Symptom Response Report



PATIENT ID

Userdemoclin012

AGE

7

GENDER

INTERVIEW SOURCE

INTERVIEW DATE

Male

Youth

01/04/2021

ADMINISTERED BY

Module Name	QID	Seq_ID	Question Text	Response	Comments
Intro	1	0.0.0.Q1	Thanks for agreeing to do this interview. I am going to be asking you a lot of different questions about your moods and behavior, but first I'd like to ask you some background questions. Click on the comments link on any page if you'd like to provide some comments.		
	2	0.0.0.Q2	How old are you?	age:7	
	3	0.0.0.Q3	What sex were you assigned at birth?	Male	
	1798	0.0.0.Q77	What is your ethnicity? Hispanic or Latino?	No	
	1799	0.0.0.Q78	What is your race? Choose all that apply.	Native Hawaiian or other Pacific Islander,	
	4	0.0.0.Q4	Who do you live with? Click all that apply.	Biological mother, Biological father, Sister(s),	
	11	0.0.0.Q11	Who in your family or of the people you are living with would you say you're closest with?	mom	

12	0.0.0.Q12	Is there anyone in your family or the people you are living with that you really don't get along with?	No
13	0.0.0.Q14	What grade are you in?	10th
14	0.0.0.Q15	Have you ever repeated a grade?	No
15	0.0.0.Q16	What kind of grades do you get on average?	Fs
16	0.0.0.Q17	Has there been a drop in your grades in the past year?	No
17	0.0.0.Q18	Are you involved in any extracurricular activities at school?	Yes
18	0.0.0.Q19	Which one are you involved in? Click all that apply:	Sports,
19	0.0.0.Q20	In the past year, have you had any detentions or suspensions?	No
21	0.0.0.Q22	Are you involved in any activities outside of school? Click all that apply:	Martial arts,
22	0.0.0.Q23	Do you have a best friend?	Yes
23	0.0.0.Q24	How long have you been friends?	Less than a year
24	0.0.0.Q25	Do you have a regular group of kids you hang out with at school or in your neighborhood?	Yes
25	0.0.0.Q26	How long have you hung out	1-2 years

			together?	
	26	0.0.0.Q27	Do you have any problems with bullying at school or in your neighborhood?	No
	1908	0.0.0.Q82	What is your gender identity?	Male,
	1909	0.0.0.Q83	What is your sexual orientation?	Heterosexual,
	31	0.0.0.Q32	Below is a list of things kids often have to deal with. Click all that apply to you:	Start new school, Father incarcerated, Conflict with parents/guardians, Conflict with siblings,
	32	0.0.0.Q33	Thanks for this background information. If there's anything else you think is important for us to know about you, you can write it in below.	
Depressive Disorders	95	1.1.1.Q1	Now I'd like to ask you some questions about your mood. In the past two weeks, how often have you felt sad, down, or depressed, with the down feeling lasting most of the day?	Several days
	96	1.1.1.Q2a	Was there ever a time in the past that you felt sad or down for most of the day, nearly every day, for two weeks or longer?	No
	97	1.1.2.Q1	In the past two weeks, how often have you felt annoyed, irritable, or cranky, with the cranky feeling lasting most of the day?	Nearly every day
	99	1.1.3.Q1	In the past 2 weeks, how often have you felt bored, or like nothing was fun, for most of the day?	Rarely

100	1.1.3.Q2a	Was there ever a time in the past that you felt bored, like nothing was fun for most of the day, nearly every day, for two weeks or longer?	No
102	1.1.3.Q3b	You said that in the past two weeks for most of the day you felt annoyed, irritable, or cranky. When did this begin?	Month:August / Year:2014
581	2.1.5.q1	In the past 2 weeks, how often have you been sleeping two or more hours a day more than usual, either napping during the day or sleeping more hours at night?	Several days
582	2.1.5.q2	In the past when you were feeling irritable, were you often sleeping two or more hours a day more than usual, either napping during the day or sleeping more hours at night?	Yes
583	2.1.6.q1	In the past two weeks, how often have you felt tired, like you just didn't have enough energy to do the things you normally do?	Several days
584	2.1.6.q2	In the past when you were feeling irritable, did you often feel tired, like you just didn't have enough energy to do the things you normally do?	Yes
585	2.1.7.q1	In the past two weeks, how often have you found it hard to concentrate?	More than half the days
588	2.1.8.q1	In the past two weeks, how often have you had trouble making up your mind about everyday decisions like what to wear, eat, or do?	More than half the days
590	2.1.9.q1	In the past two weeks, how often have you found yourself less hungry than usual?	Several days

591	2.1.9.q2	In the past when you were feeling irritable, did you often find yourself less hungry than usual?	Yes
592	2.1.10.q1	Since your mood has changed, have you lost any weight?	No
593	2.1.10.q2	In the past when you were feeling irritable, did you lose some weight?	No
594	2.1.11.q1	In the past two weeks, have you been especially hungry, craving sweets, or eating more than usual?	More than half the days
596	2.1.12.q1	Since you have been irritable, have you gained any weight?	No
597	2.1.12.q2	In the past when you were feeling irritable, did you gain some weight?	No
598	2.1.13.q1	In the past two weeks, how often have you felt agitated, like it was hard to sit without bouncing your leg or getting up and moving around?	Rarely
600	2.1.13.q3	In the past when you were irritable, did you often feel agitated and was it hard for you to sit without bouncing your leg or getting up and moving around?	No
602	2.1.14.q1	In the past two weeks, how often have you felt slowed down, like you were talking or walking in slow motion?	More than half the days
604	2.1.15.q1	In the past two weeks, how often have you felt guilty about something you said, did, or thought?	More than half the days
606	2.1.16.q1	In the past two weeks, how often have you felt hopeless?	More than half the days

607	2.1.17.q1	In the past two weeks, how often have you felt bad about yourself, like you were not as good as other kids, or that there were a lot of things you didn't like about yourself?	More than half the days
610	2.1.18.q1a	With friends	Yes
611	2.1.18.q1b	With your family	Yes
612	2.1.18.q1c	At school	No
613	2.1.18.q1d	At work	Yes
614	2.1.18.q1e	In after school activities	No
615	2.1.18.q1f	In other places or times	No
609	2.1.18.q1	Have the things we have just been talking about (i.e.,feeling irritable, sleeping too much, feeling tired, troubles concentrating, difficulty making decisions, decreased appetite, increased appetite, feeling slowed down, feeling guilty, feeling hopeless and feeling bad about yourself) caused problems for you in any of the following areas:	
1807	2.1.19.Q1b	Feeling irritable	No
1810	2.1.19.Q1e	Sleeping too much	Yes

	1811	2.1.19.Q1f	Feeling tired	No
	1812	2.1.19.Q1g	Troubles concentrating	No
	1813	2.1.19.Q1h	Difficulty making decisions	Yes
	1814	2.1.19.Q1i	Decreased appetite	Yes
	1816	2.1.19.Q1k	Increased appetite	No
	1819	2.1.19.Q1n	Feeling slowed down	Yes
	1820	2.1.19.Q1o	Feeling guilty	Yes
	1821	2.1.19.Q1p	Feeling hopeless	Yes
	1822	2.1.19.Q1q	Feeling bad about yourself	No
	1805	2.1.19.Q1	You reported the following problems. Have these or were these present for a year or longer?	
	617	2.1.20.q1	Since you first experienced any of these symptoms, have you had any periods of two months or longer symptom free?	No
Bipolar Disorders	116	1.2.1.Q1	In the past two weeks, how often, without using drugs, did	Not at all

		you feel like you were high or super happy for no particular reason, with the over the top good feeling lasting four or more hours?	
117	1.2.1.Q2a	Was there ever a time in the past that you felt like you were high or super happy for no particular reason, for multiple hours a day for several days in a row?	No
118	1.2.2.Q1	In the past two weeks, how often have you lost your temper and done any of the following things: yelled at someone, thrown or broken something, or hit, pushed or kicked someone?	Nearly every day
119	1.2.2.Q2	Have you always, or almost always, been someone who loses your temper a lot?	Yes
121	1.2.4.Q1	In the past two weeks, how often have you needed less sleep than usual, and still felt rested and energized, sleeping at least three hours less than usual?	Several days
122	1.2.4.Q2a	Was there ever a time in the past that you needed less sleep for several days in a row, and felt rested sleeping at least three hours less than usual?	Yes
128	1.2.5.Q3k	You said that you have had a time when you lost your temper and exploded a lot and needed a lot less sleep than usual. When did this begin?	Month:June / Year:2014
618	2.2.0.q1	You said that you experienced the following symptoms: super cranky and needing less sleep than usual. Have these things only been true for you at times when you were drinking or	Yes

			using drugs?	
Disruptive Mood Dysregulation Disorder	665	2.3.1.Q1	Have you had trouble with your temper since you were young, since before you were 10?	Yes
	666	2.3.1.Q2	How many temper outbursts do you typically have per week?	Three
	667	2.3.1.Q3	How many times per week do you yell when you are upset?	Three
	668	2.3.1.Q4	How many times per week do you throw things when you are upset?	Three
	669	2.3.1.Q5	How many times per week do you kick or punch people or things when you are upset?	Three
	671	2.3.1.Q6A	At School	No
	672	2.3.1.Q6B	With Friends	Yes
	673	2.3.1.Q6C	With Family	No
	674	2.3.1.Q6D	Others Places	No
	670	2.3.1.Q6	In the past year, in which situations have you lost your temper:	
	675	2.3.1.Q7	Was there a time in the past year when you did not lose your temper at all for 3 months or longer?	Yes
	676	2.3.1.Q8	When would you say the problems with your temper began?	Month:February / Year:2018

