

Social Anxiety Scale for Children and Adolescents

Name: _____ Date: _____

INSTRUCTIONS: Pick out the **one answer** that best describes the way you have been feeling during the past week, including today. Circle the number of the correct answer. Please do not choose more than one number for each statement. Respond to each situation as best you can: if it's not a problem at all; if it's a mild problem, that is bothersome but doesn't interfere with daily activities; or a moderate problem, that does interfere with daily activities; or a severe problem, that makes it very hard to have a normal day at all.

During the past week I have had problems with...	Not a Problem	Mild	Moderate	Severe
1. Talking to classmates or other people on the telephone	0	1	2	3
2. Participating in work groups in the classroom	0	1	2	3
3. Eating in front of other people	0	1	2	3
4. Asking a grownup, or somebody I do not know very well, for help	0	1	2	3
5. Being called on to answer, or to present in class	0	1	2	3
6. Going to parties or dances or other school activities	0	1	2	3
7. Writing on the blackboard in front of other kids	0	1	2	3
8. Talking with other kids I don't know very well	0	1	2	3
9. Starting a conversation with people I don't know well	0	1	2	3
10. Using a public bathroom	0	1	2	3
11. Going into a class or another room when other people are already seated	0	1	2	3
12. Having people pay close attention to me, or being the center of attention	0	1	2	3
13. Asking questions in class	0	1	2	3
14. Answering questions in class	0	1	2	3
15. Reading out loud in class	0	1	2	3
16. Saying "no" to other people when they ask me to do something	0	1	2	3
17. Telling other people that I disagree with them, or that I am angry with them	0	1	2	3
18. Looking at people in the eyes	0	1	2	3
19. Joining a new club or organization	0	1	2	3
20. Meeting new people or strangers	0	1	2	3

MEAN ITEM SCORE		TOTAL SCORE	
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