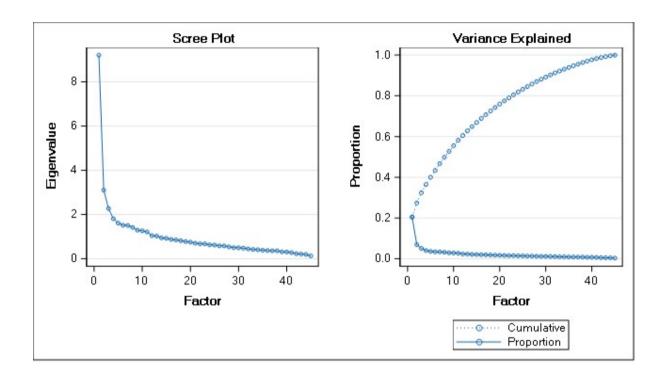
SPUR (Social Psychological Usage Rational) PCA (Principal Component Analysis) Scree Plot



THE OBSERVIA SPUR (Social Psychological Usage Rational) QUESTIONNAIRE Complete form - 45 items form

THE OBSERVIA TREATMENT BEHAVIOR QUESTIONNAIRE

1. My [health prob	lem] affects my rela	tionships with those I	care about.	
1	2	3	4	5
I strongly disagree				I strongly agree
2. My [health prob	lem] affects my soci	al life.		
1	2	3	4	5
I strongly disagree				I strongly agree
3. I would be inter	ested in knowing if o	others with [health pro	blem] follow their	treatment plan.
1	2	3	4	5
I strongly disagree				I strongly agree
4. I think that peop	ole with [health prob	lem] generally follow t	heir doctors' pres	cription exactly.
1	2	3	4	5
I strongly disagree				I strongly agree
5. The people in m	y life help me mana	ge my [health problem].	
1	2	3	4	5
I strongly disagree				I strongly agree

6. Fighting for my	6. Fighting for my health is my highest priority.					
1	2	3	4	5		
I strongly disagree				I strongly agree		
7. Precisely follow	ring doctors' recomr	mendations is the best	t way for me to stay	healthy.		
1	2	3	4	5		
I strongly disagree				I strongly agree		
8. I trust doctors' r	ecommendations.					
1	2	3	4	5		
I strongly disagree				I strongly agree		
9. It is essential th	at I follow my treatm	nent plan.				
1	2	3	4	5		
I strongly disagree				I strongly agree		
10. Sometimes my	[health problem] see	ms unreal to me.				
1	2	3	4	5		
I strongly disagree				I strongly agree		
11. I'm the kind of p	person who will follo	w their treatment plar	n exactly.			
		\sqcup				
1	2	3	4	5		
I strongly disagree				I strongly agree		
12. I will have to tal	ke a treatment for my	/ [health problem] for	the rest of my life.			
1	2	3	4	5		
I strongly disagree				I strongly agree		
13. I live in the mon	nent.					
				Ш		
1	2	3	4	5		
I strongly disagree				I strongly agree		

14. If my doctor recommends that I do something, I do it.					
1	2	3	4	5	
I strongly disagree				I strongly agree	
15. Sometimes docto	ors prescribe treatr	ment you don't really ne	ed.		
1	2	3	4	5	
I strongly disagree				I strongly agree	
16. Sometimes I don	't follow my treatm	ent plan exactly.			
1	2	3	4	5	
I strongly disagree				I strongly agree	
17. I find it easy to go	et my treatment foi	r my [health problem].			
1	2	3	4	5	
I strongly disagree				I strongly agree	
18. I can easily pay f	or my treatment.				
1	2	3	4	5	
I strongly disagree				I strongly agree	
19. I am able to follo	w my treatment pla	an.			
1	2	3	4	5	
I strongly disagree				I strongly agree	
20. Too many doctor	rs don't listen to w	hat patients tell them.			
	\sqcup				
1	2	3	4	5	
I strongly disagree				I strongly agree	
21. My [health proble	em] has led to finar	ncial problems.			
1	2	3	4	5	
I strongly disagree				I strongly agree	

22. I find it easy to follow my treatment plan when I am not at home.							
1	2	3	4	5			
I strongly disagree				I strongly agree			
23. I am satisfied with the level of information I have about my treatment.							
1	2	3	4	5			
I strongly disagree				I strongly agree			
24. I find it easy to m	nanage the different	medications I take.					
1	2	3	4	5			
I strongly disagree				I strongly agree			
25. I find it easy to ta	25. I find it easy to take my medication for my [health problem].						
1	2	3	4	5			
I strongly disagree				I strongly agree			
26. I am worried abo	out the side effects o	of some medications.					
1	2	3	4	5			
I strongly disagree				I strongly agree			
27. I believe I can sto	op my treatment for	my [health problem]	when I feel better.				
1	2	3	4	5			
I strongly disagree				I strongly agree			
28. I am worried abo	out taking medicatio	ons.					
1	2	3	4	5			
I strongly disagree				I strongly agree			
29. My [health probl	em] should be take	n seriously.					
1	2	3	4	5			