Psychosis	130	1.4.1.Q1	In the past two weeks, how often, during the daytime, as you were going about your regular activities, did you hear things that others could not hear? (ask for example to check if description is true hallucination; if not, mark 'not at all')	Rarely
	131	1.4.1.Q2	Was there ever a time during the daytime as you were going about your regular activities that you repeatedly heard things that others could not hear? (ask for example to check if description is true hallucination)	Yes
	134	1.4.2.Q1	In the past two weeks, how often have you felt that people you did not know were out to get you, were following you, or spying on you?	Several days
	137	1.4.2.Q3	You said you had a time when the things listed below were true for you. When did this begin? During the daytime, as you were going about your regular activities, you heard things that others could not hear, You felt that people you did not know where out to get you and were following your or spying on you	Month:February / Year:2021
	1345	2.4.3.Q1AA	Hear voices that told you to do something?	Present,Past,
	1346	2.4.3.Q1AB	Hear voices commenting about what you were doing or thinking?	none,none,
	1347	2.4.3.Q1AC	Hear two or more people talking when no one was there?	Present,none,
	1348	2.4.3.Q1AD	Hear your thoughts spoken	Present,none,

		aloud?	
1349	2.4.3.Q1AE	Hear voices that no one else could hear?	Present,none,
1833	2.4.3.Q1af	Had other odd experiences involving noises or voices (specify)?	,
1344	2.4.3.Q1A	When we were talking before you said there have recently been times that your mind played tricks on you, and you heard, saw, or smelled things that weren't really there. I am going to ask you about a number of different types of experiences kids sometimes have, and I want you to tell me if it happened to you in the past two weeks or at any other time in the past.	
1356	2.4.4.Q1	When you've heard voices or noises that other people could not hear, did the noises or voices come from outside your head, like my voice now talking to you?	No
1358	2.4.5.Q1a	See something that wasn't there, that no one else could see?	Present,none,
1359	2.4.5.Q1b	Feel something on your skin when there wasn't anything there?	Present,none,
1360	2.4.5.Q1c	Smell something that no one else could smell?	Present,none,
1361	2.4.5.Q1d	Have other odd perceptual experiences (specify)?	QPresent:5,
1357	2.4.5.Q1	Listed below are some other types of experiences kids	

		sometimes have. Mark if they happened to you in the past two weeks or any other time in the past.		
1362	2.4.6.Q1	How often in a typical week are you having trouble with any of the symptoms listed below: hear two or more people talking when no one was there, hear your thoughts spoken aloud, hear voices that no one else could hear, hear voices that told you to do something, see something that wasn't there, that no one else could see, feel something on your skin when there wasn't anything there, smell something that no one else could smell and 5?	Several days	
1363	2.4.19.Q1	When your mind plays tricks on you, are the things you see or hear only related to the bad stuff that happened to you in the past, like hearing the voice of someone who hurt you or seeing pictures of people or things related to the bad stuff that happened?	No	
1366	2.4.6.Q2	In the past when your mind was playing tricks on you, when it was at its worse, how often in a typical week did you hear voices that told you to do something?	Several days	
1367	2.4.19.Q2	When your mind played tricks on you back then, were the things you saw or heard only related to the bad stuff that happened to you in the past, like hearing the voice of someone who hurt you or seeing pictures of people or things related to the bad stuff that happened?	Yes	
1377	2.4.11.Q1A	Believe god had chosen you to	Present,none,	

		do something special for him?	
1378	2.4.11.Q1B	Believe your thoughts could be broadcast out loud so other people could know what you are thinking?	none,none,
1379	2.4.11.Q1C	Believe people could take thoughts out of your mind against your will?	Present, none,
1380	2.4.11.Q1D	Believe people could put thoughts in your head that are not your own?	Present, none,
1381	2.4.11.Q1E	Believe the TV or radio was sending you messages?	none,Past,
1382	2.4.11.Q1F	Believe someone was controlling your mind or body like a robot	Present,none,
1855	2.4.11.Q1g	Believe something was seriously wrong with your body, like it was rotting from the inside	Present, none,
1856	2.4.11.Q1h	Were convinced that the world was about to come to an end	Present,none,
1857	2.4.11.Q1i	Had other thoughts that were odd and that other people didn't think were true (fill in)	,
1376	2.4.11.Q1	Below is a list of different ideas kids sometimes have. Check below all the ones you currently think are true or thought were true in the past.	
1383	2.4.12.Q1	If someone tried to convince you that these thoughts listed below aren't really true, could they? Someone was out to get you, was following you, or spying on you	No

1384	2.4.21.Q1	Believe god had chosen you to do something special for him Believe people could take thoughts out of your mind against your will Believe people could put thoughts in your head that are not your own Believe someone was controlling your mind or body like a robot Believe something was seriously wrong with your body, like it was rotting from the inside Were convinced that the world was about to come to an end In the past two weeks, how	Several days
		often have you thought any of the things listed below? Someone was out to get you, was following you, or spying on you Believe god had chosen you to do something special for him Believe people could take thoughts out of your mind against your will Believe people could put thoughts in your head that are not your own Believe someone was controlling your mind or body like a robot Believe something was seriously wrong with your body, like it was rotting from the inside Were convinced that the world was about to come to an end	
1386	2.4.12.Q2	In the past, if someone tried to convince you that it really isn't true that	No

		Believe the tv or radio was sending you messages, could they convince you it wasn't true?	
1387	2.4.21.Q2	In the past when you had the thoughts listed below how often did you have them in a typical week? Believe the tv or radio was sending you messages	Several days
1836	2.4.20.Q1a	Hear voices that told them to do something?	No
1838	2.4.20.Q1c	Hear two or more people talking when no one was there?	No
1839	2.4.20.Q1d	Hear their thoughts spoken aloud?	No
1840	2.4.20.Q1e	Hear voices that no one else could hear?	Yes
1842	2.4.20.Q1g	See something that wasn't there, that no one else could see?	Yes
1843	2.4.20.Q1h	Feel something on their skin when there wasn't anything there?	No
1844	2.4.20.Q1i	Smell something that no one else could smell?	Yes
1845	2.4.20.Q1j	5	Yes
1846	2.4.20.Q1k	Believe god had chosen them to do something special for him?	No
1848	2.4.20.Q1m	Believe people could take thoughts out of their mind against their will?	Yes

1849	2.4.20.Q1n	Believe people could put	Yes
		thoughts in their head that were not their own?	
1850	2.4.20.Q1o	Believe the TV or radio was sending them messages?	No
1851	2.4.20.Q1p	Believe someone was controlling their mind or body like a robot	No
1852	2.4.20.Q1q	Believe something was seriously wrong with their body, like it was rotting from the inside	Yes
1853	2.4.20.Q1r	Were convinced that the world was about to come to an end	Yes
1884	2.4.20.Q1t	Felt people they didn't know were spying on them	No
1835	2.4.20.Q1	Does anyone else in your family or any members of your church also have any of the experiences listed below?	
1371	2.4.10.Q3A	With friends	No
1372	2.4.10.Q3B	With family	Yes
1373	2.4.10.Q3C	At school	No
1374	2.4.10.Q3D	At work	Yes
1375	2.4.10.Q3E	With any other activities	No
1370	2.4.10.Q3	Have the symptoms we have	

		just been talking about caused difficulties for you in any of the following areas	
1388	2.4.14.Q3	Have the symptoms we have just been talking about only happen when you were drinking a lot or using drugs? Hear voices that told you to do something Hear two or more people talking when no one was there? Hear your thoughts spoken aloud Hear voices that no one else could hear See something that wasn't there, that no one else could see Feel something on your skin when there wasn't anything there Smell something that no one else could smell? Smell something special for him? Believe god had chosen you to do something special for him? Believe people could take thoughts out of your mind against your will? Believe people could put thoughts in your head that are not your own? Believe the TV or radio was sending you messages? Believe someone was controlling your mind or body like a robot Believe something was seriously wrong with your body, like it was rotting from the inside Were convinced that the world was about to come to an end	No
1385	2.4.13.Q3	Have you only had the symptoms we have just been	No

