

bbs-ch-id_s1_r1_e1

THRIVE ID

THRIVE ID

WARNING: The THRIVE ID above does not match the ID for this record. Please double check and correct any mistakes before continuing.

- Session
- ☐ S1 (Baseline)
 - ☐ S2 (9-month follow-up)
 - ☐ S3 (18-month follow-up)

WARNING: The session you have indicated above does not match the session that this survey queue corresponds to (S1 - Baseline). Please double check and correct any mistakes before continuing.

- Visit Type
- ☐ Brain/Behavior Session
 - ☐ Interview/Questionnaire Session

WARNING: The visit type you have indicated above does not match the visit type that this survey queue corresponds to (Brain/Behavior Session). Please double check and correct any mistakes before continuing.

Are you a child participant or a parent/guardian?

- ☐ Child
☐ Parent/Guardian

WARNING: This survey is meant for the child, not the parent/guardian. Please let the researcher know there is an error.

STOP HERE

You have reached a "STOP" screen. Please ring the bell and let the researcher know.

DO NOT ENTER ANY INFORMATION OR SUBMIT THIS SURVEY



FOR THE RESEARCHER ONLY: Please enter the code to continue.

(IF YOU ARE NOT THE RESEARCHER, DO NOT TYPE IN THIS FIELD.)

DO NOT SUBMIT THIS SURVEY UNLESS YOU ARE THE RESEARCHER.

ABQ

Below are statements describing how people relate to threatening things.

When a sentence reads "threats", refer to things that are threatening or stressful for you, even if not actually dangerous. Threatening things can be objects, animals, people, or situations that can imply something negative or dangerous to you.

For each statement, state the extent the statement applies to you.

		Not at all	Slightly	Somewhat	To a large extent	To a great extent
7)	It is difficult for me not to look at threatening things	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8)	Sometimes, I notice threats even before I have looked at them directly (e.g., from the corner of my eye)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9)	My attention tends to "get stuck" on threatening things	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10)	I notice threats quickly	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11)	I am vigilant and alert towards threats in the surroundings	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
12)	When I arrive somewhere new, I scan my surroundings and check for threats	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13)	If I notice a threat, I will focus on it for a long time	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14)	It is difficult for me to concentrate on other things when I know there is a threat in my surroundings	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15)	When I notice threats, it is difficult for me to stop focusing on them	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Brief Screener for Tobacco, Alcohol, and Other Drugs (BSTAD)

In the PAST YEAR, on how many days did you use nicotine or tobacco products (vape, smoke, chew, etc.)? _____

In the PAST YEAR, on how many days did you have more than a few sips of beer, wine, or any drink containing alcohol? _____

In the PAST YEAR, on how many days did you use marijuana (weed, blunts, hash, etc.)? _____

In the PAST YEAR, which of the following medications have you used that were not prescribed for you OR which you took more of than you were supposed to take?

- ☐ Over-the-Counter Medications (e.g., Nyquil, Benadryl, cough medicine, sleeping pills, etc.)
- ☐ Prescription Stimulants (e.g., Adderall, Ritalin, etc.)
- ☐ Prescription Sedatives (e.g., Valium, Xanax, Klonopin, Ativan, etc.)
- ☐ Prescription Pain Relievers (e.g., morphine, Percocet, Vicodin, OxyContin, Dilaudid, Methadone, buprenorphine, etc.)
- ☐ None of the above

((Check all that apply.))

In the PAST YEAR, on how many days did you use Over-the-Counter Medications (that were not prescribed for you OR which you took more than you were supposed to take)? _____

In the PAST YEAR, on how many days did you use Prescription Stimulants (that were not prescribed for you OR which you took more than you were supposed to take)? _____

In the PAST YEAR, on how many days did you use Prescription Sedatives (that were not prescribed for you OR which you took more than you were supposed to take)? _____

In the PAST YEAR, on how many days did you use Prescription Pain Relievers (that were not prescribed for you OR which you took more than you were supposed to take)? _____

In the PAST YEAR, which of the following substances have you used?