30. I am able to exercise despite my [health problem].					
1	2	3	4	5	
I strongly disagree				I strongly agree	
31. My treatment affe					
1	2	3	4	5	
I strongly disagree				I strongly agree	
32. I am satisfied with	th the level of inform	nation I have about m	y [health problem].		
1	2	3	4	5	
I strongly disagree				I strongly agree	
33. I completely und	erstand my [health	problem].			
1	2	3	4	5	
I strongly disagree				I strongly agree	
34. I don't like taking	g medications.				
1	2	3	4	5	
I strongly disagree				I strongly agree	
35. Medications for r	my [health problem]	don't do anything for	r me.		
1	2	3	4	5	
I strongly disagree				I strongly agree	
36. My treatment he	ps my [health probl	em].			
1	2	3	4	5	
I strongly disagree				I strongly agree	
37. There is no poin	t in taking medication	ons for my [health pro	blem].		
		Ш			
1	2	3	4	5	
I strongly disagree				I strongly agree	

38. What I do impacts my [health problem].					
1	2	3	4	5	
I strongly disagree				I strongly agree	
39. My [health prob	olem] is likely to get w	orse if I don't follow	my treatment plan.		
1	2	3	4	5	
I strongly disagree				I strongly agree	
40. I feel worse if I	don't follow my treatr	ment plan.			
1	2	3	4	5	
I strongly disagree				I strongly agree	
41. Medications are	e more expensive tha	n they should be.			
1	2	3	4	5	
I strongly disagree				I strongly agree	
42. My [health prob	olem] keeps me from	doing things I want to	do.		
1	2	3	4	5	
I strongly disagree				I strongly agree	
43. Following my [h	health problem] treatr	ment plan lets me do	the things I want to	do.	
1	2	3	4	5	
I strongly disagree				I strongly agree	
44. Non-traditional	treatments could rep	lace some of my med	lications.		
1	2	3	4	5	
I strongly disagree				I strongly agree	
45. I have found wa	ays to deal with my [h	ealth problem].			
1	2	3	4	5	
I strongly disagree				I strongly agree	

THE OBSERVIA SPUR QUESTIONNAIRE Long form - 24 items

THE OBSERVIA TREATMENT BEHAVIOR QUESTIONNAIRE

1.	My [health proble	m] affects my relati	onships with those I	care about.	
	1	2	3	4	5
	l strongly disagree				I strongly agree
2.	My [health proble	m] affects my socia	Il life.		
	1	2	3	4	5
	strongly disagree				I strongly agree
6.	Fighting for my h	ealth is my highest	priority.		
	1	2	3	4	5
	l strongly disagree				I strongly agree
7.	Precisely following	ng doctors' recomm	endations is the bes	way for me to stay	/ healthy.
	1	2	3	4	5
	strongly disagree				I strongly agree
8.	I trust doctors' red	commendations.			
	1	2	3	4	5
	l strongly disagree				I strongly agree
9.	It is essential that	t I follow my treatm	ent plan.		
	1	2	3	4	5
	I strongly disagree				I strongly agree

13. I live in the momen	nt.							
1	2	3	4	5				
I strongly disagree				I strongly agree				
14. If my doctor recom	14. If my doctor recommends that I do something, I do it.							
1	2	3	4	5				
I strongly disagree				I strongly agree				
15. Sometimes doctor	s prescribe treat	ment you don't really ne	ed.					
1	2	3	4	5				
I strongly disagree				I strongly agree				
16. Sometimes I don't	follow my treatn	nent plan exactly.						
1	2	3	4	5				
I strongly disagree				I strongly agree				
17. I find it easy to get	my treatment fo	r my [health problem].						
1	2	3	4	5				
I strongly disagree				I strongly agree				
18. I can easily pay for	my treatment.							
1	2	3	4	5				
I strongly disagree				I strongly agree				
19. I am able to follow	my treatment pl	an.						
1	2	3	4	5				
I strongly disagree				I strongly agree				
21. My [health problem	n] has led to fina	ncial problems.						
1	2	3	4	5				
I strongly disagree				I strongly agree				

