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IISSE

INNER INTERACTION SCALE OF SOCIAL FUNCTIONING INSTRUCTIONS

This questionnaire is designed to obtain information about family strengths, resources, and problem areas. Answer each item as carefully and as accurately as you can by placing a number beside each one as follows:

1 = None of the time
2 = Very rarely
3 = A little of the time
4 = Some of the time

5 = A good part of the time
6 = Most of the time
7 = All of the time
X = Does not apply

You may discover that some of the items do not apply to you or your personal situation. For any such item, please enter an x or X but *do not leave any item blank*.

You will also note that some items referred to your family as a whole. When this is the case, think of how the item applies to the family as a unit. Other items referred to a member of the family. For such items, answer the question by thinking of the family member to whom the item applies the most.

When you begin to complete the items on this questionnaire, you will see that you can easily make your family look as good or as bad as you wish. Please do not do that. It is extremely important for you to provide the most accurate answers possible even though you may feel embarrassed or uncomfortable. If you provide incorrect or misleading information, it will be difficult to provide helpful services to your family members.

Name _____

Address _____

City _____ **State/Prov** _____ **Postal Code** _____

Age _____ **Gender:** _____ **Male** _____ **Female** **Race** _____

ID _____ **Date** _____

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Answer Key

1 = None of the time

2 = Very rarely

3 = A little of the time

4 = Some of the time

5 = A good part of the time

6 = Most of the time

7 = All of the time

8 = Do not apply

SAMPLE

SUBSCALE: ACHIEVEMENT ACCOMPLISHMENT

- 1. _____ I am usually effective in what I do.
- 2. _____ I am goal oriented.
- 3. _____
- 4. _____
- 5. _____ I am usually successful.
- 6. _____ I am enthusiastic about what I do.
- 7. _____
- 8. _____
- 9. _____ I always want to be busy with something.
- 10. _____ It is important to me to reach my planned objectives.
- 11. _____
- 12. _____ I am a hard-working person.

SUBSCALE: SATISFACTION

- 13. _____ I feel cheerful.
- 14. _____ I feel good about the course my life is taking at present.
- 15. _____
- 16. _____
- 17. _____ I feel joyful.
- 18. _____ I feel happy.
- 19. _____
- 20. _____
- 21. _____ I feel satisfied with my present accomplishments.
- 22. _____ I feel satisfied with the standard of my life.
- 23. _____
- 24. _____ I accept my circumstances.

SUBSCALE: EXPECTATION

- 25. _____ It is important to me to encourage others.
- 26. _____
- 27. _____ I focus on the positive elements in others.
- 28. _____
- 29. _____ I'm optimistic about my future.
- 30. _____
- 31. _____ It is important to me to reassure others.
- 32. _____
- 33. _____ I believe that things will turn out favorably.
- 34. _____
- 35. _____ I adapt to bad things that happened to me in a positive way.

Answer Key

1 = None of the time

2 = Very rarely

3 = A little of the time

4 = Some of the time

5 = A good part of the time

6 = Most of the time

7 = All of the time

8 = Does not apply

SAMPLE

SUBSCALE: SUSCEPTIBILITY

- 36. _____ I usually feel like getting upset at others.
- 37. _____
- 38. _____ I easily feel frustrated.
- 39. _____
- 40. _____ I easily become embittered.
- 41. _____
- 42. _____ I have a quick temper.
- 43. _____
- 44. _____ I easily feel impatient.
- 45. _____

SUBSCALE: STRESS

- 46. _____ I easily feel overstressed.
- 47. _____
- 48. _____ I feel washed out.
- 49. _____
- 50. _____ I easily become worried.
- 51. _____
- 52. _____ I feel close to a breaking point.
- 53. _____
- 54. _____ It is difficult for me to keep up the pace.
- 55. _____
- 56. _____ I feel there's too much pressure on me.

SUBSCALE: HELPLESSNESS

- 57. _____ I wish I could just run away from it all.
- 58. _____
- 59. _____ I feel down in the dumps.
- 60. _____
- 61. _____ I feel like giving up.
- 62. _____
- 63. _____ I feel like a failure.
- 64. _____
- 65. _____ I feel downhearted.
- 66. _____
- 67. _____ My life seems to have limited expectations.
- 68. _____
- 69. _____ I feel depressed.