1368	2.4.13.Q4	talking about when you are feeling super sad, cranky, or more energized than usual? Hear voices that told you to do something Hear two or more people talking when no one was there? Hear your thoughts spoken aloud Hear voices that no one else could hear See something that wasn't there, that no one else could see Feel something on your skin when there wasn't anything there Smell something that no one else could smell? 5 Believe god had chosen you to do something special for him? Believe people could take thoughts out of your mind against your will? Believe people could put thoughts in your head that are not your own? Believe the TV or radio was sending you messages? Believe someone was controlling your mind or body like a robot Believe something was seriously wrong with your body, like it was rotting from the inside Were convinced that the world was about to come to an end	No
1000	2.7.10.94	you had the symptoms we have just been talking about, was your mood normal? Hear voices that told you to do something Hear two or more people	

		talking when no one was there? Hear your thoughts spoken aloud Hear voices that no one else could hear See something that wasn't there, that no one else could see Feel something on your skin when there wasn't anything there Smell something that no one else could smell? Smell something that no one else could smell? Believe god had chosen you to do something special for him? Believe people could take thoughts out of your mind against your will? Believe people could put thoughts in your head that are not your own? Believe the TV or radio was sending you messages? Believe someone was controlling your mind or body like a robot Believe something was seriously wrong with your body, like it was rotting from the inside Were convinced that the world was about to come to an end		
1369	2.4.13.Q5	Was your mood ever normal for as long as two weeks while you had these symptoms? Hear voices that told you to do something Hear two or more people talking when no one was there? Hear your thoughts spoken aloud Hear voices that no one else could hear See something that wasn't there, that no one else could	Yes	

		see Feel something on your skin when there wasn't anything there Smell something that no one else could smell? 5 Believe god had chosen you to do something special for him? Believe people could take thoughts out of your mind against your will? Believe people could put thoughts in your head that are not your own? Believe the TV or radio was sending you messages? Believe someone was controlling your mind or body like a robot Believe something was seriously wrong with your body, like it was rotting from the inside Were convinced that the world was about to come to an end	
1364	2.4.19.Q3	For how long have you been having the symptoms we have just been talking about? Please enter days, weeks or months. Hear voices that told you to do something Hear two or more people talking when no one was there? Hear your thoughts spoken aloud Hear voices that no one else could hear See something that wasn't there, that no one else could see Feel something on your skin when there wasn't anything there Smell something that no one else could smell?	days:0 / weeks:0 / months:2

			Believe god had chosen you to do something special for him? Believe people could take thoughts out of your mind against your will? Believe people could put thoughts in your head that are not your own? Believe the TV or radio was sending you messages? Believe someone was controlling your mind or body like a robot Believe something was seriously wrong with your body, like it was rotting from the inside Were convinced that the world was about to come to an end	
	1397	2.4.17.Q1	You said you also had symptoms like this in the past. Did you ever have a three month period or longer without any of these symptoms? Hear voices that told you to do something Believe the TV or radio was sending you messages?	No
Panic Disorder	141	1.5.1.Q1	In the past two weeks, have you had any panic attacks where for no reason at all you suddenly felt super scared and like you were having a heart attack?	Nearly every day
	142	1.5.1.Q2	When did this begin?	Month:January / Year:2021
	1401	2.5.2.Q1a	Shortness of breath	Yes
	1402	2.5.2.Q1b	Dizziness	No

1403	2.5.2.Q1c	Heart palpitations	Yes
1404	2.5.2.Q1d	Shaking	Yes
1405	2.5.2.Q1e	Sweating	No
1406	2.5.2.Q1f	Choking	No
1407	2.5.2.Q1g	Nausea	Yes
1408	2.5.2.Q1h	Feeling that things aren't real	Yes
1409	2.5.2.Q1i	Numbness	No
1410	2.5.2.Q1j	Heat or chills	No
1411	2.5.2.Q1k	Chest pain	Yes
1412	2.5.2.Q1I	Fear of dying	Yes
1413	2.5.2.Q1m	Fear of losing control	No
1400	2.5.2.Q1	Before you said you sometimes have panic attacks, where for no reason you suddenly feel super scared, like you are	

			having a heart attack. When you have panic attacks, do you experience any of the following? Check all that apply.	
	1414	2.5.3.Q1	Over the past 2 weeks, how often have you worried about having another attack, or about something bad happening because of the attacks?	More than half the days
	1415	2.5.4.Q1	In the past two weeks, how often have you not gone out, gone out less often, or done anything else differently because of the attacks?	Rarely
	1433	2.5.4.Q2	After your first attack, or after your first few attacks, did you stop going out or go out less often, or do anything else differently because of them?	Yes
	1416	2.5.5.Q1	You mentioned you worried about the attacks and did things differently because of the attacks. Was this true for one month or longer?	No
	1417	2.5.6.Q1	Were the attacks related to drug use?	Yes
	1892	2.5.9.Q1	Did these symptoms start shortly after a significant life event or stressor?	No
Agoraphobia	146	1.6.1.Q1A	Buses	Not at all
	147	1.6.1.Q1B	Trains	Not at all
	148	1.6.1.Q1C	Subways	Not at all
	149	1.6.1.Q1D	Open Spaces	Not at all

	150	1.6.1.Q1E	Bridges	Not at all
	151	1.6.1.Q1F	Shops	Not at all
	152	1.6.1.Q1G	Theatres	Not at all
	153	1.6.1.Q1H	Malls	Not at all
	154	1.6.1.Q1I	Crowds	Not at all
	155	1.6.1.Q1J	Standing in lines	Not at all
	156	1.6.1.Q1K	Being out of the house alone	Not at all
	145	1.6.1.Q1	In the past two weeks, how often have you avoided any of the following places because they make you super anxious? Mark all that apply.	
	158	1.6.1.Q3a	Was there ever a time that for several months you avoided two or more of these situations because they made you super anxious: leaving the house, riding in cars or buses, being in enclosed places like theatres or crowds, or being in open spaces like parking lots or on bridges?	No
Separation Anxiety	160	1.7.1.Q1	In the past two weeks, how often have you felt super upset when your mom, dad, or another caregiver left the house	Not at all

			or dropped you off somewhere?	
	161	1.7.1.Q2a	Was there ever a time that you got super upset when your mom, dad or another caregiver left the house or dropped you off somewhere?	No
	162	1.7.2.Q1	In the past two weeks, how often have you tried to stay home or actually stayed home from school because you wanted to be with your mom, dad, or another caregiver?	Not at all
	163	1.7.2.Q2a	Was there ever a time that you didn't want to go to school because you didn't want to be away from your mom, dad, or another caregiver?	No
Social Anxiety Disorder	167	1.8.1.Q1	In the past two weeks, how often have you felt super shy and really uncomfortable in different social situations?	Not at all
	169	1.8.1.Q3a	Was there ever a time, for a month or longer, that you felt super shy and really uncomfortable in different social situations?	No
Specific Phobia	176	1.9.1.Q1a	The dark	Yes
	177	1.9.1.Q1b	Spiders	Yes
	178	1.9.1.Q1c	Heights	No
	179	1.9.1.Q1d	Animals	No
	180	1.9.1.Q1e	Elevators	No

181	1.9.1.Q1f	Bridges	No
182	1.9.1.Q1g	Flying	No
183	1.9.1.Q1h	Seeing blood	No
184	1.9.1.Q1i	Receiving an injection	Yes
185	1.9.1.Q1J	Other (if Yes specify)	
175	1.9.1.Q1	Mark below the things you currently or in the past felt deathly afraid of and that always or almost always made you super anxious:	
186	1.9.2.Q1	Over the past two weeks, how often have you avoided or tried to avoid the dark, spiders or receiving an injection?	Rarely
196	1.9.2.Q2	Was there ever a time you avoided or tried to avoid these things the dark, spiders or receiving an injection, or if you couldn't avoid it, endured it with great distress?	Yes
188	1.9.3.Q1a	With friends	No
189	1.9.3.Q1b	With family	No
190	1.9.3.Q1c	At school	No