1	2	3	4	5
I strongly disagree				I strongly agi
24. I find it easy to m	nanage the different	medications I take.		
	\sqcup		\Box	
1	2	3	4	5
I strongly disagree				I strongly ag
27. I believe I can sto	op my treatment for	my [health problem]	when I feel better	•
1	2	3	4	5
I strongly disagree				I strongly ago
28. I am worried abo	out taking medicatio	ns.		
1	2	3	4	5
I strongly disagree				I strongly ago
29. My [health probl	em] should be take	n seriously.		
Ш	Ш		Ш	
1	2	3	4	5
I strongly disagree				I strongly ago
33. I completely und	lerstand my [health	problem].		
1	2	3	4	5
I strongly disagree				I strongly ago
36. My treatment he	lps my [health prob	em].		
	Ш	Ш		
1	2	3	4	5
I strongly disagree				I strongly ago
37. There is no poin	t in taking medicatio	ons for my [health pro	oblem].	
		Ш		
1	2	3	4	5
I strongly disagree				I strongly agi

39. My [health problem] is likely to get worse if I don't follow my treatment plan.						
1	2	3	4	5		
I strongly disagree				I strongly agree		
42. My [health problem] keeps me from doing things I want to do.						
	\sqcup					
1	2	3	4	5		
I strongly disagree				I strongly agree		

THE OBSERVIA SPUR QUESTIONNAIRE Intermediate form - 17 items

THE OBSERVIA TREATMENT BEHAVIOR QUESTIONNAIRE

1.	My [health proble	em] affects my rela	ationships with those I ca	are about.			
	1	2	3	4	5		
I	strongly disagree				I strongly agree		
2.	My [health problem] affects my social life.						
		\Box					
	1	2	3	4	5		
I	strongly disagree				I strongly agree		
6.	Fighting for my h	ealth is my highes	st priority.				
		\Box					
	1	2	3	4	5		
I	strongly disagree				I strongly agree		
9.	It is essential tha	t I follow my treati	ment plan.				
	1	2	3	4	5		
I	strongly disagree				I strongly agree		
14.	If my doctor reco	mmends that I do	something, I do it.				
	1	2	3	4	5		
I	strongly disagree				I strongly agree		
16.	Sometimes I don	't follow my treatn	nent plan exactly.				
		\Box					
	1	2	3	4	5		
I	strongly disagree				I strongly agree		

17. I find it easy to ge	et my treatment for	r my [health problem].		
1	2	3	4	5
I strongly disagree				I strongly agree
18. I can easily pay fo	or my treatment.			
1	2	3	4	5
I strongly disagree				I strongly agree
19. I am able to follow	v my treatment pla	an.		
1	2	3	4	5
I strongly disagree				I strongly agree
21. My [health proble	m] has led to fina	ncial problems.		
1	2	3	4	5
I strongly disagree				I strongly agree
22. I find it easy to fo	llow my treatment	plan when I am not at h	ome.	
1	2	3	4	5
I strongly disagree				I strongly agree
24. I find it easy to ma	anage the differen	t medications I take.		
1	2	3	4	5
I strongly disagree				I strongly agree
27. I believe I can sto	p my treatment fo	r my [health problem] w	hen I feel better.	
1	2	3	4	5
I strongly disagree				I strongly agree
28. I am worried abou	ut taking medicatio	ons.		
1	2	3	4	5
I strongly disagree				I strongly agree

33. I completely understand my [health problem].							
1	2	3	4	5			
I strongly disagree				I strongly agree			
36. My treatment helps my [health problem].							
1	2	3	4	5			
I strongly disagree				I strongly agree			
39. My [health problem] is likely to get worse if I don't follow my treatment plan.							
1	2	3	4	5			
I strongly disagree				I strongly agree			

THE OBSERVIA SPUR QUESTIONNAIRE Short form - 6 items

THE OBSERVIA TREATMENT BEHAVIOR QUESTIONNAIRE

2. My [health problem] affects my social life.							
1	2	3	4	5			
I strongly disagree				I strongly agree			
9. It is essential that I follow my treatment plan.							
1	2	3	4	5			
I strongly disagree				I strongly agree			
19. I am able to follow my treatment plan.							
1	2	3	4	5			
I strongly disagree				I strongly agree			
21. My [health problem] has led to financial problems.							
1	2	3	4	5			
I strongly disagree				I strongly agree			
36. My treatment helps my [health problem].							
1	2	3	4	5			
I strongly disagree				I strongly agree			
39. My [health problem] is likely to get worse if I don't follow my treatment plan.							
1	2	3	4	5			
I strongly disagree				I strongly agree			