

ID #: _____

DATE: ____ / ____ / ____

VISIT #: _____

PSS-SR

Sometime in the past you may have had traumatic experiences related to war and migration. These experiences may have occurred at anytime in your life. In the PSS-SR Questionnaire the words “traumatic events” refer to any of these experiences that may be occurring.

Directions: Please answer the following questions according to what has happened during the **past 2 weeks** using the 0-3 scale below.

0 = Not at all

1 = Once per week / a little bit / once in a while

2 = 2 to 4 times per week / somewhat / half the time

3 = 5 or more times per week / very much / always

- _____ 1. In the past 2 weeks, have you had upsetting thoughts or images about the trauma that came into your head when you didn't want them to?
- _____ 2. In the past 2 weeks, have you been having bad dreams or nightmares about the trauma?
- _____ 3. In the past 2 weeks, have you had the experience of reliving the trauma, acting or feeling as if it were happening again?
- _____ 4. In the past 2 weeks, have you been very EMOTIONALLY upset when reminded of the trauma (includes becoming very scared, angry, sad, etc.)?
- _____ 5. In the past 2 weeks, have you been having PHYSICAL reactions (for example, break out in a sweat, heart beats fast) when reminded of the trauma?
- _____ 6. In the past 2 weeks, have you been trying not to think about or have feelings associated with the trauma?
- _____ 7. In the past 2 weeks, have you been making efforts to avoid activities, situations, or places that remind you of the trauma?
- _____ 8. In the past 2 weeks, are there any important parts about the trauma that you still cannot remember?

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PSS-SR (continued)

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- _____ 9. In the past 2 weeks, have you found that you are not interested in things you used to enjoy doing?
- _____ 10. In the past 2 weeks, have you felt distant or cut off from others around you?
- _____ 11. In the past 2 weeks, have you felt emotionally numb (for example, feel sad but can't cry, unable to have loving feelings)?
- _____ 12. In the past 2 weeks, have you felt that any future plans or hopes have changed because of the trauma (for example, will have no career, marriage, children, or long life)? **DO NOT INCLUDE MOVING.**
- _____ 13. In the past 2 weeks, have you been having problems falling or staying asleep?
- _____ 14. In the past 2 weeks, have you been more irritable or having outbursts of anger?
- _____ 15. In the past 2 weeks, have you been having more difficulty concentrating (for example, drift in and out of conversations, lose track of story on television, difficulty in remembering what you have read)?
- _____ 16. In the past 2 weeks, have you been overly alert (for example, checking to see who is around you, uncomfortable with your back to a door, etc)?
- _____ 17. In the past 2 weeks, have you been jumpier, more easily startled (for example, when someone walks up behind you)?