Please complete the following 4 questionnaires:   
 A) PHQ9, B) GAD 7, C) Phobia Scales and D) Work & Social Adjustment   
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1. **PHQ- 9** Using the following scale answer each question by inserting the relevant number at the end

* 0 = Not at all
* 1 = Several Days
* 2 = more than half the days
* 3 = nearly every day

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| Over the last 2 weeks, how often have you been **bothered** by any of the following problems? | | |
| 1 | Little interest or pleasure in doing things  Ki gbogbo nkan su eeyan tabi ki nkan kan ma mu inu didun ba eeyan |  |
| 2 | Feeling down, depressed, or hopeless  Iporuru okan, irewesi tabi si so ireti nu |  |
| 3 | Trouble falling or staying asleep, or sleeping too much  A ile sun rara tabi a ile sun dara dara tabi orun a sun ju |  |
| 4 | Feeling tired or having little energy  A i ni okun ati agbara |  |
| 5 | Poor appetite or overeating  Ki Ounje ma wun eeyan je |  |
| 6 | Feeling bad about yourself — or that you are a failure or have let yourself or your family down  Ero okan pe e ti toshi, tabi e ti ja awon eniyan ku le, tabi e ti ja ara yin kule |  |
| 7 | Trouble concentrating on things, such as reading the newspaper or watching television  Ki okan yin ma pa po si oju kan |  |
| 8 | Moving or speaking so slowly that other people could have noticed? Or the opposite — being so fidgety or restless that you have been moving around a lot more than usual  Ki ohun yin ma ja geeere tabi ni ida keji - ki e ma le soro soke tabi ki ara yin ma bale |  |
| 9 | Thoughts that you would be better off dead or of hurting yourself in some way  Ironu pi pa okun so, tabi pe iku ya ju esin lo, tabi pe fe se oun kan lati se ara yin lese |  |

**B) GAD-7** Using the following scale answer each question by inserting the relevant number at the end

* 0 = Not at all
* 1 = Several Days
* 2 = more than half the days
* 3 = nearly every day

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| Over the last 2 weeks, how often have you been **bothered** by any of the following problems? | |  |
| 1 | Feeling nervous, anxious or on edge  Ipaya tabi ai le fi ara bale |  |
| 2 | Not being able to stop or control worrying  Ki e ma le dekun ri ro nu |  |
| 3 | Worrying too much about different things  Ri ro inu ni gbogbo igba |  |
| 4 | Trouble relaxing  Ki e ma le fi ara bale se faaji |  |
| 5 | Being so restless that it is hard to sit still  Ara yin ko bale debi pe e o le joko jee |  |
| 6 | Becoming easily annoyed or irritable  Yi rara lati binu tabi irira |  |
| 7 | Feeling afraid as if something awful might happen  Ijaya ati kiko lominu pe ohun buruku kan maa too sele |  |

1. **Phobia Scales**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Choose a number from the scale below to show how much you would ***avoid***each of the situations or objects listed below. Then write the number in the box at the situation. | | | | | | | | | | |
|  | |  |  |  |  |  |  |  |  | |
| 0 | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | |
|  |  |  |  |  |  |  |  |  |  |  |
| Never avoid it | |  | Slightly avoid it |  | Definitely avoid it |  | Markedly avoid it |  | Always avoid it | |

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| 1 | Social situations due to a fear of being embarrassed or making a fool of myself  Yi yera fun awujo awon eeyan nitori eru itiju. |  |
| 2 | Certain situations because of a fear of having a panic attack or other distressing symptoms (such as loss of bladder control, vomiting or dizziness):  Yi yera fun awon ibi kan nitori e ro pe aya yin a maa ja ti e ba wan ibe tabi pe e le to sara tabi ki ooyi maa ko yin ti e ba wa nibe |  |
| 3 | Certain situations because of a fear of particular objects or activities (such as animals, heights, seeing blood, being in confined spaces, driving or flying):  Yi ye ra fun awon nkan kan bii - eranko, tabi eje, tabi baaloo tabi oke gegere |  |

1. **Work and Social Adjustment**

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.

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 0 | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
| Not at all | |  | Slightly |  | Definitely |  | Markedly | Very severely | | | |  |

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| --- | --- | --- |
| 1 | **WORK** - if you are retired or choose not to have a job for reasons unrelated to your problem, please tick N/A (not applicable) N/A – Ti e ko basi lenu ise e so pe ibeere yi ko tan moo yin |  |
| 2 | **HOME MANAGEMENT** – Cleaning, tidying, shopping, cooking, looking after home/children, paying bills etc  Itoju ile ati Itoju awon omo |  |
| 3 | **SOCIAL LEISURE ACTIVITIES -** With other people, e.g. parties, pubs, outings, entertaining etc.  Si se faaji |  |
| 4 | **PRIVATE LEISURE ACTIVITIES –** Done alone, e.g. reading, gardening, sewing, hobbies, walking etc.  Si se idara ya- ni eyin nikan |  |
| 5 | **FAMILY AND RELATIONSHIPS –** Form and maintain close relationships with others including the people that I live with  Ni ni ifinu ko inu ati gbigbe ni alaafia pelu awon ara ile yin |  |