WAI - SR - Patient

Instructions: Below is a series of statements about experiences people might have with their IBS therapy or therapist. Some items refer directly to your therapist with an underlined space - as you read the sentences, mentally insert the name of your therapist in the place of _____ in the text. For each statement, please take your time to consider your own experience and then fill in the appropriate bubble.

Important: The rating scale is not the same for all the statements. PLEASE READ CAREFULLY!

Subject ID	Month	Day	Year	Week
0 0 0 0 1 1 1 1 2 2 2 2 3 3 3 3 4 4 4 4 5 5 5 5 6 6 6 6 7 7 7 7 8 8 8 8 9 9 9 9	0 0 1 1 2 2 3 3 4 4 5 5 6 6 7 7 8 8 9 9	0 0 1 1 2 2 3 3 4 4 5 5 6 6 7 7 8 8 9 9	0 0 1 1 2 2 3 3 4 4 5 5 6 6 7 7 8 8 9 9	0 0 1 1 2 2 3 3 4 4 5 5 6 6 7 7 8 8 9 9

1. As a result of these sessions I am clearer as to how I might be able to change.

1 Seldom 2 Sometimes 3 Fairly Often 4 Very Often 5 Always

2. What I am doing in therapy gives me new ways of looking at my IBS problem.

1 Seldom 2 Sometimes 3 Fairly Often 4 Very Often 5 Always

3. I believe _____ likes me.

5 Always 4 Very Often 3 Fairly Often 2 Sometimes 1 Seldom

4. _____ and I collaborate on setting goals for my IBS therapy.

1 Seldom 2 Sometimes 3 Fairly Often 4 Very Often 5 Always

5. _____ and I respect each other.

5 Always 4 Very Often 3 Fairly Often 2 Sometimes 1 Seldom

6. _____ and I are working towards mutually agreed upon goals.

5 Always 4 Very Often 3 Fairly Often 2 Sometimes 1 Seldom

7. I feel that _____ appreciates me.

5 Always 4 Very Often 3 Fairly Often 2 Sometimes 1 Seldom

8. _____ and I agree on what is important for me to work on.

1 Seldom 2 Sometimes 3 Fairly Often 4 Very Often 5 Always

9. I feel _____ cares about me even when I do things that he/she does not approve of.

5 Always 4 Very Often 3 Fairly Often 2 Sometimes 1 Seldom

10. I feel that the things I do in IBS therapy will help me to accomplish the changes that I want.

1 Seldom 2 Sometimes 3 Fairly Often 4 Very Often 5 Always

11. _____ and I have established a good understanding of the kind of changes that would be good for me.

1 Seldom 2 Sometimes 3 Fairly Often 4 Very Often 5 Always

12. I believe the way we are working with my IBS problem is correct.

5 Always 4 Very Often 3 Fairly Often 2 Sometimes 1 Seldom