	191	1.9.3.Q1d	At work	No
	192	1.9.3.Q1e	In after school activities	No
	193	1.9.3.Q1f	In other places or times	No
	187	1.9.3.Q1	Has your fear of these things caused problems for you in any of the following areas:	
	194	1.9.4.q1	How much discomfort or distress has your fear of these things caused you?	8
	195	1.9.5.q1	When did your fear of these things begin?	Month:January / Year:2014
	197	1.9.5.Q2	When was the last time you felt deathly afraid of any of these things?	Month:January / Year:2019
Generalized Anxiety Disorder	198	1.10.1.Q1	In the past two weeks, how often have you worried a super lot about a lot of different things?	Rarely
	200	1.10.1.Q3a	Was there ever a time, for a month or longer, that you worried a super lot about a lot of different things?	Yes
	201	1.10.1.Q4	When was that?	Month:January / Year:2014
	1598	2.10.2.Q2A	How I look	Yes
	1599	2.10.2.Q2B	What I said	Yes
	1600	2.10.2.Q2C	How I did on a test	Yes

1601	2.10.2.Q2D	If people like me	Yes
1602	2.10.2.Q2E	The future	No
1603	2.10.2.Q2F	The past	Yes
1604	2.10.2.Q2G	Other (specify)	
1597	2.10.2.Q2	You said back in January 2014 you worried a lot. What kinds of things did you worry about back then? Mark as many as apply.	
1606	2.10.3.Q2A	I felt restless	Yes
1607	2.10.3.Q2B	I felt keyed up	No
1608	2.10.3.Q2C	I felt easily tired	Yes
1609	2.10.3.Q2D	I had difficulty concentrating	No
1610	2.10.3.Q2E	My mind went blank	No
1611	2.10.3.Q2F	I felt irritable	Yes
1612	2.10.3.Q2G	I had muscle tension	Yes

1613	2.10.3.Q2H	I had difficulty falling asleep	Yes
1614	2.10.3.Q2l	I had difficulty staying asleep	No
1605	2.10.3.Q2	In addition to having problems with worrying, did you have any of these other symptoms back then? Mark all that apply.	
1615	2.10.4.Q2	Back then, did you feel like you had trouble controlling your worries?	No
1617	2.10.5.Q2A	With friends	No
1618	2.10.5.Q2B	With your family	No
1619	2.10.5.Q2C	At school	Yes
1620	2.10.5.Q2D	At work	No
1621	2.10.5.Q2E	In after school activities	Yes
1622	2.10.5.Q2F	In other places or times	No
1616	2.10.5.Q2	Did your worrying a lot cause problems for you in any of the following areas:	
1623	2.10.6.Q2	How much discomfort or distress did your worrying cause you back then?	5

	1624	2.10.7.Q1	When did your problems with excessive worries stop?	Month:January / Year:2021
Obsessive Compulsive Disorder	203	1.11.1.Q1A	Thoughts or images about harming others or doing something horrible when you didn't want to	Past 2 weeks~Yes,Ever~Yes,
	204	1.11.1.Q1C	Meaningless words, numbers, or images that intrude into your mind that you can't get rid of	Past 2 weeks~No,Ever~No,
	205	1.11.1.Q1D	Religious thoughts that are disrespectful or offensive	Past 2 weeks~Yes,Ever~Yes,
	206	1.11.1.Q1E	Thoughts that things had to be lined up exactly right or done a special way	Past 2 weeks~Yes,Ever~Yes,
	207	1.11.1.Q1F	Worries about throwing seemingly unimportant things away	Past 2 weeks~Yes,Ever~Yes,
	208	1.11.1.Q1G	Thoughts about dirt, germs or contamination	Past 2 weeks~No,Ever~No,
	209	1.11.1.Q1H	Other recurring unwelcome senseless distressing thoughts (specify)	Past 2 weeks:5\$,Ever:2\$\$,
	202	1.11.1.Q1	Have you ever had any of the following unwelcome, senseless, distressing thoughts come into your mind over and over again, even though you didn't want to have them? Mark all that apply. DO NOT RATE THOUGHTS ABOUT GERMS OR OTHER UNWELCOME SENSELESS THOUGHTS AS TRUE IF THESE THOUGHTS ONLY OCCURRED IN RELATION TO THE COVID-19 PANDEMIC.	
	1858	1.11.1.Q11a	On how many days the past two weeks have you had these	Several days

		thoughts?	
1859	1.11.1.Q11b	How often did you have these thoughts back then?	Several days
1860	1.11.2.Q11a	On how many days the past two weeks have you had to do these things over and over?	Several days
1861	1.11.2.Q11b	How often did you have these thoughts back then?	Several days
212	1.11.2.Q1A	Excessive or ritualized cleaning of household or other items	Past 2 weeks~No,Ever~No,
213	1.11.2.Q1B	Excessive hand washing	Past 2 weeks~No,Ever~No,
214	1.11.2.Q1C	Excessive or ritualized showering, bathing, tooth brushing, or toilet routine	Past 2 weeks~No,Ever~No,
215	1.11.2.Q1D	Ordering or arranging things a certain way	Past 2 weeks~No,Ever~No,
216	1.11.2.Q1F	Touching things a certain way	Past 2 weeks~No,Ever~No,
217	1.11.2.Q1G	Needing to count and recount	Past 2 weeks~No,Ever~No,
218	1.11.2.Q1H	Moving in a certain way or repeating certain actions	Past 2 weeks~No,Ever~No,
219	1.11.2.Q1I	Mentally repeating certain words or numbers	Past 2 weeks~No,Ever~No,
220	1.11.2.Q1J	Other repetitive behaviors that interfere with your life (specify)	,
211	1.11.2.Q1	Have you ever found yourself	

			having to do over and over again any of the things listed below? Mark all that apply. DO NOT RATE THE BEHAVIORS OF CLEANING OR HAND WASHING AS TRUE IF THESE BEHAVIORS ONLY OCCURRED IN RELATION TO THE COVID-19 PANDEMIC.	
Enuresis and Encopresis	222	1.12.1.Q1	In the past two weeks, how many times at night or during the day have you wet yourself?	Not at all
	232	1.12.1.Q2a	Was there ever a time, for a month or longer, that you had a lot of accidents and wet yourself either in the day or nighttime?	No
	245	1.12.5.Q1	In the past two weeks, how many times at night or during the day have you soiled yourself and had a bowel movement in your pants?	Not at all
	248	1.12.5.Q2a	Was there ever a time, for a month or longer, that you had a lot of accidents and soiled yourself either in the day or nighttime?	No
Eating Disorders	254	1.13.1.Q1	These next set of questions are about your eating habits and your feelings about your shape and weight. In the past two weeks, how often have you been preoccupied with your weight or worrying a lot about being fat?	More than half the days
	257	1.13.1.Q2a	Was there ever a time, that you worried all the time about your weight or becoming fat?	No
	255	1.13.2.Q1	What is your current height and weight (please make your best guess)?	feet:5 / inches:7 / weight:145
	1994	1.13.2.Q1b	Was there ever a time that you	No

		weighed a lot less than usual or a lot less than others thought you should?	
259	1.13.3.Q1	In the past two weeks, how many days have you made yourself throw up to try to control your weight or because you were upset that you ate too much?	Not at all
260	1.13.3.Q2a	Was there ever a time, that you made yourself throw up once a week or more?	No
261	1.13.4.Q1	In the past two weeks, how many days did you do other things to control your weight, like exercise excessively, restrict what you ate, take laxatives, or diet pills?	Rarely
263	1.13.5.Q1	In the past two weeks, how often have you had eating binges, when you lost control of your eating and ate way more than you needed, because you were unable to stop yourself from eating?	Not at all
264	1.13.5.Q2a	Was there ever a time, for a month or longer, that you would go on eating binges at least once a week?	No
267	1.13.5.Q3c	You said that you have had a time when you did things to control your weight, like exercise excessively, restrict food, took laxatives, or diet pills. When did this begin?	Month:January / Year:2015
826	2.13.6.Q1	Do you feel like your self-worth is tied to your weight?	Yes
828	2.13.7.Q1a	Diet pills	Past 2 weeks~No,Ever~Yes,

