**Generic Body-Focused Repetitive Behavior Scale 8 (GBS-8; Moritz et al., 2022)**

The Generic Body-Focused Repetitive Behavior Scale 8 (GBS-8) is a transdiagnostic scale to assess the presence and severity of body-focused repetitive behaviors (BFRBs).

BFRBs include trichotillomania (pulling out one’s own hair), dermatillomania (skin-picking disorder, excoriation disorder), onychophagia (biting or tearing of fingernails or cuticles), and cavitadaxia (lip-cheek biting). Other behaviors associated with this disorder are bruxism (grinding the teeth while awake) and thumb sucking.

The items of the GBS-8 allow a global assessment of BFRB(s). For a condition-specific assessment of BFRBs, we recommend using the GBS-45 version of this instrument (please contact moritz@uke.de).

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The following questions are about your body-focused repetitive behaviors.For each item, choose the one answer which best describes the past week. If you have been having ups and downs, try to estimate an average for the past week.Please be sure to read all answers before making your choice.

1. Frequency of the urge: How often do you feel the urge to pick your skin, pull your hair, bite your nails, etc.?
   * 0 No urges
   * 1 Mild. I occasionally (less than 1 hour per day) feel the urge to pick my skin, pull my hair, bite my nails, etc.
   * 2 Moderate. I often (1–3 hours per day) feel the urge to pick my skin, pull my hair, bite my nails, etc.
   * 3 Severe. I very often (more than 3 and up to 8 hours per day) feel the urge to pick my skin, pull my hair, bite my nails, etc.
   * 4 Extreme. I constantly or almost always feel the urge to pick my skin, pull my hair, bite my nails, etc.
2. Intensity of the urge: How intense or strong are the urges to pick your skin, pull your hair, bite your nails, etc.?

* 0 Minimal or none
* 1 Mild
* 2 Moderate
* 3 Severe
* 4 Extreme

1. Frequency of performing BFRB: How much time per day do you spend picking your skin, pulling your hair, biting your nails, etc.?

* 0 None
* 1 Mild. I only occasionally (less than 1 hour per day) pick my skin, pull my hair, bite my nails, etc.
* 2 Moderate. I frequently (1–3 hours per day) pick my skin, pull my hair, bite my nails, etc.
* 3 Severe. I very frequently (more than 3 and up to 8 hours per day) pick my skin, pull my hair, bite my nails, etc.
* 4 Extreme. I nearly constantly (more than 8 hours per day) pick my skin, pull my hair, bite my nails, etc.

1. Ability to control the urge to perform a BFRB: How much control do you have over your skin picking, hair pulling, nail biting, etc.? To what degree can you stop yourself?

* 0 Complete control. I am always able to stop myself from skin picking, hair pulling, nail biting, etc.
* 1 Good control. I am usually able to stop myself from skin picking, hair pulling, nail biting, etc.
* 2 Some control. I am sometimes able to stop myself from skin picking, hair pulling, nail biting, etc.
* 3 Little control. I am rarely able to stop myself from skin picking, hair pulling, nail biting, etc.
* 4 No control. I am never able to stop myself from skin picking, hair pulling, nail biting, etc.

1. Suffering: How much emotional distress (anxiety/worry, frustration, depression, hopelessness, or feelings of low self-esteem) do you experience from your skin picking, hair pulling, nail biting, etc.?

* 0 None. I experience no emotional distress from my skin picking, hair pulling, nail biting, etc.
* 1 Mild. I experience only slight emotional distress from my skin picking, hair pulling, nail biting, etc. I occasionally feel emotional distress because of it, but only to a small degree
* 2 Moderate. I experience a fair amount of emotional distress from my skin picking, hair pulling, nail biting, etc., I often feel emotional distress because of it
* 3 Severe. I experience a large amount of emotional distress from my skin picking, hair pulling, nail biting, etc. I almost always feel emotional distress because of it
* 4 Extreme. I experience constant emotional distress from my skin picking, hair pulling, nail biting, etc., and have no hope of this changing

1. Impairment: How much does your skin picking, hair pulling, nail biting, etc., interfere with your social life or your work (or your overall functioning)? (If you are currently not working, estimate how much your performance would be affected if you were employed.)

* 0 None
* 1 Mild. I experience slight impairment of my social or occupational activities but my overall performance is not impaired
* 2 Moderate. I experience definite impairment of my social or occupational performance, but it is still manageable
* 3 Severe. I experience substantial impairment of my social or occupational performance
* 4 Extreme. I experience incapacitating impairment of my social or occupational performance

1. Avoidance: Have you been avoiding doing anything, going anywhere, or being with anyone because of your skin picking, hair pulling, nail biting, etc.? If yes, then how strongly do you avoid such activities?

* 0 None (no avoidance)
* 1 Mild. I engage in occasional avoidance in social or work settings because of my skin picking, hair pulling, nail biting, etc.
* 2 Moderate. I engage in frequent avoidance in social or work settings because of my skin picking, hair pulling, nail biting, etc.
* 3 Severe. I engage in very frequent avoidance in social or work settings because of my skin picking, hair pulling, nail biting, etc.
* 4 Extreme. I avoid all social and work settings because of my skin picking, hair pulling, nail biting, etc.

1. Current damage: How much damage do you currently have because of your skin picking, hair pulling, nail biting, etc.? Only consider the damage produced by the behavior.

* 0 None (no damage).
* 1 Mild. I have slight damage in the form of small scabs, sores, scrapes, bald spots, etc. The damage covers a very small area and I do not make any attempts to hide or treat the damage
* 2 Moderate. I have noticeable scars, scabs, small open sores, or bald patches up to 1 cm in diameter. I attempt to hide or treat the damage with home remedies (e.g., bandages, creams, ointments) that do not require the assistance of a physician
* 3 Severe. I have large scars, scabs, bald patches, open sores, infected areas, or noticeably disfigured skin. I make extensive attempts to hide the damage and may require periodic treatment by a medical professional (e.g., prescription antibiotics, dermabrasion)
* 4 Extreme. I have large open wounds or craters, frequent bleeding, large scars, bald areas, etc. The damage sometimes requires extensive covering and medical intervention (e.g., plastic surgery, stitches, hospitalization)