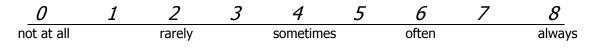
## social phobia weekly summary scale

name: ..... date: .....

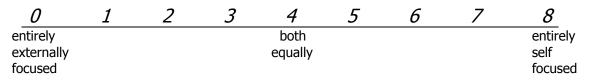
*a)* Please circle a number from the scale below that best describes how severe your social anxiety has been <u>in the last week:</u>

0	1	2	3	4	5	6	7	8
not at all		slightly		definitely		markedly		severely
disturbing		disturbing		disturbing		disturbing		disturbing
and/or		and/or		and/or		and/or		and/or
disabling		disabling		disabling		disabling		disabling

*b)* Please circle a number from the scale below to show how often <u>in the last week</u> you have avoided difficult social situations or aspects of those situations.



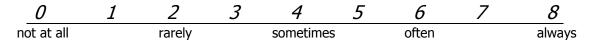
*c)* For social situations *in general*, please choose a number from the scale below to show the extent to which your attention was focused on yourself or on the external situation <u>in the last week</u>.



*d)* For social situations *that you found difficult*, please choose a number from the scale below to show the extent to which your attention was focused on yourself or on the external situation <u>in the last week</u>.

0	1	2	3	4	5	6	7	8
entirely				both				entirely
externally				equally				self
focused								focused

*e)* Over <u>the past week</u> how often have you gone over in your mind things that you think might go wrong in a social situation *before* entering the situation.



*f)* Over <u>the past week</u> how often have you gone over social interactions in your mind *after* they have finished.

