

**Short Questionnaire for Family Members**  
**Family Member Questionnaire (FMQ)**  
 (See notes on completion and scoring on page 3&4)



**To your knowledge, have any of the following happened in the last 3 months, as a result of your relative's drinking/drug use/gambling? Please tick one answer to each question**

	Never	Once or Twice	Sometimes	Often
1. Have the family's finances been affected?	0	1	2	3
2. Does your relative's drinking/drug use/gambling get in the way of your social life?	0	1	2	3
3. Are you worried that your relative has neglected his/her appearance or self-care?	0	1	2	3
4. Has your relative picked quarrels with you?	0	1	2	3
5. Has your relative sometimes threatened you?	0	1	2	3
6. Has your relative upset family occasions?	0	1	2	3

**In the last 3 months, how frequently have you experienced each of the following symptoms? Please tick one answer to each question**

	Never	Sometimes	Often
7. Worrying	0	1	2
8. Being irritable	0	1	2
9. Had thoughts that you cannot push out of your mind	0	1	2
10. Had parts of the body feel weak	0	1	2
11. Cannot concentrate	0	1	2
12. Awakening early and not being able to fall asleep again	0	1	2

**With respect to your relative's alcohol/drug use/gambling, in the last 3 months have you**

	Never	Once or Twice	Sometimes	Often
13. Started an argument with him/her about his/her drinking/drug use/ gambling?	0	1	2	3
14. Got moody or emotional with him/her?	0	1	2	3
15. Watched his/her every move or checked up on him/her or kept a close eye on him/her?	0	1	2	3
16. Sat down together with him/her and talked frankly about what could be done about his/her drinking/drug use/gambling?	0	1	2	3
17. Made it clear that you won't accept his/her reasons for drinking/taking drugs/gambling, or cover up for him/her?	0	1	2	3
18. Made clear to him/her your expectations of what he/she should do to contribute to the family?	0	1	2	3
19. Put yourself out for him/her, for example by getting him/her to bed or by clearing up mess after him/her after he/she had been drinking/taking drugs/gambling?	0	1	2	3
20. Given him/her money even when you thought it would be spent on drink/drugs/gambling?	0	1	2	3
21. When things have happened as a result of his/her drinking/drug use/gambling, made excuses for him/her, covered up for him/her, or taken the blame yourself?	0	1	2	3
22. Pursued your own interests or looked for new interests or occupation for yourself, or got more involved in a political, church, sports or other organisation?	0	1	2	3

	Never	Once or Twice	Sometimes	Often
23. Got on with your own things or acted as if he/she wasn't there?	0	1	2	3
24. Sometimes put yourself first by looking after yourself or giving yourself treats?	0	1	2	3
<b>In the last 3 months, have these things happened when you have been concerned about your relative's alcohol/drug use/gambling:</b>				
25. Friends/relations have listened to me when I have talked about my feelings	0	1	2	3
26. Friends/relations have been there for me	0	1	2	3
27. Friends/relations have talked to me about my relative and listened to what I have to say	0	1	2	3
28. Health/social care workers have given me helpful information about problem drinking or drug taking or gambling	0	1	2	3
29. Health/social care workers have made themselves available for me	0	1	2	3
30. I have confided in my health/social care worker about my situation	0	1	2	3
31. Friends/relations have said things about my relative that I do NOT agree with	0	1	2	3
32. Friends/relations have said that my relative does NOT deserve help	0	1	2	3
33. Friends/relations have said nasty things about my relative	0	1	2	3

## Notes to person completing the FMQ

### Completing the ID at the top of the FMQ

1. Enter in one of the following letters
  - a. **I** for Individual session or
  - b. **G** for Group work or
2. Enter in the family member's initials
3. Add the numbers for the month and year the family member was born.
4. Please ensure the top of each sheet is complete (name of practitioner that the family member has seen, specify date and tick/circle if pre/post/3-month).

### Completing the Questionnaire AND the Chart below

5. Please ensure that the questionnaire is completed as fully as possible – if a family member is unsure about a question then ask them to give the answer which most closely corresponds to their experience in the time frame.
6. Please give the details of BOTH family member AND drinking/drug using/gambling relative in the chart below.

