

ISOLATION SCALE

INSTRUCTIONS: Indicate how often each of the statements below is descriptive of you.

O indicates "I often feel this way"

Scoring: O = 3 | S = 2 | R = 1 | N = 0

S indicates "I sometimes feel this way"

R indicates "I rarely feel this way"

N indicates "I never feel this way"

1. I am unhappy doing so many things alone. O S R N

2. I have nobody with whom to talk. O S R N

3. I cannot tolerate being so alone. O S R N

4. I lack companionship . O S R N

5. I feel as if nobody really understands me. O S R N

6. I find myself waiting for people to call or write. O S R N

7. There is no one to whom I can turn. O S R N

8. I am no longer close to anyone. O S R N

9. My interests and ideas are not shared. O S R N

10. I feel left out. O S R N

11. I feel completely alone. O S R N

12. I am unable to reach out and communicate. O S R N

13. My social relationships are superficial. O S R N

14. I feel starved for company. O S R N

15. No one really knows me well. O S R N

16. I feel isolated from others. O S R N

17. I am unhappy being so withdrawn. O S R N

18. It is difficult for me to make friends. O S R N

19. I feel shut out and excluded by others. O S R N

20. People are around me but not with me. O S R N