- ☐ Hallucinogens (e.g., magic mushrooms, LSD, etc.)
- ☐ Inhalants (e.g., huffing gasoline, glue, nitrous oxide, etc.)
- ☐ Amphetamines (non-medication)
- ☐ Cocaine
- ☐ Other
- ☐ None of the above

((Check all that apply.))

In the PAST YEAR, on how many days did you use Hallucinogens? _____

In the PAST YEAR, on how many days did you use Inhalants?

In the PAST YEAR, on how many days did you use Amphetamines?

In the PAST YEAR, on how many days did you use Cocaine?

If other, please specify:

In the PAST YEAR, on how many days did you use "[bstad_drugsoth_s1_r1_e1]"?

Handedness and Vision

Which hand do you use most?	<input type="radio"/> left hand <input type="radio"/> right hand <input type="radio"/> use both the same amount
For your vision, do you wear any necessary corrective aids (glasses, contacts)?	<input type="radio"/> Yes <input type="radio"/> No
Are you wearing them now?	<input type="radio"/> Yes <input type="radio"/> No

Directions: As children grow up to be teenagers and young adults, they learn more and more about their parents and how their parents are bringing up (or brought up) their sons and daughters. Even grown-up sons and daughters can well describe some of their experiences in their parental families. We would like you to describe some of these experiences. Please read each statement below and select the answer that most closely describes the way your parent/caregiver acts toward you. When answering these questions, please think about the person who brought you to today's appointment.

Select "NOT LIKE" if you think that the statement describes a person who is NOT LIKE your caregiver.
 Select "SOMEWHAT LIKE" if you think that the statement describes a person who is SOMEWHAT LIKE your caregiver.
 Select "A LOT LIKE" if you think the statement describes a person who is A LOT LIKE your caregiver.

The caregiver who brought me here today is a person who...			
	not like	somewhat like	a lot like
34) Makes me feel better after talking over my worries with them.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
35) Tells me of all the things they have done for me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
36) Believes in having a lot of rules and sticking to them.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
37) Smiles at me very often.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
38) Says, if I really cared for them, I would not do things that cause them to worry.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
39) Insists that I must do exactly as I am told.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
40) Is able to make me feel better when I am upset.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
41) Is always telling me how I should behave.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
42) Is very strict with me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
43) Enjoys doing things with me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
44) Would like to be able to tell me what to do all the time.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
45) Gives hard punishment.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
46) Cheers me up when I am sad.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
47) Wants to control whatever I do.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
48) Is easy with me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
49) Gives me a lot of care and attention.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
50) Is always trying to change me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
51) Lets me off easy when I do something wrong.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
52)			

- | | | | |
|--|-----------------------|-----------------------|-----------------------|
| Makes me feel like the most important person in their life. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 53) Only keeps rules when it suits them. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 54) Gives me as much freedom as I want. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 55) Believes in showing their love for me. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 56) Is less friendly with me if I do not see things their way. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 57) Lets me go any place I please without asking. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 58) Often praises me. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 59) Will avoid looking at me when I have disappointed them. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 60) Lets me go out any evening I want. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 61) Is easy to talk to. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 62) If I hurt their feelings, stops talking to me until I please them again. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 63) Lets me do anything I like to do. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Would you describe yourself as:

☐ Heterosexual (straight)

☐ Gay or lesbian

☐ Bisexual

☐ Other

☐ Unsure

If Other, please explain:

What is your current gender identity?

☐ Boy

☐ Girl

☐ Another gender

☐ I don't understand the question

Kids vary a lot in how they think and feel about themselves.

	Totally	Mostly	Somewhat	A little	Not at all
How much do you feel like a boy?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How much do you feel like a girl?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

The next questions are about who you are attracted to and who you have relationships with.

	Not at all	A little	A lot	I don't know
I am attracted to girls.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am attracted to boys.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am attracted to people who are another gender (e.g., nonbinary).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Multidimensional Acculturative Stress Inventory

Do you have a heritage culture (other than mainstream American)?

☐ Yes
☐ No

Your heritage culture (other than mainstream American) is: _____

Please rate how strongly you agree/disagree with the following statements.

strongly disagree

strongly agree

It bothers me when people pressure me to assimilate to the American way of doing things.

