input type="checkbox"/> 0 |
| | Quite often | <input type="checkbox"/> 1 |
| | Sometimes | <input type="checkbox"/> 2 |
| | Not at all | <input type="checkbox"/> 3 |
| I find my tasks at work and at home very stressful. | Most of the time | <input type="checkbox"/> 3 |
| | Quite often | <input type="checkbox"/> 2 |
| | Sometimes | <input type="checkbox"/> 1 |
| | Not at all | <input type="checkbox"/> 0 |
| I have no money problems. | No problems at all | <input type="checkbox"/> 0 |
| | Slight worries only | <input type="checkbox"/> 1 |
| | Definite problems | <input type="checkbox"/> 2 |
| | Very severe problems | <input type="checkbox"/> 3 |
| I have difficulties in getting and keeping close relationships. | Severe difficulties | <input type="checkbox"/> 3 |
| | Some problems | <input type="checkbox"/> 2 |
| | Occasional problems | <input type="checkbox"/> 1 |
| | No problems at all | <input type="checkbox"/> 0 |
| I have problems in my sex life. | Severe problems | <input type="checkbox"/> 3 |
| | Moderate problems | <input type="checkbox"/> 2 |
| | Occasional problems | <input type="checkbox"/> 1 |
| | No problems at all | <input type="checkbox"/> 0 |
| I get on well with my family and other relatives. | Yes, definitely | <input type="checkbox"/> 0 |
| | Yes, usually | <input type="checkbox"/> 1 |
| | No, some problems | <input type="checkbox"/> 2 |
| | No, severe problems | <input type="checkbox"/> 3 |
| I feel lonely and isolated from other people. | Almost all the time | <input type="checkbox"/> 3 |
| | Much of the time | <input type="checkbox"/> 2 |
| | Not usually | <input type="checkbox"/> 1 |
| | Not at all | <input type="checkbox"/> 0 |

Social Functioning Questionnaire
SFQ

Items

I enjoy my spare time.	Very much	<input type="checkbox"/> 0
	Sometimes	<input type="checkbox"/> 1
	Not often	<input type="checkbox"/> 2
	Not at all	<input type="checkbox"/> 3