

# Misophonia Family/Significant Other Assessment Questionnaire

The F-MAQ, 2014, Dr. Marsha Johnson, AuD, can be used with permission.

## RATING SCALE:

0 = not at all, 1 = a little of the time, 2 = a good deal of the time, 3 = almost all of the time

N/A = Not applicable/unable to answer

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|--|---|---|---|---|
| 1. Sound sensitivity issues significantly impact our family happiness.   | 0 | 1 | 2 | 3 |
| 2. Sound sensitivity issues have significantly changed our regular family lifestyle.                                     | 0 | 1 | 2 | 3 |
| 3. Sound sensitivity issues negatively impact our family's regular routines or habits.                                   | 0 | 1 | 2 | 3 |
| 4. Sound sensitivity issues and negative impact are greater at home.   | 0 | 1 | 2 | 3 |
| 5. Sound sensitivity issues and negative impact are greater outside the home.  | 0 | 1 | 2 | 3 |
| 6. Sound sensitivity issues have impacted my marital life (routine habits and behaviors).                                | 0 | 1 | 2 | 3 |
| 7. Sound sensitivity issues have created significant stress between parents or adult members of the family.              | 0 | 1 | 2 | 3 |
| 8. Sound sensitivity issues have created significant stress between siblings.  | 0 | 1 | 2 | 3 |
| 9. Sound sensitivity issues have resulted in verbal arguments.   | 0 | 1 | 2 | 3 |
| 10. Sound sensitivity issues have resulted in physical violence or attempted violence or threats of violence.            | 0 | 1 | 2 | 3 |
| 11. Sound sensitivity issues disrupt our normal routine at home.   | 0 | 1 | 2 | 3 |
| 12. Sound sensitivity issues disrupt out of the home activities, plans, travel, recreation, social, or other activities. | 0 | 1 | 2 | 3 |
| 13. I am one of the main triggers for the affected person.   | 0 | 1 | 2 | 3 |
| 14. I am being asked to vary my own normal behaviors or actions to avoid triggering someone else.                        | 0 | 1 | 2 | 3 |
| 15. I feel that the sound sensitive person could control their negative reactions if they wanted.                        | 0 | 1 | 2 | 3 |
| 16. When I try to reach out and try to help, I feel that I am shut out and my approach is rejected.                      | 0 | 1 | 2 | 3 |
| 17. We have been unable to locate appropriate and effective treatment for our family member.                             | 0 | 1 | 2 | 3 |
| 18. I am worried or anxious about the future of our family life and the impact this condition will have.                 | 0 | 1 | 2 | 3 |

**Total Score**

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