☐ ☐ ☐ ☐ ☐

It bothers me when people don't respect my family's cultural values.

☐ ☐ ☐ ☐ ☐

Because of my cultural background, I have a hard time fitting in with White Americans.

☐ ☐ ☐ ☐ ☐

I feel uncomfortable when others expect me to know American ways of doing things.

☐ ☐ ☐ ☐ ☐

I don't feel accepted by White Americans.

☐ ☐ ☐ ☐ ☐

I feel uncomfortable when I have to choose between my family's heritage culture and American ways of doing things.

☐ ☐ ☐ ☐ ☐

People look down upon me if I practice customs from my family's heritage culture.

☐ ☐ ☐ ☐ ☐

I have had conflicts with others because I prefer American customs over those from my family's heritage culture.

☐ ☐ ☐ ☐ ☐

People look down upon me if I practice American customs.

☐ ☐ ☐ ☐ ☐

I feel uncomfortable when others expect me to know the ways of doing things in my family's heritage culture.

☐ ☐ ☐ ☐ ☐

I feel uncomfortable because my family members do not know the ways of doing things from their heritage culture.

☐☐☐☐☐

Do you have a heritage culture (other than mainstream American)?

☐ Yes
☐ No

Your heritage culture (other than mainstream American) is:

	Disagree								Agree
I often participate in my heritage cultural traditions.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I often participate in mainstream American cultural traditions.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I enjoy social activities with people from the same heritage culture as myself.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I enjoy social activities with typical American people.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am comfortable interacting with people of the same heritage culture as myself.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am comfortable interacting with typical American people.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I enjoy entertainment (e.g., movies, music) from my heritage culture.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I enjoy typical American entertainment (e.g., movies, music).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I often behave in ways that are typical of my heritage culture.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I often behave in ways that are typically American.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
It is important for me to maintain or develop the practices of my heritage culture.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
It is important for me to maintain or develop American mainstream cultural practices.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I believe in the values of my heritage culture.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I believe in mainstream American values.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

I am interested in having friends from my heritage culture.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am interested in having typical American friends.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Teenage Executive Functioning Inventory (Self Report)

Below are some statements about how you are as a person. Mark your answer by selecting the most appropriate response. Perhaps others feel differently, but we want to know what you think about yourself. Try to answer as honestly as possible.

	Definitely not true	Not true	Partially true	True	Definitely true
103) I have difficulty remembering long instructions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
104) I have difficulty remembering what I need to do in the middle of an activity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
105) I do things without first thinking about what could happen	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
106) I have difficulty stopping myself from doing things even though I know it's not allowed	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
107) When someone asks me to do several things, I cannot remember all of them	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
108) I cannot stop myself from laughing or smiling even though I know that it is inappropriate at the time	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
109) I have difficulty coming up with a new way to solve a problem when I get stuck	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
110) When I am asked to get something, I forget what I was supposed to get	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
111) I find it difficult to plan things (e.g., remembering to bring everything necessary for school or when going on a trip)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
112) I find it difficult to make myself stop an activity that I like (e.g., I sit in front of the computer or mobile device even though it is time to go to bed)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
113) I have difficulty understanding instructions unless I am shown how to do something	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
114)					

I have difficulty with tasks involving several steps that need to be completed in a certain order	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
115) I have difficulty learning from my mistakes (I repeat the same mistake over and over again)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
116) People that I meet seem to think that I am more lively/wild compared to others my age	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
117) I have difficulty motivating myself to do things that I do not like to do	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
118) I find it difficult to start a task if I am distracted by something more fun (e.g., I fail to start doing my homework and instead use my mobile device)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
119) I have difficulty stopping an activity when asked to do so	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
120) I often get more excited compared to others my age if something special happens (e.g., parties, trips, birthdays, winning a game)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
121) I fail to finish things that I have started	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
122) I put things off until the last minute	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Youth Screen & Social Media Usage Self-Report Questionnaire

On a typical WEEKDAY, how much time do you spend:

Watching or streaming TV shows or movies?