### When to complete the FMQ

7. If providing the 5-Step Method in individual sessions, the FMQ should be carried out either before or at the start of Step 1. This should be a relatively short process - either the FM can fill it out themselves or the practitioner can read the questions out and tick the boxes. If the 5-Step Method is being provided in a group session, the practitioner may decide to use it in a pre-Step 1 session.
8. The FMQ must then be repeated at the end of Step 5.
9. Ideally, the FMQ should then be repeated 3 mths after the end of the last session (3-month f-u).
10. **Please ensure the same Client ID code is used**, so the FMQs from Step 1, Step 5 and 3-month f-u can be matched up.

<b>Chart for Family Member Details: Only fill this the first time this questionnaire is completed – during, or before, the first 5-Step Method session.</b>	<b>Response</b>
<b>The Affected Family Member</b>	
What is the gender of the Affected Family Member? i.e. Male/Female/Other- please state	
How old is the Affected Family Member?	
What is the cultural background that the Affected Family Member identifies with most? <i>(NB. To adapt- this needs to be appropriate to the country/culture being used)</i>	
<b>The Person with the Alcohol/Drug/Gambling Problem</b>	
What is the relationship of the person with the alcohol/drug/gambling problem to the Affected Family Member (i.e. <u>is the person with the problem the AFM's</u> : husband/wife /partner/son/daughter/mother father/ brother/ sister/ friend / etc)?	
What is the gender of this person with the alcohol/drug /gambling problem?	
What is the age of this person with the alcohol/drug /gambling problem?	
What is the cultural background that the person with the alcohol/drug/gambling problem identifies with most? <i>(NB. To adapt- this needs to be appropriate to the country/culture being used)</i>	
What is the primary substance of misuse of the person with the alcohol/drug problem? For gambling see the next TWO questions below:	
How/where does the person's gambling typically take place? Venue e.g Casino/TAB; Online; Phone App; Not Sure; Other	
What is the main type of gambling the person typically engages with? Electronic Gaming; Horse/Dog Betting; Sports Betting; Lotto; Casino Table Games; Cards (outside casino), Not Sure, Other	
Approximately how long has the person with the alcohol/drug /gambling issue had the problem? State 'X' years and 'Y' months.	

## Scoring & Understanding the FMQ

1. If using the paper copy the practitioner can either score and collate this below, or alternatively simply send the complete FMQ or a copy, without scoring it, to the central office for completion.
2. Whether or not you do score and collate it yourself, please remember to send a copy to the central office.
3. If you do score it, please use the table below to work out the 9 sub-scales, and the totals for 2 of the main components of the questionnaire (impact and symptoms). There are no overall totals for coping and support because in some cases an increase in score is indicative of positive change while in other cases a reduction in score suggests positive change.
4. The arrow on each line indicates whether the score should increase or decrease over time in order to show a positive improvement in that scale or sub-scale.
5. You can also sum the boxes shaded in a darker tone to calculate the 'total family burden' experienced and see if this decreases over time.
6. Currently, we have not designated any 'clinical thresholds' for the scales (that is, stating that if people score at a certain level or above, they are defined as showing (for example) severe impact). At this stage it is simply important to see if people's Impact or Symptoms scores reduce or their Coping methods or the Support they receive improves.
7. **Central Office Collation for All Results:** If you are using a paper copy it is vital that you save a scanned copy of the questionnaires with a file name that is the same as the ID code, along with whether it is pre-/post- or follow-up e.g. IGV0464Pre. Keep a copy yourself and make a note of the code number in your file notes. For any queries please contact [gillvelling@gmail.com](mailto:gillvelling@gmail.com)

Scale / sub-scale	Score Before intervention	Score After intervention	Score 3 mth After intervention
<b>Impact</b>			
Worrying behaviour (sum of Q1-3) ↓			
Active disturbance (sum of Q4-6) ↓			
<b>TOTAL Impact (sum of Q1-6) ↓</b>			
<b>Symptoms</b>			
Psychological symptoms (sum of Q7-9) ↓			
Physical symptoms (sum of Q10-12) ↓			
<b>TOTAL Symptoms (sum of Q7-12) ↓</b>			
<b>Coping</b>			
Engaged coping emotional (sum of Q13-15) ↓			
Engaged coping assertive (sum of Q16-18) ↓			
Tolerant inactive coping (sum of Q19-21) ↓			
Withdrawal coping (sum of Q22-24) ↑			
<b>Support</b>			
Helpful informal support (sum of Q25-27) ↑			
Helpful formal support (sum of Q28-30) ↑			
Unhelpful informal support (sum of Q31-33) ↓			
<b>TOTAL FAMILY BURDEN</b>			
Sum the 4 shaded boxes above ↓			