	829	2.13.7.Q1b	Laxatives	Past 2 weeks~No,Ever~No,
	830	2.13.7.Q1c	Water pills	Past 2 weeks~Yes,Ever~No,
	831	2.13.7.Q1d	Throwing up	Past 2 weeks~No,Ever~No,
	832	2.13.7.Q1e	Exercising a lot	Past 2 weeks~Yes,Ever~Yes,
	833	2.13.7.Q1f	Only eating foods or drinks with minimal calories (e.g., carrots, celery, zero calorie drinks)	Past 2 weeks~Yes,Ever~No,
	834	2.13.7.Q1g	Other (fill in)	,
	827	2.13.7.Q1	Please note below all the different methods that you have used to control your weight.	
	835	2.13.8.Q1a	On average, do you use at least one of these methods to try to control your weight at least once a week?	No
	836	2.13.8.Q2a	For how long have you been using Diet pills, Water pills, Exercising a lot, Only eating foods or drinks with minimal calories (e.g., carrots, celery and zero calorie drinks) one or more times a week? Please enter weeks, months, or years.	weeks:0 / months:2 / years:0
Attention Deficit Hyperactivity Disorder	280	1.14.1.Q1	In the past two weeks, how often have you had trouble paying attention and keeping focused when you're working on your homework or other things that require concentration?	Nearly every day
	281	1.14.1.Q2	Have you had trouble paying	No

			attention and staying focused since the time you were in elementary school or earlier?	
	284	1.14.2.Q1	In the past two weeks, how often have little distractions, like someone talking or the telephone ringing, made it hard for you to keep your mind on what you were working on?	Nearly every day
	285	1.14.2.Q2	Have you gotten easily distracted since the time you were in elementary school?	No
	288	1.14.3.Q1	In the past two weeks, how often have you had trouble staying in your seat at school or at home when you were expected to stay seated?	Not at all
	290	1.14.3.Q3a	Was there ever a time that you often had trouble staying seated?	No
	292	1.14.4.Q1	In the past two weeks, how often have you gotten in trouble, or done something you could have gotten in trouble for because you were impulsive and acted before you thought?	Rarely
	294	1.14.4.Q3a	Was there ever a time that you were impulsive and often acted before you thought?	Yes
	295	1.14.4.Q4	Was it a problem for more than one school year?	No
Oppositional Defiant Disorder	311	1.15.2.Q1	In the past two weeks, how often did you talk back to or argue with your parents or teachers?	More than half the days
	313	1.15.3.Q1	In the past two weeks, how often did you refuse to do something a grown up asked you to do?	Rarely
	314	1.15.3.Q2a	Was there ever a time that you	No

		often refused to do the things grownups asked?	
315	1.15.3.Q3a	You said that you have had a time when you argued a lot with your parents or teachers. When did this begin?	Month:January / Year:2014
723	2.15.4.Q1	In the past two weeks, how often have you felt annoyed?	Several days
735	2.15.4.Q2	Was there ever a time when you often felt annoyed?	Yes
724	2.15.5.Q1	In the past two weeks, how often have you felt angry at, or resentful toward other people?	Several days
736	2.15.5.Q2	Was there ever a time you often felt angry or resentful toward other people?	No
725	2.15.6.Q1	Over the past two weeks, how often have you done something to get back at someone who hurt you or made you mad?	Several days
726	2.15.7.Q1	Over the past two weeks, how often have you done things on purpose to annoy other people?	More than half the days
727	2.15.8.Q1	In the past two weeks, how often have you blamed other people if you made a mistake or did something wrong?	Rarely
729	2.15.9.Q1A	With friends	No
730	2.15.9.Q1B	With family	No
731	2.15.9.Q1C	At school	Yes
		1	

	732	2.15.9.Q1D	At work	No
	733	2.15.9.Q1E	With any other activities	No
	728	2.15.9.Q1	Have the things we've just been talking about caused problems for you in any of the following areas:	
	2000	2.15.12.Q1	Did these symptoms start shortly after a significant life event or stressor?	Yes
	2001	2.15.12.Q2	Describe what happened in the space below if you are comfortable doing so. If not, just press continue.	
Conduct Disorder	319	1.16.1.Q2a	Was there ever a time that you often told lies, not just to get out of trouble, but to try to con someone?	No
	321	1.16.2.Q2a	Was there ever a time that you cut school without the permission of your parents?	No
	325	1.16.3.Q3a	Was there ever a time that you often got into a lot of physical fights with someone other than your brothers and/or sisters?	No
	328	1.16.4.Q2a	Was there ever a time that you often made fun of, threatened, or bullied people?	No
	330	1.16.5.Q2a	Was there ever a time that you stole something worth at least \$20?	No
Tic Disorders	362	1.17.1.Q1	In the past two weeks, how often did you have tics like uncontrollable eye blinking, shoulder shrugging, head tilting, or other parts of your body moving unexpectedly when you did not want them	Not at all

			to?	
	363	1.17.1.Q2a	Was there ever a time that you often had unexpected tics or body movements?	No
	364	1.17.2.Q1	In the past two weeks, how often did you repeatedly make sounds or say words that you couldn't control?	Not at all
	365	1.17.2.Q2a	Was there ever a time that you repeatedly made sounds or said words that you couldn't control?	No
Alcohol Use Disorder	389	1.19.1.Q1	What are your favorite alcoholic beverages to drink? Check all that apply.	Don't drink alcohol,
	392	1.19.3.Q2	Was there ever a time in the past when you had three or more alcoholic drinks on a given day?	No
	394	1.19.5.Q2a	Was there ever a time that drinking caused you any problems with your parents, friends, or people at school or at work?	No
Drug Use Disorders	402	1.20.1.Q1A	Marijuana (pot, weed, hash, THC, blunts, synthetic marijuana/K2/Spice, marijuana edibles, concentrates such as dabs or shatter)	Yes
	403	1.20.1.Q1B	Stimulants (e.g., Ritalin, Adderall, ephedrine, speed, uppers, amphetamines, dexedrine, diet pills, crystal meth, methamphetamine, cathinones/bath salt)	Yes
	404	1.20.1.Q1C	Sedatives/Hypnotics/Anxiolytics (Barbiturates (sedatives, downers), Benzodiazepine, Quaalude (ludes), Valium, ILibrium, Xanax, GHB)	No
	405	1.20.1.Q1D	Cocaine (coke, crack)	No

406	1.20.1.Q1E	Opioids (heroin, OxyContin morphine, codeine, methadone, Demerol, Percodan)	No
407	1.20.1.Q1F	Other Hallucinogens (LSD, mescaline, peyote, DMT, salvia, psilocybin, magic mushrooms, ecstasy/molly/MDMA, morning glory seeds)	No
408	1.20.1.Q1G	Tobacco (tobacco cigarettes, electronic cigarettes, vape pens, e-hookah, hookah, cigars, and smokeless tobacco/chew/snuff)	Yes
409	1.20.1.Q1H	Solvents/Inhalants (liquids, sprays or gases that you sniff or inhale, such as glue, gasoline, ether, paint, nitrous oxide, whippits, or poppers)	No
410	1.20.1.Q1I	Other Drugs (fill in) (e.g., steroids, etc).	
1912	1.20.1.Q1J	PCP (angel dust), ketamine, cough medicine or DXM	No
401	1.20.1.Q1	Check below the drugs any of your friends use:	
412	1.20.2.Q1A	Marijuana (pot, weed, hash, THC, blunts, synthetic marijuana/K2/Spice, marijuana edibles, concentrates such as dabs or shatter)	Yes
413	1.20.2.Q1B	Stimulants (e.g., Ritalin, Adderall, ephedrine, speed, uppers, amphetamines, dexedrine, diet pills, crystal meth, methamphetamine, cathinones/bath salt)	Yes