(Such as Hulu, Netflix or Amazon, not including videos on YouTube.) Hours:

(Enter a number between 0 and 24.) Minutes:

(Enter a number between 0 and 60.)

Watching or streaming videos or live stream (such as YouTube, Twitch)? Hours:

(Enter a number between 0 and 24.) Minutes:

(Enter a number between 0 and 60.)

Playing single-player video games on a computer, console, phone or other device (Xbox, Play Station, iPad, AppleTV)?

Hours: _____ (Enter a number between 0 and 24.) Minutes: _____ (Enter a number between 0 and 60.)

Playing multiplayer video games on a computer, console, phone, or other device (Xbox, Play Station, iPad, AppleTV)

where you can interact with others in the game? Hours: _____ (Enter a number between 0 and 24.) Minutes: _____ (Enter a number between 0 and 60.)

Texting on a cell phone, tablet, computer, iPod, or other electronic device (e.g., GChat, Whatsapp, Kik, etc.)? Hours:

(Enter a number between 0 and 24.) Minutes:

(Enter a number between 0 and 60.)

Visiting social media apps or websites (e.g., Snapchat, Facebook, Twitter, Instagram, TikTok, etc.)? (Do not include time spent editing photos, videos, or creating content to post on social media.) Hours:

(Enter a number between 0 and 24.) Minutes:

(Enter a number between 0 and 60.)

Editing photos, videos, or creating content to post on social media? Hours:

(Enter a number between 0 and 24.) Minutes:

(Enter a number between 0 and 60.)

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Video chatting (Zoom, FaceTime, VRchat, Skype, etc.)? Hours:

(Enter a number between 0 and 24.) Minutes:

(Enter a number between 0 and 60.)

Searching or browsing the internet (e.g., using Google) that is NOT for school? Hours:

(Enter a number between 0 and 24.) Minutes:

(Enter a number between 0 and 60.)

On a typical WEEKEND DAY, how much time do you spend:

Watching or streaming TV shows or movies?

(Such as Hulu, Netflix or Amazon, not including videos on YouTube.) Hours:

(Enter a number between 0 and 24.) Minutes:

(Enter a number between 0 and 60.)

Watching or streaming videos or live stream (such as YouTube, Twitch)? Hours:

(Enter a number between 0 and 24.) Minutes:

(Enter a number between 0 and 60.)

Playing single-player video games on a computer, console, phone or other device (Xbox, Play Station, iPad, AppleTV)? Hours:

(Enter a number between 0 and 24.) Minutes:

(Enter a number between 0 and 60.)

Playing multiplayer video games on a computer, console, phone, or other device (Xbox, Play Station, iPad, AppleTV) where you can interact with others in the game? Hours:

(Enter a number between 0 and 24.) Minutes:

(Enter a number between 0 and 60.)

Texting on a cell phone, tablet, computer, iPod, or other electronic device (e.g., GChat, Whatsapp, Kik, etc.)? Hours:

(Enter a number between 0 and 24.) Minutes:

(Enter a number between 0 and 60.)

Visiting social media apps or websites (e.g., Snapchat, Facebook, Twitter, Instagram, TikTok, etc.)? (Do not include time spent editing photos, videos, or creating content to post on social media.) Hours:

(Enter a number between 0 and 24.) Minutes:

(Enter a number between 0 and 60.)

Editing photos, videos, or creating content to post on social media? Hours:

(Enter a number between 0 and 24.) Minutes:

(Enter a number between 0 and 60.)

Video chatting (Zoom, FaceTime, VRchat, Skype, etc.) Hours:

(Enter a number between 0 and 24.) Minutes:

(Enter a number between 0 and 60.)

Searching or browsing the internet (e.g., using Google) that is NOT for school. Hours:

(Enter a number between 0 and 24.) Minutes:

(Enter a number between 0 and 60.)

Social Media

Do you have at least one social media account?

- ☐ Yes
☐ No

Which social media apps or websites do you have an account on? Select all that are applicable:

- ☐ Multiplayer Videogame Online Chatting
☐ YouTube
☐ Reddit
☐ Facebook
☐ Instagram
☐ Snapchat
☐ Twitter
☐ Pinterest
☐ Tumblr
☐ TikTok
☐ Other
(If Other, please specify: _____)

Which social media app or website do you use the most?