ISSF SUBSCALE SCORING BLANK

SAMPLE

Subscale Name	A Total Items	Item Used	n	D (- B) Used	D*1 (B*6)
Achievement	12	_____	_____	_____	_____
Satisfaction	12	_____	_____	_____	_____
Expectation	11	_____	_____	_____	_____
Frustration	10	_____	_____	_____	_____
Stress	11	_____	_____	_____	_____
Helplessness	13	_____	_____	_____	_____

ISSF SCORE PROFILE GRAPH

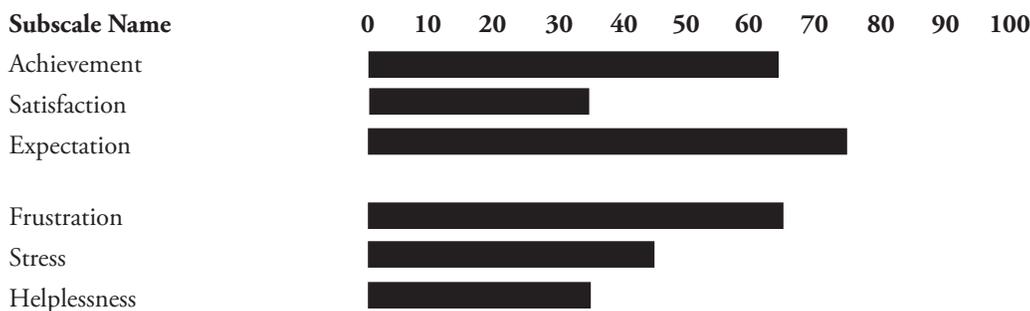
Subscale Name	0	10	20	30	40	50	60	70	80	90	100
Achievement											
Satisfaction											
Expectation											
Frustration											
Stress											
Helplessness											

The Inner Interaction Scale of Social Functioning

The Inner Interaction Scale of Social Functioning (IISF) is a self-report measure used to evaluate social functioning and social dysfunctioning. The IISF contains 69 items that required an average of 15 minutes to complete. Clients respond to each item using a seven point category partition scale. The IISF is divided into six different subscales representing the six constructs that have been identified. The subscales range in length from 10 to 13 items, with each subscale producing its own score. All the subscales can be scored manually in about 15 minutes and scored by computer takes approximately five minutes. The subscale scores are used to develop a graphic profile of a client's social functioning that is then used in assessment and treatment planning.

The scale is used primarily during the intake or beginning phases of treatment or service delivery as an aid to diagnosis and treatment planning. Although the major application of the IISF focuses on early assessment of problems in social functioning, the IISF can also be used during treatment to provide a description of change that may have occurred during the period between administrations. The IISF can therefore be used to develop and support quality assurance objectives within your organization. Whether it is used for interim assessments or not, it is especially well suited for use immediately before termination of service or treatment as a means of reflecting progress over the entire period of contact.

Although the subscale scores on the IISF are easy to compute and understand, they are more readily comprehended and used for planning and assessment purposes by presenting them in the form of a graphic profile. The profile graph is designed in such a manner that the polarity of social functioning is clearly illustrated. The example of such a profile, shown below, reflects the scores obtained from a client who participated in the testing of the IISF.



Profile Graph of the IISF

Examination of the profile graph shown above clearly reveals the relationship between the three scales that measure social functioning and between the three scales that measure social dysfunctioning. With the cutting scores as an additional interpretation aid, the graph represents an important aid to treatment planning, ongoing assessment, and progress evaluation.

A social functioning assessment instrument

The IISF is a social functioning assessment device. It is not a personality inventory, and it was not designed to measure or evaluate psychopathology or mental disease.

If the purpose of assessment is to evaluate or describe personality traits or the presence of, or potential for, psychopathology, the IISF should not be used. Social functioning in the environment is a dynamic concept that changes from day to day, depending on circumstances. Therefore, the results of the IISF can change from day to day and is not intended to measure something like personality traits, that are much more stable constructs.