414	1.20.2.Q1C	Sedatives/Hypnotics/Anxiolytics (Barbiturates (sedatives, downers), Benzodiazepine, Quaalude (ludes), Valium, ILibrium, Xanax, GHB)	No
415	1.20.2.Q1D	Cocaine (coke, crack)	No
416	1.20.2.Q1E	Opioids (heroin, OxyContin morphine, codeine, methadone, Demerol, Percodan)	No
417	1.20.2.Q1F	Other Hallucinogens (LSD, mescaline, peyote, DMT, salvia, psilocybin, magic mushrooms, ecstasy/molly/MDMA, morning glory seeds)	No
418	1.20.2.Q1G	Tobacco (tobacco cigarettes, electronic cigarettes, vape pens, e-hookah, hookah, cigars, and smokeless tobacco/chew/snuff)	Yes
419	1.20.2.Q1H	Solvents/Inhalants (liquids, sprays or gases that you sniff or inhale, such as glue, gasoline, ether, paint, nitrous oxide, whippits, or poppers)	No
420	1.20.2.Q1I	Other Drugs (fill in) (e.g., steroids, etc).	
1913	1.20.2.Q1J	PCP (angel dust), ketamine, cough medicine or DXM	No
411	1.20.2.Q1	Check below the drugs you have tried one or more times:	
422	1.20.3.Q1A	Marijuana (pot, weed, hash, THC, blunts, synthetic marijuana/K2/Spice, marijuana edibles, concentrates such as dabs or shatter)	Rarely

423	1.20.3.Q1B	Stimulants (e.g., Ritalin, Adderall, ephedrine, speed, uppers, amphetamines, dexedrine, diet pills, crystal meth, methamphetamine, cathinones/bath salt)	Not at all
428	1.20.3.Q1G	Tobacco (tobacco cigarettes, electronic cigarettes, vape pens, e-hookah, hookah, cigars, and smokeless tobacco/chew/snuff)	Rarely
421	1.20.3.Q1	In the past two weeks, how often did you use the following drugs? (don't count drugs taken as prescribed by your doctor)	
432	1.20.3.Q2A	Marijuana (pot, weed, hash, THC, blunts, synthetic marijuana/K2/Spice, marijuana edibles, concentrates such as dabs or shatter)	Yes
433	1.20.3.Q2B	Stimulants (e.g., Ritalin, Adderall, ephedrine, speed, uppers, amphetamines, dexedrine, diet pills, crystal meth, methamphetamine, cathinones/bath salt)	No
438	1.20.3.Q2G	Tobacco (tobacco cigarettes, electronic cigarettes, vape pens, e-hookah, hookah, cigars, and smokeless tobacco/chew/snuff)	Yes
431	1.20.3.Q2	Have you used any of the following drugs more than five times? Again, don't include drugs taken as prescribed by a doctor.	
442	1.20.4.Q1A	Marijuana (pot, weed, hash, THC, blunts, synthetic marijuana/K2/Spice, marijuana edibles, concentrates such as dabs or shatter)	Not at all

448	1.20.4.Q1G	Tobacco (tobacco cigarettes, electronic cigarettes, vape pens, e-hookah, hookah, cigars, and smokeless tobacco/chew/snuff)	Not at all
441	1.20.4.Q1	In the past two weeks, how often did you wake up feeling sick (nausea, headache, tired, anxious, sad, dizzy, a lot of sweating, stomach ache) or missed school or work because of using the drug or drugs listed below the night before?	
452	1.20.4.Q2aa	Marijuana (pot, weed, hash, THC, blunts, synthetic marijuana/K2/Spice, marijuana edibles, concentrates such as dabs or shatter)	No
458	1.20.4.Q2ag	Tobacco (tobacco cigarettes, electronic cigarettes, vape pens, e-hookah, hookah, cigars, and smokeless tobacco/chew/snuff)	No
451	1.20.4.Q2a	Was there ever a time you woke up feeling sick (nausea, headache, tired, anxious, sad, dizzy, a lot of sweating, stomach ache) or missed school or work because of using marijuana or tobacco the night before?	
462	1.20.5.Q1A	Marijuana (pot, weed, hash, THC, blunts, synthetic marijuana/K2/Spice, marijuana edibles, concentrates such as dabs or shatter)	Not at all
468	1.20.5.Q1G	Tobacco (tobacco cigarettes, electronic cigarettes, vape pens, e-hookah, hookah, cigars, and smokeless tobacco/chew/snuff)	Not at all
461	1.20.5.Q1	In the past two weeks, how often has your use of the drug	

		or drugs listed below led to arguments or problems with your parents, friends, or people at school or at work?	
472	1.20.5.Q2aa	Marijuana (pot, weed, hash, THC, blunts, synthetic marijuana/K2/Spice, marijuana edibles, concentrates such as dabs or shatter)	No
478	1.20.5.Q2ag	Tobacco (tobacco cigarettes, electronic cigarettes, vape pens, e-hookah, hookah, cigars, and smokeless tobacco/chew/snuff)	No
471	1.20.5.Q2a	Was there ever a time that your use of marijuana or tobacco led to arguments or problems with your parents, friends, or people at school or at work?	
482	1.20.5.Q3aa	Marijuana (pot, weed, hash, THC, blunts, synthetic marijuana/K2/Spice, marijuana edibles, concentrates such as dabs or shatter)	Arguments- >Month:January / Year:2020
488	1.20.5.Q3ag	Tobacco (tobacco cigarettes, electronic cigarettes, vape pens, e-hookah, hookah, cigars, and smokeless tobacco/chew/snuff)	Arguments- >Month:January / Year:2020
481	1.20.5.Q3a	You said that you had a time when you had the following problems because of using the drug or drugs listed below. When did this begin?	Month:January / Year:2020
911	2.20.6.Q1A	Marijuana (pot, weed, hash, THC, blunts, synthetic marijuana/K2/Spice, marijuana edibles, concentrates such as dabs or shatter)	Rarely
917	2.20.6.Q1G	Tobacco (tobacco cigarettes, electronic cigarettes, vape pens, e-hookah, hookah,	More than half the days

		cigars, and smokeless tobacco/chew/snuff)	
910	2.20.6.Q1	These next questions refer to your use of the drugs you mentioned earlier that you've tried. In the past two weeks, how often have you told yourself you'll only use a certain amount of the following drugs on a given occasion and found yourself using much more than you planned?	
940	2.20.7.Q1a	Marijuana (pot, weed, hash, THC, blunts, synthetic marijuana/K2/Spice, marijuana edibles, concentrates such as dabs or shatter)	Several days
946	2.20.7.Q1g	Tobacco (tobacco cigarettes, electronic cigarettes, vape pens, e-hookah, hookah, cigars, and smokeless tobacco/chew/snuff)	Several days
939	2.20.7.Q1	In the last 2 weeks, how often have you gone to school or work after you had been using the following drugs or when you were hung over?	
969	2.20.8.Q1a	Marijuana (pot, weed, hash, THC, blunts, synthetic marijuana/K2/Spice, marijuana edibles, concentrates such as dabs or shatter)	Several days
968	2.20.8.Q1	In the past two weeks, how often have you driven after using the following drugs?	
998	2.20.8.Q3a	Marijuana (pot, weed, hash, THC, blunts, synthetic marijuana/K2/Spice, marijuana edibles, concentrates such as dabs or shatter)	Rarely
1004	2.20.8.Q3g	Tobacco (tobacco cigarettes, electronic cigarettes, vape	Several days

		pens, e-hookah, hookah, cigars, and smokeless tobacco/chew/snuff)	
997	2.20.8.Q3	In the past two weeks, how often have you done anything dangerous after using the following drugs?	
1007	2.20.8.Q4	What did you do?	
1029	2.20.9.Q1a	Marijuana (pot, weed, hash, THC, blunts, synthetic marijuana/K2/Spice, marijuana edibles, concentrates such as dabs or shatter)	Several days
1035	2.20.9.Q1g	Tobacco (tobacco cigarettes, electronic cigarettes, vape pens, e-hookah, hookah, cigars, and smokeless tobacco/chew/snuff)	Several days
1028	2.20.9.Q1	In the past two weeks, how often have you thrown up or had an accident and hurt yourself after using the following drugs?	
1058	2.20.10.Q1a	Marijuana (pot, weed, hash, THC, blunts, synthetic marijuana/K2/Spice, marijuana edibles, concentrates such as dabs or shatter)	More than half the days
1064	2.20.10.Q1g	Tobacco (tobacco cigarettes, electronic cigarettes, vape pens, e-hookah, hookah, cigars, and smokeless tobacco/chew/snuff)	More than half the days
1057	2.20.10.Q1	In the past two weeks, how often has using the following drugs made your moods notably worse?	
1087	2.20.11.Q1a	Marijuana (pot, weed, hash, THC, blunts, synthetic	Rarely

		marijuana/K2/Spice, marijuana edibles, concentrates such as dabs or shatter)	
1093	2.20.11.Q1g	Tobacco (tobacco cigarettes, electronic cigarettes, vape pens, e-hookah, hookah, cigars, and smokeless tobacco/chew/snuff)	More than half the days
1086	2.20.11.Q1	In the past two weeks, how often did you crave the following drugs?	
1097	2.20.11.Q2aa	Marijuana (pot, weed, hash, THC, blunts, synthetic marijuana/K2/Spice, marijuana edibles, concentrates such as dabs or shatter)	No
1096	2.20.11.Q2a	Was there ever a time that you often craved the following drugs?	
1116	2.20.12.Q1a	Marijuana (pot, weed, hash, THC, blunts, synthetic marijuana/K2/Spice, marijuana edibles, concentrates such as dabs or shatter)	Several days
1122	2.20.12.Q1g	Tobacco (tobacco cigarettes, electronic cigarettes, vape pens, e-hookah, hookah, cigars, and smokeless tobacco/chew/snuff)	Rarely
1115	2.20.12.Q1	How often has the time using the following drugs taken the place of the time you used to spend doing your usual activities, like sports, hobbies, spending time with family or friends, or work or school?	
1132	2.20.12.Q2ag	Tobacco (tobacco cigarettes, electronic cigarettes, vape pens, e-hookah, hookah, cigars, and smokeless tobacco/chew/snuff)	No