- ☐ Multiplayer Videogame Online Chatting
☐ YouTube
☐ Reddit
☐ Facebook
☐ Instagram
☐ Snapchat
☐ Twitter
☐ Pinterest
☐ Tumblr
☐ TikTok
☐ [yssm_otheracct_s1_r1_e1]

On [yssm_mostused_s1_r1_e1], is your account public or private?

- ☐ Public
☐ Private
☐ Don't Know

Do you have a social media account that you keep secret from your parents?

- ☐ Yes
☐ No

Self-Assessment Survey

Please answer the following questions based on what you are thinking and feeling right now.

	far below average	below average	average	above average	far above average
128) Compared to others my age, my ability to do things in front of others is:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
129) Compared to others my age, my ability to talk and interact with others is:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
130) Compared to others my age, how much others like me is:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Which figure reflects how you feel about yourself right now?

STOP HERE

You have reached a "STOP" screen. Please ring the bell and let the researcher know.

DO NOT ENTER ANY INFORMATION OR SUBMIT THIS SURVEY



FOR THE RESEARCHER ONLY: Please enter the code to continue.

(IF YOU ARE NOT THE RESEARCHER, DO NOT TYPE IN THIS FIELD.)

DO NOT SUBMIT THIS SURVEY UNLESS YOU ARE THE RESEARCHER.

State Survey: Before Game

Please answer the following questions based on what you are thinking and feeling right now.

	Not well at all			Very well
132) How well do you think you will do playing the game?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	Not at all			Very much
133) How anxious or nervous are you right now?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
134) How calm and confident are you right now?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
135) How much are you worrying about being judged negatively?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
136) How much are you thinking about performing well?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

STOP HERE

You have reached a "STOP" screen. Please ring the bell and let the researcher know.

DO NOT ENTER ANY INFORMATION OR SUBMIT THIS SURVEY



FOR THE RESEARCHER ONLY: Please enter the code to continue.

(IF YOU ARE NOT THE RESEARCHER, DO NOT TYPE IN THIS FIELD.)

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State Survey: After Game

Please answer the following questions about the game you just completed.

138) Not counting the practice, how many mistakes do you think you made during the game?

	Not well at all			Very well
139) How well do you think you did on the game?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

	Not at all			Very much
140) How hard did you try?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
141) How much did it bother you when you made a mistake?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
142) How anxious or nervous were you during the game?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
143) How calm and confident were you during the game?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
144) How much did you worry about being judged negatively?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
145) How much did you think about performing well?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

How much did each of the following influence how well you did on the game?

	Not at all			Very much
146) Your own ability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
147) Difficulty of the game	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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State Survey: Before Game

Please answer the following questions based on what you are thinking and feeling right now.

	Not well at all			Very well
149) How well do you think you will do playing the game?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	Not at all			Very much
150) How anxious or nervous are you right now?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
151) How calm and confident are you right now?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
152) How much are you worrying about being judged negatively?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
153) How much are you thinking about performing well?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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State Survey: After Game

Please answer the following questions about the game you just completed.

155) Not counting the practice, how many mistakes do you think you made during the game? _____

	Not well at all			Very well
156) How well do you think you did on the game?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

	Not at all			Very much
157) How hard did you try?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
158) How much did it bother you when you made a mistake?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
159) How anxious or nervous were you during the game?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
160) How calm and confident were you during the game?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
161) How much did you worry about being judged negatively?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
162) How much did you think about performing well?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

How much did each of the following influence how well you did on the game?

	Not at all			Very much
163) Your own ability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
164) Difficulty of the game	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

STOP HERE

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State Survey: Getting to Know Each Other

Please answer the following question about when you were left to get to know the other person.

	Not well at all				Very well
166) How well do you think you did talking and interacting with the other person?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

State Survey: Before Speech

Please answer the following questions based on what you are thinking and feeling right now.