If you wish to evaluate or describe personality traits; if you need to investigate presence of, or potential for, psychopathology; or if you will

be tempted to view or interpret the results of the IISSF in terms of personality traits, psychopathology, or mental illness, then the IISSF should not be used with your clients.

The IISSF as a self-report measure

The IISSF is a self-report assessment tool that measures the degree, severity, or magnitude of a wide range of problems in social functioning. Each subscale of the IISSF has the same format and structure, and they all have 10 to 13 items. This particular length was selected for three specific reasons:

- The subscales are long enough to produce good reliabilities.
- They are short enough to keep fatigue to an acceptable level.
- The use of 10 to 13 items leads to the construction of simple and rapid scoring procedures.

Scoring and interpreting the IISSF

Client performance on the subscales of the IISSF is relatively easy to interpret, as each subscale produces a score ranging from 0 to 100. Each subscale is scored in exactly the same manner and only one scoring formula is needed for all subscales.

Lower scores on the three negative constructs (frustration, stress, helplessness) represent the relative absence of problems in these areas of social functioning, while higher scores on the three positive constructs (achievement, satisfaction, expectation) represent the relative absence of problems in these areas of social functioning. Higher scores on the negative areas and lower scores on the positive areas represent more serious problems in these areas. Each subscale has its own clinical cutting score that is useful for diagnostic and planning purposes and is reported elsewhere in this manual.

Cutting scores

A very important characteristic of the IISSF is that all the subscales having known clinical cutting score. The mean cutting score for the three subscales that measure social functioning is 75, and for the three subscales that measure social dysfunctioning, the mean clinical cutting score is 25. This means that it is generally found that persons who obtain a score below 75 on the three subscales that measure social functioning, and a score above 25 on the three subscales that measure social dysfunctioning have a clinically significant problem in the indicated areas. On the other hand, it is also found that persons who obtain a score above 75 on the three subscales that measure social functioning and below 25 on the three subscales that measure social dysfunctioning, are generally free of problems in their social functioning.

The existence of such a clinical cutting score is important to both clinicians and researchers. It provides both a diagnostic benchmark and a criterion against which to judge the effectiveness of treatment.

Psychometric characteristics of the IISSF

In the development of the different subscales, it was recognized that any measurement tool that is used to characterize human problems or to make decisions about them must have at least two major psychometric characteristics: it must be reliable, and it must be valid. However, if a scale is to be used repeatedly with the same client to monitor and evaluate the severity of the clients problems, it must have a number of other desirable characteristics (Hudson 1982):

- it must be short.
- It must be easy to administer.
- It must be easy to score.
- It must be easy to understand and interpret.
- It must not suffer response to K when used repeatedly over many occasions.

Each of the subscales meets all of these psychometric requirements. Each scale has a reliability of .85 or better, and they all have good content, construct, and criterion validity.

Restrictions on using the IISSF

It is important to know about some of the general guidelines and restrictions concerning the use of the IISSF:

The scales should not be used with persons under the age of 12 years. The literacy skills, cognitive development, and ability to integrate affective responses with the item content and meaning of each of the subscales demand a level of maturity not usually found in persons under 12 years of age. If one is working with an unusually precocious child under the age of 12 and is convinced that the person's responses will be valid, then the scales can be used, but with great caution and not before experience has been gained with older clients. Experience will help the therapist to evaluate if the responses of the child can be seen as valid.

The scales should not be used with persons who have severe cognitive impairment (e.g., retardation, senility, active psychosis, brain damage). Severely impaired individuals rarely give valid responses even though such persons may function well in the community.

The scales should be used with great caution in situations wherein the professional counselor is in a position to give or withhold important or valued social sanctions, and the clients responses can be seen as having any possible influence on the service worker's decisions in that regard, e.g., parole. Under such circumstances, the validity of the results must be carefully judged against any and all other evidence concerning the client's progress in treatment.

The scales were designed largely for use by those who have grown up or lived in what is generally regarded as a Western culture. The psychometric research that has been conducted to standardize the IISSF has relied dominantly on those who have grown up in such a culture. This is important to know because it means we cannot be sure the IISSF will perform in the same manner when used with people from markedly different cultures. Thus, you should be alert to the fact that it may not be suitable for use with individuals from different cultures.

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