1125	2.20.12.Q2a	Was there ever a time when using the following drugs took the place of the time you used to spend doing your usual activities?	
1145	2.20.13.Q1a	Marijuana (pot, weed, hash, THC, blunts, synthetic marijuana/K2/Spice, marijuana edibles, concentrates such as dabs or shatter)	Yes
1151	2.20.13.Q1g	Tobacco (tobacco cigarettes, electronic cigarettes, vape pens, e-hookah, hookah, cigars, and smokeless tobacco/chew/snuff)	No
1144	2.20.13.Q1	Was there ever a time you that you often thought about wanting to cut back on your use of the following drugs?	
1155	2.20.14.Q1a	Marijuana (pot, weed, hash, THC, blunts, synthetic marijuana/K2/Spice, marijuana edibles, concentrates such as dabs or shatter)	No
1161	2.20.14.Q1g	Tobacco (tobacco cigarettes, electronic cigarettes, vape pens, e-hookah, hookah, cigars, and smokeless tobacco/chew/snuff)	Yes
1154	2.20.14.Q1	Was there ever a time that you tried to quit using the following drugs but couldn't?	
1165	2.20.15.Q1a	Marijuana (pot, weed, hash, THC, blunts, synthetic marijuana/K2/Spice, marijuana edibles, concentrates such as dabs or shatter)	Yes
1171	2.20.15.Q1g	Tobacco (tobacco cigarettes, electronic cigarettes, vape pens, e-hookah, hookah, cigars, and smokeless tobacco/chew/snuff)	No

1164	2.20.15.Q1	Was there ever a time that you had the shakes or other bad symptoms after you cut down	
		on your use of the following drugs?	
1175	2.20.16.Q1a	Marijuana (pot, weed, hash, THC, blunts, synthetic marijuana/K2/Spice, marijuana edibles, concentrates such as dabs or shatter)	No
1181	2.20.16.Q1g	Tobacco (tobacco cigarettes, electronic cigarettes, vape pens, e-hookah, hookah, cigars, and smokeless tobacco/chew/snuff)	No
1174	2.20.16.Q1	Since you have been using the following drugs, have you found that you need to use a lot more to get the same high?	
1185	2.20.17.Q1a	Marijuana (pot, weed, hash, THC, blunts, synthetic marijuana/K2/Spice, marijuana edibles, concentrates such as dabs or shatter)	Yes
1191	2.20.17.Q1g	Tobacco (tobacco cigarettes, electronic cigarettes, vape pens, e-hookah, hookah, cigars, and smokeless tobacco/chew/snuff)	No
1184	2.20.17.Q1	Did you ever spend a great deal of time either using, trying to obtain, or hung over from the following drugs?	
1879	2.20.18.Q1x	On the next set of screens are symptoms you endorsed as occurring at some time in the past. For each symptom, note if it was present in the past 0-3 months and also if it was present in the past 4-12 months. Rate each drug separately.	

1295	2.20.18.Q11A	Marijuana (pot, weed, hash, THC, blunts, synthetic marijuana/K2/Spice, marijuana edibles, concentrates such as dabs or shatter)	Past 0-3 months~Yes,Past 4- 12 months~Yes,
1294	2.20.18.Q11	You often thought about wanting to cut back on your use?	
1311	2.20.18.Q12G	Tobacco (tobacco cigarettes, electronic cigarettes, vape pens, e-hookah, hookah, cigars, and smokeless tobacco/chew/snuff)	Past 0-3 months~No,Past 4-12 months~Yes,
1304	2.20.18.Q12	You tried to quit but couldn't?	
1315	2.20.18.Q13A	Marijuana (pot, weed, hash, THC, blunts, synthetic marijuana/K2/Spice, marijuana edibles, concentrates such as dabs or shatter)	Past 0-3 months~No,Past 4-12 months~No,
1314	2.20.18.Q13	You had the shakes or other bad symptoms after you cut down on your use?	
1335	2.20.18.Q15A	Marijuana (pot, weed, hash, THC, blunts, synthetic marijuana/K2/Spice, marijuana edibles, concentrates such as dabs or shatter)	Past 0-3 months~Yes,Past 4- 12 months~Yes,
1334	2.20.18.Q15	You spent a great deal of time either using, trying to obtain, or hung over from using?	
1779	2.20.19.Q1A	Marijuana (pot, weed, hash, THC, blunts, synthetic marijuana/K2/Spice, marijuana edibles, concentrates such as dabs or shatter)	No
1785	2.20.19.Q1G	Tobacco (tobacco cigarettes, electronic cigarettes, vape pens, e-hookah, hookah, cigars, and smokeless	Yes

			tobacco/chew/snuff)	
	1778	2.20.19.Q1	Since you started using have you ever had a period of three months or longer without using?	
	1795	2.20.19.Q2G	Tobacco (tobacco cigarettes, electronic cigarettes, vape pens, e-hookah, hookah, cigars, and smokeless tobacco/chew/snuff)	weeks:0 / months:4 / years:0
	1788	2.20.19.Q2	Since you first started using, what is the longest period of time you have gone without using?	
Post- Traumatic Stress Disorder	502	1.21.1.Q1A	A car accident in which you or another person in the car was hurt bad enough to require medical attention	Yes
	503	1.21.1.Q1B	Significant accident or medical condition, including coronavirus, for which you needed specialized, intensive, or painful medical treatment	No
	504	1.21.1.Q1C	Witness or caught in a fire that caused significant property damage or personal injury	No
	505	1.21.1.Q1D	Witness or caught in a natural disaster that caused significant property damage or personal injury	No
	506	1.21.1.Q1E	Witness or victim of a school shooting or other act of terrorism	No
	507	1.21.1.Q1F	Witness death or mass destruction in a war zone	No
	508	1.21.1.Q1G	Witness someone shot or stabbed in the community	No
	509	1.21.1.Q1H	Shot, stabbed, or beat badly by	No

		a non-family member	
511	1.21.1.Q1J	Beaten to the point of having bruises or had a more serious injury caused by a grown-up in the home	No
514	1.21.1.Q1M	Witness the grown-ups in the home push, shove or hit one another	No
517	1.21.1.Q1P	A peer forced you to do something sexually	No
518	1.21.1.Q1Q	Learned about the life- threatening illness or sudden unexpected death of a loved one due to coronavirus, cancer, violence, or other cause	Yes
1903	1.21.1.Q1T	Was robbed and assaulted or robbed and threatened physically	No
1910	1.21.1.Q1v	Other	
501	1.21.1.Q1	Please check off the things from the list below that have happened to you in your lifetime.	
521	1.21.1.Q2A	A car accident in which you or another person in the car was hurt bad enough to require medical attention	Month:January / Year:2014 / Happened:car hit the side of our car at full speed
537	1.21.1.Q2Q	Learned about the life- threatening illness or sudden unexpected death of a loved one due to coronavirus, cancer, violence, or other cause	Month:January / Year:2020 / Happened:aunt fell and hit her head in the bathroom and died
520	1.21.1.Q2	You answered yes to the following bad events. Could you describe what happened, if	

