The Subjective Experiences of Psychosis Scale

Service users and clinicians have developed this scale. It aims to assess people's personal experience of psychosis. Psychosis can include things like hearing voices, seeing things others don't see, paranoia and unusual beliefs that others don't share. Sometimes these are called psychotic experiences or symptoms. The questions ask about different ways that these can change or affect people's lives. Some of these may apply to you and some may not. Everyone's experiences are different. The scale can be completed alone, with a friend, carer or mental health worker.

This questionnaire has three sections. There are examples to show you how to fill out each section.

Instructions for Section One and Two

Participant

Think about what you call your experiences (e.g. symptoms,
psychosis, voices, illness, paranoia etc). You may want to write this in
the space below.
My experiences are
Spend time looking at each question and rate how your experiences
have affected you OVER THE LAST WEEK. For each question, consider
whether there has been a positive or negative effect. There is an
example on the next page that shows you how to do this.

An example of how to fill out Section One:

John has been hearing voices for some time. They vary in how much they bother him. Sometimes he feels glad that the voices are there as they can be helpful and supportive. This gives him confidence to get out and meet people. At other times he finds them demeaning. This sometimes makes him feel anxious and he avoids his friends.

So, for John, the experiences he has sometimes have a positive effect on his ability to socialise as well as a negative effect. This scale is designed to let you rate both the good aspects of your experiences as well as the bad aspects. An example of how John might fill out an item is shown below:

In the past week, how have your ' <i>Voices</i> ' affected your:								
		Not at all	A little	Mode- rately	Quite a lot	Very much		
1. Ability to socialise?	In a positive way			X				
	In a negative way		X					
As John only has ve experiences in the ser	oices, he has used t tence above.	his ter	m to	descri	be his			
	his voices have had a se, and a little negative			positive	effect			

Section 1- In the past week, how have your experiences affected your.....

		Not at all	A little	Mode- rately	Quite a lot	Very much
1. Ability to socialise?	In a positive way					
	In a negative way	/ <u></u>				
2. Ability to trust others?	In a positive way					
	In a negative way	<u> </u>				
Relationships with friends and loved ones?	In a positive way					
	In a negative way					
4. Levels of anxiety and stress?	In a positive way					
	In a negative way	<u>' </u>				
5. Levels of energy?	In a positive way					
	In a negative way					
6. Ability to look after yourself?	In a positive way					
	In a negative way	<u>′ Ш</u>				
7. Hope for the future?	In a positive way					
	In a negative way	/ <u> </u>	Ш			
8. Personality/character?	In a positive way					
	In a negative way	/ <u>Ш</u>				
Motivation to change any experiences you may have?	In a positive way					
	In a negative way	/ <u> </u>				

Section 1- In the past week, how have your experiences affected your.....

		Not at all	A little	Mode- rately	Quite a lot	Very much
10. Amount and/or quality of sleep?	In a positive way					
11. Ability to enjoy hobbies and/or activities?	In a positive way					
12. Feelings of Isolation?	In a positive way					
13. Concerns about becoming unwell?	In a positive way					
14. Concentration?	In a positive way					
15. Levels of depression?	In a positive way					
16. Feelings of empowerment?	In a positive way					
17. Ability to find work (e.g.paid/voluntary)?	In a positive way					
18. Worries over your financial situation?	In a positive way					

Section 1- In the past week, how have your experiences affected your.....

		Not at all	A little	Mode- rately	Quite a lot	Very much
19. Ability to control your own thoughts?	In a positive way	, <u> </u>				
	In a negative way	y 🔲				
20. Ability to cope with everyday life?	In a positive way					
	In a negative way	y 🗌				
21. Memory?	In a positive way					
	In a negative way	y 🗌				
22. Your feelings of control over any experiences you may have?	In a positive way					
	In a negative way	y <u> </u>				
23. Levels of embarrassment?	In a positive way					
	In a negative way	y <u> </u>	Ш	Ш	Ш	
24. Feelings about your freedom and personal rights?	In a positive way					
	In a negative way	у Ц				
25. Feelings of discrimination or being judged?	In a positive way					
	In a negative way	У 📙	Ш		Ш	
26. Ability to feel emotion?	In a positive way					
	In a negative way					
27. Feelings of vulnerability?	In a positive way					
	In a negative way	у 🔲				

Section 1- In the past week, how have your experiences affected your							
		Not at all	A little	Mode- rately	Quite a lot		
28. Sense of personal identity?	In a positive way	/ 🗆					
	In a negative wa	у 🔲					
29. Amount of anger and frustration?	In a positive way						
	In a negative way	/ 🗆					
Please tu	rn over for Section	on Two	o				

An example of how to fill out Section Two:

This section is interested in how things have affected your experiences. This may again be in a positive or a negative way. For example John felt his medication affected his voices moderately in a positive way as his bad voices happened less often. The medication also affected his voices in a negative way as his supportive voices reduced.

So John rated this item a In the last week, how ha Appli 30.Medication that you have taken.	ave the following things	affected your experiences: Not A Mode- Quite Very at all little rately a lot much X X	
		n you can just tick the 'not applical cation or use any alcohol/drugs.)le'
In the last week, how h		affected your experiences:	
Appli 30.Medication that X you have taken.	In a positive way	at all little rately a lot much	

Section 2- In the last week, how have the following things affected your experiences?

	Not Applicable		Not at all	A little	Mode- rately	Quite a lot	Very much
30. Medication that you have taken?	0	In a positive way					
31. Support from other service users?	0	In a positive way					
32. Support from friends and loved ones?	0	In a positive way					
33. Support that you have got from mental health services'	, 0	In a positive way					
34. Alcohol and/or drug use?	0	In a positive way					
35. Spirituality/religious beliefs?	0	In a positive way					

An example of how to fill out Section Three:

The last section looks at different aspects of your experiences and how they have been in the last week. For this section there is no positive or negative rating. So, for example, John has thought about his voices quite a lot in the past week so he would answer the question as follows:

In this section, you have to think about different aspects of your experiences and how they have been in the last week.							
	Not at all	A little	Mode- rately	Quite a lot	Very much		
36. How much have you thought about your experiences?				Х			

Section 3 - In this section, you have to think about different aspects of your experiences and how they have been in the last week.

	Not at all	A little	Mode- rately	Quite a lot	Very much
36. How much have you thought about your experiences?					
37. How much of the time have your experiences been pleasant?					
38. How much of the time have your experiences been unpleasant?					
39. How much have you associated your experiences with a psychotic illness or mental health problem?					
40. How much have you viewed having your experiences as positive?					
41. How frequently have your experiences occurred?					

Participant

Finally, we would also be interested in whether this has caused you any upset/distress when filling this out.							
when hilling this out.	Not at all	A little	Mode- rately	Quite a lot	Very much		
Please use this space to comment on any issues that ha completing this questionnaire:	ive bee	n high	lighted	whilst			