

Outcome Measure	Lubben Social Network Scale (LSNS)
Sensitivity to Change	Not enough evidence
Population	Adult
Domain	Family Environment
Type of Measure	Self-report
ICF-Code/s	e3
Description	<p>The LSNS and LSNS-R (Lubben and Gironde, 2004) is a self-rating scale, designed to measure structural social support systems (i.e., social contacts). It was originally developed for older people, but has been used with people with acquired brain impairment including TBI.</p> <p>The 12-item LSNS-R focuses on the social networks of family (6 items) and friendships (6 items); the 18-item version is similar but it includes a subscale on neighbours (6 items). Number of people in the social network is measured, along with frequency of contact and closeness. The 6-item abbreviated version contains 3 items from each of the family and friendships subscales, with the latter subscale encompassing both friends and neighbours.</p> <p>The LSNS takes 5-10 mins to administer. Responses are made on a 6-point scale, with response descriptors varying according with item content. Some items are coded from 0 (e.g., no contacts) to 5 (e.g., 9 or more contacts), other subjective items using the rating scale 0 (never) to 5 (always). The total score for the 18-item LSNS-R ranges from 0 to 90, and the 12-item ranges from 0 to 60, and the 6-item from 0 to 30. Higher scores indicate larger social networks and/or more frequent social contact.</p>
Properties	<p>See Tate (2010) for more information.</p> <p>Normative data from the standardization sample is available (Lubben, 1988)</p> <p>Internal consistency: LSNS $\alpha = .70$ (Lubben, 1988); $\alpha = .55$ (Rutledge et al. 2003); $.66$ (Lubben & Gironde, 2004). LSNS-R 12-item $\alpha = .78$ (Lubben & Gironde, 2004).</p> <p>There are 3 factors in the 12-item LSNS-R: Family, Friend A, and Friend B (Lubben & Gironde, 2004).</p> <p>The scale distinguishes dementia patients who live on their own vs those who live in assisted accommodation.</p>
Advantages	<ul style="list-style-type: none"> • Not many quantitative scales are available focusing on structural social supports (i.e., size of social network) • Quick and easy to administer and score

	<ul style="list-style-type: none"> • Multiple domains (family, friends, neighbours) • Has normative data, but these are now dated (1988) • Has been used with TBI (MacMillan et al., 2002) and other ABI populations
Disadvantages	<ul style="list-style-type: none"> • Normative data required to interpret scores, but these are now dated (1988) • Information available on its psychometric properties are limited and also not ideal
Additional Information	
Reviewers	Robyn Tate

References

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- Lubben, J. E. (1988). Assessing social networks among elderly populations. *Family & Community Health*, 11(3), 42-52.
- Rutledge, T., Matthews, K., Lui, L.-Y., Stone, K. L., & Cauley, J. A. (2003). Social Networks and Marital Status Predict Mortality in Older Women: Prospective Evidence From the Study of Osteoporotic Fractures (SOF). *Psychosomatic Medicine*, 65(4), 688-694. doi: 10.1097/01.psy.0000041470.25130.6c
- Tate, R. L. (2010). *A compendium of tests, scales, and questionnaires: The practitioner's guide to measuring outcomes after acquired brain impairment*: Psychology Press.