	Not well at all			Very well
167) How well do you think you will do giving a speech?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	Not at all			Very much
168) How anxious or nervous are you right now?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
169) How calm and confident are you right now?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
170) How much are you worrying about being judged negatively?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
171) How much are you thinking about performing well?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

STOP HERE

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State Survey: After Speech

Please answer the following questions about the speech you just gave.

173) How many mistakes do you think you made during your speech?

	Not well at all			Very well
174) How well do you think you did giving a speech?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

	Not at all			Very much
175) How hard did you try?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
176) How much did it bother you when you made a mistake?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
177) How anxious or nervous were you during the speech?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
178) How calm and confident were you during the speech?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
179) How much did you worry about being judged negatively?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
180) How much did you think about performing well?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

How much did each of the following influence how well you did giving a speech?

	Not at all			Very much
181) Your own ability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
182) Difficulty of the speech	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Self and Other Survey

Please answer the following questions about the other person.

	Not well at all			Very well
183) How well do you think the other person did playing the game?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
184) How well do you think the other person did giving a speech?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
185) How well did the other person do talking and interacting with you?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

	Not at all			Very much
186) How much would you want to interact with the other person again?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please answer the following questions based on what you think the other person thinks about you.

	Not well at all			Very well
187) How well do you think the other person would say you did playing the game?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
188) How well do you think the other person would say you did giving a speech?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
189) How well do you think the other person would say you did talking and interacting with them?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

	Not at all			Very much
190) How much do you think the other person would want to interact with you again?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
191) During the visit today, how much did you focus on your own thoughts and feelings?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Self-Assessment Survey

Please answer the following questions based on what you are thinking and feeling right now.

	far below average	below average	average	above average	far above average
192) Compared to others my age, my ability to do things in front of others is:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
193) Compared to others my age, my ability to talk and interact with others is:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
194) Compared to others my age, how much others like me is:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Which figure reflects how you feel about yourself right now?

Extended Post-Event Processing Questionnaire (15-Item)

We would like you to remember one specific social situation, which has led to unreasonably strong or unrealistic anxiety or discomfort or in which you had a strong feeling of shame. Please let yourself be guided by the situations listed below. The situation should have been of personal relevance to you, and it should have happened during the past six months. If you remember more than one situation, please choose the one that was most relevant for you.

Examples:

talking in front of a group being at a party talking to authorities participating in group activities using public restrooms returning goods to a store beginning/maintaining a conversation expressing disapproval talking on the phone initiating a romantic relationship dating someone oral exam eating/drinking/writing in public talking on the phone with others listening giving a party formal and informal meetings being criticized

195) Please mark the situation you have chosen and remember to refer to this situation while answering the following questions.

☐ talking in front of a group ☐ being at a party ☐ talking to authorities ☐ participating in group activities ☐ using public restrooms ☐ returning goods to a store ☐ beginning/maintaining a conversation ☐ expressing disapproval ☐ talking on the phone ☐ initiating a romantic relationship ☐ dating someone ☐ oral exams ☐ eating/drinking/writing in public ☐ talking on the phone with others listening ☐ giving a party ☐ formal and informal meetings ☐ being criticized

	0 (not at all)					5					10 (very much so)
196) After the event was over, did you think about it a lot?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
197) Did your memories and thoughts about the event keep coming into your head even when you did not wish to think about it again?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
198) Did the thoughts about the event interfere with your concentration?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
199) Did you find it difficult to forget about the event?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
200) Did you try to resist thinking about the event?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
201) If you repeatedly thought about the event, did your feelings about the event worsen?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
202) Have you ever wondered about whether you could have avoided or prevented your behavior/feelings during the event?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

203)

Have you ever wished that you could turn the clock back and do it again but better this time?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
204) Did you experience a sense of shame while remembering your behavior during the situation?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
205) Did you think about anxious feelings that you had experienced during the event?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
206) When remembering the situation did other instances of past failure that you had experienced in the same way come into your mind?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
207) Did you criticize yourself for your behavior in the situation?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
208) Did you think about the event more than you wanted to?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
209) Did you think about bodily sensations you had experienced in the situation?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	<hr/>										
	...in a positive way										...in a negative way
210) In my memories about the event, I saw myself (my behavior, my attributes)...	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>