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			you are comfortable doing so? If you are not comfortable talking about it, just enter the date and press the next button.	
	539	1.21.2.Q1	[1] In the past two weeks, how often have you tried not to think about the bad thing or things that happened?	Rarely
	540	1.21.2.Q2a	[1] Was there ever a time you often tried not to think about the bad things that happened?	No
	541	1.21.26.Q1	[1] In the past two weeks, how often have you gotten super upset when you thought about the bad thing or things that happened?	Rarely
	542	1.21.26.Q2a	[1] Was there ever a time that you often got super upset when you thought about the bad thing or things that happened?	Yes
	543	1.21.3.Q1	[1] In the past two weeks, how often did you have any nightmares?	Not at all
	544	1.21.3.Q2a	[1] Was there ever a time after the bad thing happened that you had a lot of nightmares?	No
	548	1.21.3.Q3d	[1] You said that you have had a time when you often got super upset when you thought about what happened. When did this begin?	Month:January / Year:2014
	1667	2.21.4.Q1	You mentioned that in the past you had the following bad things happen to you (i.e., a car accident in which you or another person in the car was hurt bad enough to require medical attention, an adult outside your family touched you in your privates, had you touch their privates or did other	Several days

		sexual things with you, learned about the life-threatening illness or sudden unexpected death of a loved one due to coronavirus, cancer, violence and or other cause). These next questions are about those events. In the past two weeks, how often did you find yourself thinking about the bad things that happened, even when you did not want to?	
1668	2.21.4.Q2a	[1] Was there ever a time that you thought more than you wanted to about the bad things that happened?	No
1670	2.21.5.Q1	[1] In the past two weeks, how often have you had flashbacks, pictures of the bad things that happened replaying in your head, where it felt like you were actually back in the situation?	Several days
1673	2.21.6.Q1	[1] In the past two weeks, how often have you gotten really anxious and distressed when you saw, heard, or smelled things that reminded you of the bad things that happened?	More than half the days
1676	2.21.7.Q1	[1] In the past two weeks, how often have you gotten nauseous or had your heart pound or race when you saw, heard, or smelled things that reminded you of what happened?	More than half the days
1679	2.21.8.Q1	[1] In the past two weeks, have you had trouble remembering some of the bad things that happened or details about what happened?	Several days
1680	2.21.8.Q2a	[1] Was there ever a time that you had trouble remembering some of the bad things that happened or details about what	Yes

		happened?	
1682	2.21.9.Q1	[1] In the past two weeks, have you had thoughts that you were a bad person or the world was an unsafe place?	More than half the days
1685	2.21.10.Q1	[1] In the past two weeks, how often have you thought it was your fault that the bad things happened?	Several days
1686	2.21.10.Q2a	[1] Was there ever a time you thought it was your fault that the bad things happened?	Yes
1688	2.21.11.Q1	[1] In the past two weeks, how often have you felt like you were damaged because of what happened?	More than half the days
1691	2.21.12.Q1	[1] In the past two weeks, how often have you felt negative emotions like anger, guilt, shame, or fear?	Several days
1692	2.21.12.Q2a	[1] Was there ever a time after the bad thing or things happened that you often felt negative emotions like anger, guilt, shame, or fear?	Yes
1694	2.21.14.Q1	[1] In the past two weeks, how often have you felt alone and like you couldn't trust other people?	Several days
1695	2.21.14.Q2a	[1] Was there ever a time that you often felt alone and felt like you could not trust other people?	Yes
1697	2.21.15.Q1	[1] In the past two weeks, how often have you felt like you couldn't feel positive emotions like happiness or love?	Several days
1698	2.21.15.Q2a	[1] Was there ever a time that you often felt like you couldn't feel happy emotions like love or happiness?	No

1700	2.21.16.Q1	[1] In the past two weeks, how often have you felt cranky and irritable?	Several days
1701	2.21.16.Q2a	[1] Was there ever a time after the bad things happened that you often felt cranky and irritable?	Yes
1703	2.21.17.Q1	[1] In the past two weeks, how often have you done reckless things?	Several days
1706	2.21.18.Q1	[1] In the past two weeks, how often have you found yourself on guard and on the lookout for danger?	More than half the days
1709	2.21.19.Q1	[1] In the past two weeks, how often have you jumped and felt startled when you heard a loud unexpected noise?	Several days
1712	2.21.20.Q1	[1] In the past two weeks, how often have you had trouble concentrating?	Several days
1713	2.21.20.Q2a	[1] Was there ever a time after the bad things happened that you often had trouble concentrating?	Yes
1715	2.21.21.Q1	[1] In the past two weeks, how often have you had trouble sleeping, or felt your sleep was restless?	More than half the days
1718	2.21.22.Q1	[1] In the past two weeks, how often have avoided people, places, or things that reminded you of the bad things that happened?	Rarely
1719	2.21.22.Q2a	[1] Was there ever a time that you often avoided people, places, or things that reminded you of the bad things that happened?	Yes
2002	2.21.28.Q1	[1] In the last 2 weeks how often have you felt detached	Several days

		from yourself or disconnected from your body, as if you were watching yourself in a movie?	
2003	2.21.28.Q2	[1] Was there ever a time in the past when you felt detached from yourself or disconnected from your body, as if you were watching yourself in a movie?	Yes
2004	2.21.29.Q1	[1] In the past 2 weeks how often have you felt as if things around you were unreal, like you were in a dream?	More than half the days
1722	2.21.23.Q1A	With friends	No
1723	2.21.23.Q1B	With your family	No
1724	2.21.23.Q1C	At school	Yes
1725	2.21.23.Q1D	At work	Yes
1726	2.21.23.Q1E	In after school activities	No
1727	2.21.23.Q1F	In other places or times	Yes
1721	2.21.23.Q1	[1] Have the symptoms we've just been talking about caused problems for you in any of the following areas:	
1735	2.21.24.Q1	[1] How much discomfort or distress have the symptoms we've just been talking about caused you?	6
1737	2.21.25.Q2	[1] When was the last time you had any of the symptoms we	Month:April / Year:2020

			just talked about?	
Sleep Problems	552	1.22.1.Q1	In the past two weeks, how often did you have trouble falling asleep or staying asleep when you were tired and wanted to sleep?	Several days
	554	1.22.1.Q3a	Was there ever a time, for two weeks or longer, that you had trouble falling asleep or staying asleep when you were tired and wanted to sleep?	No
Suicidality	556	1.23.1.Q1	Sometimes when kids get upset or feel numb, they may do things to hurt themselves, like scratching, cutting, or burning themselves. In the past two weeks, how often have you done any of these things or other things to try to hurt yourself?	Not at all
	557	1.23.1.Q2a	Was there ever a time in the past when you did things to hurt yourself on purpose because you were upset, like cut, scratch or burn yourself?	No
	560	1.23.2.Q1	In the past two weeks, how often have you wished you were dead or had thoughts that you would be better off dead?	Not at all
	561	1.23.2.Q2a	Was there ever a time in the past when you often wished you were dead or thought you would be better off dead?	No
	564	1.23.3.Q1	In the past two weeks, how often did you think about wanting to kill yourself?	Not at all
	565	1.23.3.Q2a	Was there ever a time when you thought about wanting to kill yourself?	No
	567	1.23.4.Q1	In the past two weeks, did you make a suicide attempt and do	No

			something to try to kill yourself?	
	569	1.23.4.Q3a	Was there ever a time when you did something to try to kill yourself and actually made a suicide attempt?	No
Homicidality	572	1.24.1.Q1	In the past two weeks, how often did you think seriously about wanting to kill someone?	Not at all
	573	1.24.1.Q2a	Was there ever a time that you thought seriously about wanting to kill someone?	No
Selective Mutism	171	1.25.1.q1	In the past two weeks, how often were you unable or unwilling to talk in school or other social situations?	More than half the days
	172	1.25.1.q2	How long have you been unable or unwilling to talk in these social situations? Please enter weeks, months, or years.	weeks:1 / months:0 / years:0
	1553	2.25.2.Q1	You mentioned earlier that there are times when you are unable or unwilling to talk in school or other social situations. Is the reason you are unable or unwilling to talk because you can't speak the language very well?	No
	1555	2.25.3.Q1A	With friends	Yes
	1556	2.25.3.Q1B	With your family	Yes
	1557	2.25.3.Q1C	At school	Yes
	1558	2.25.3.Q1D	At work	Yes
	1559	2.25.3.Q1E	In after school activities	Yes

	1560	2.25.3.Q1F	In other places or times	Yes	
	1554	2.25.3.Q1	Does being unable or unwilling to talk in these situations cause problems for you in any of the following areas: Check all that apply.		
	580	1.99.99.Q1	There are a series of more questions I will be asking you. Feel free to stand up and stretch and take a brief break before we begin. Press the next button when you are ready to start the interview again.		

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