

Vejledningen til patienter omkring PRO-psykiatri samt spørgeskemaet er oversat til arabisk, engelsk og grønlandsk. Oversættelserne kan bruges som hjælpeværktøjer, i de tilfælde hvor patienten begår sig bedst på et af disse sprog. Personalet kan være behjælpeligt med at udskrive oversættelserne i papirform, det fremmedsprogede spørgeskema kan så gives til patienten, som kan bruge det som hjælpeværktøj når patienten afgiver sine svar elektronisk på [www.pro-psykiatri.dk](http://www.pro-psykiatri.dk). De fremmedsprogede spørgeskemaer er IKKE tænkt til at patienten kan svare på PRO-Psykiatri i papirformat, det kan ikke lade sig gøre. Det er alene patienten, som kan indtaste sine svar elektronisk.



## ***PRO-items and patient profile-questions***

During the past 2 weeks:

1. I have felt cheerful and in good spirits
2. I have felt calm and relaxed
3. I have felt active and vigorous
4. I have woken up feeling rested and refreshed
5. My daily life has been filled with things that interest me
6. I have felt pleased with myself for doing activities which are important to me  
(e.g. keeping appointments, taking my medicine)
7. I have felt hope for the future
8. I have forgotten to do important things  
(e.g. keep appointments, take my medication etc.)
9. I have not been able to concentrate on having a conversation
10. I have experienced changes in my normal eating habits  
(e.g. loss of appetite or under or overeating)
11. I have had thoughts indicating it would be better if I was dead
12. I have had thoughts about harming myself
13. Because of my health problems, my ability to work/take an education is impaired
14. Because of my health problems, my home management (cleaning, tidying, shopping, cooking, looking after home or children, paying bills) is impaired
15. Because of my health problems, my social leisure activities (with other people, e.g. parties, bars, clubs, outings, visits, dating, home entertaining) are impaired
16. Because of my health problems, my private leisure activities (performed alone, such as reading, gardening, collecting, sewing and walks) are impaired
17. Because of my health problems, my ability to form and maintain close relationships with others, including the people I live with, is impaired.
18. Do you take prescribed medications for your psychiatric disease? (Yes/No)
  - a. If "Yes", the following items are to be answered:
  - b. During the past 2 weeks, I have experienced side effects of my medication which have influenced my quality of life

Answer categories for items 1-18

5	4	3	2	1	0
All of the time	Most of the time	More than half of the time	Less than half of the time	Some of the time	At no time

### **19. In general, would you say your physical health is:**

(Physical health meaning, e.g. well-being, condition, pain, heartbeat, dental health, shortness of breath, sexuality, appetite, weight, fatigue)

### **20. In general, would you say your mental health is:**

(Mental health meaning, e.g. hope, interests, concentration, motivation for regular activities)

Answer categories for items 19-20

5	4	3	2	1
Excellent	Very good	Good	Fair	Poor



## ***Patient profile-items (data is only collected once a year)***

1. Have you completed your schooling?  
(Schooling meaning municipal primary and lower secondary school (the Folkeskole)/corresponding or foreign schooling equivalent to Danish municipal primary and lower secondary school)
  - Yes, after 7 years or fewer years of schooling
  - Yes, after 8 – 9 years of schooling
  - Yes, after 10 – 11 years of schooling
  - No, I am still attending primary and lower secondary school
  
2. Have you completed an upper secondary education?  
(Upper secondary education meaning a 2-3-year education after primary and lower secondary school, e.g. higher technical examination (htx), higher commercial examination (hcx), upper secondary school leaving examination (stx), higher preparatory examination (hf), or equivalent, e.g. foreign education)
  - Yes, I have completed
  - No, I am still attending my upper secondary education
  - No
  
3. Have you completed an education besides municipal primary and lower secondary school or upper secondary education?
  - Yes, one or more short courses, e.g. courses for semi-skilled workers and labour market courses
  - Yes, vocational education and training/skilled worker, e.g. clerk, shop assistant, hairdresser, bricklayer, medical secretary, social and health care assistant, farmer
  - Yes, short higher education, 2 – 3 years, e.g. market economist, policeman, laboratory technician, mechanical engineer, computer specialist, multimedia designer, catering officer, dental hygienist
  - Yes, medium-cycle higher education, 3 – 4 years, e.g. teacher in the Folkeskole, social worker, architectural engineer, nurse, physiotherapist, BSc in engineering, nursery teacher/kindergarten teacher, bachelor
  - Yes, long higher education, more than 4 years, e.g. MSc in engineering, master of arts, doctor, psychologist
  - Yes, another education
  - I am attending an education
  - No
  
4. Do you have a job?  
(Job meaning all kinds of paid work)
  - Yes
  - No



5. Do you live together with other people?
  - No, I live alone
  - Yes, I live together with spouse/partner/boy or girl friend
  - Yes, I live together with a child/children below the age of 16
  - Yes, I live together with others at the age of 16 or above
  
6. Have you anyone to talk to if you have some problems or need support?
  - Yes, always
  - Yes, most of the time
  - Yes, sometimes
  - No, never or almost never
  
7. How often do you drink alcohol?
  - Never
  - Monthly or on rarer occasions
  - Two to four times a month
  - One to three times a week
  - Four times a week or more
  
8. When drinking alcohol, how many units of alcohol (one drink, one glass of wine or one regular beer) do you then consume a day? (If you never drink alcohol, then please skip this question)
  - 1-2
  - 3-4
  - 5-6
  - 7-9
  - 10 or more
  
9. How many times within the last 12 months have you smoked pot or used other drugs? (Other drugs meaning cocaine, amphetamine, ecstasy or the like)
  - 0
  - 1-2 times
  - 3-5 times
  - 6-9 times
  - 10-19 times
  - At least 20 times
  
10. What is the postal code of your home address?  
-----