

THE HEALTHY MINDS STUDY (HMS): QUESTIONNAIRE MODULES AND SURVEY ENDINGS



MENU OF MODULES:

	Number of Items
Standard Modules¹	
(1) Demographics	26-32
(2) Mental Health Status	28-60
(3) Mental Health Service Utilization/Help-Seeking	15-47
Elective Modules²	
(4) Substance Use	22-24
(5) Sleep (<i>half module</i>)	12-13
(6) Eating and Body Image	25-28
(7) Sexual Assault	26-44
(8) Overall Health	21-40
(9) Knowledge and Attitudes about Mental Health and Mental Health Services	25-28
(10) Upstander/Bystander Behaviors (<i>half module</i>)	8-12
(11) Campus Climate and Culture	16
(12) Competition	12
(13) Resilience and Coping	13
(14) Persistence and Retention	26-28
(15) Financial Stress	10

Notes: ¹Standard modules are fielded at all participating institutions. ²Elective modules are chosen by participating institution from the options listed above. To ensure that the overall survey (standard modules+elective modules) remains reasonable in length, participating institutions typically choose 2 elective modules (2 half modules can be combined to account for 1 module). The number of items per module is determined by 2 factors: (1) skip logic embedded within the survey (i.e., some measures are assessed only for students with certain responses to survey items), and (2) which elective modules are selected by the participating institution. In terms of the order of modules presented to students, the ‘Demographics’ module is always first, followed by the ‘Mental Health Status’ module; the order of the remaining modules varies based on which elective modules are selected.

ABOUT THIS DOCUMENT:

Contents:

This document outlines all survey items included in HMS, beginning with the standard modules ('Demographics', 'Mental Health Status', and 'Mental Health Service Utilization/Help-Seeking') and then the elective modules. The final pages of the document include the survey endings (shown to student participants upon completing the survey).

Each module is presented within a table. Above each table is the module name (in all capital letters, bolded and underlined). Directly beneath the module name is the text shown to student participants at the beginning of that module. For example, students beginning the 'Demographics' module see the following text above the first question in that module: "Basic Information: *This section will ask you to provide basic information about yourself*". Information in the column 'Section' outlines organization within the module and is not visible to students within the survey.

Color Coding:

As noted above, some items are based on embedded skip logic within the survey (i.e., some measures are assessed only for students with certain responses to survey items). For example, only students who respond "No" to the question "Are you a United States citizen (or permanent resident)?" are asked the follow-up question "What is your country of citizenship (passport country)?" This follow-up question is shown in gray, indicating that the item is based on embedded skip logic.

HMS is a web-based survey. As such, there are numerous coding and programming decisions (*the vast majority of which are rather boring so we'll spare you*). A few are important: for example, many items allow student respondents to "Select all that apply". In some cases, one of the response options is 'mutually exclusive' meaning that a student respondent who selects that response option cannot select any of the other options (e.g., the response category "None" is mutually exclusive for the item "What activities do you currently participate in at your school?"). Programming notes are included in blue within the module tables.

Finally, certain items within the standard modules include a note in red (in the 'Citation/Notes' column) indicating that the item is included only if the elective module on that topic is not selected. In other words, a small number of items about important topics are included even if the elective module on that topic is not selected. This ensures that institutions have basic information about important topics that are not selected for in-depth assessment through elective modules. For example, if an institution does not select the 'Sleep' half module, a small number of items about sleep habits are included in the 'Mental Health Status' module. If an institution does select the 'Sleep' half module, the items about sleep are not included in the 'Mental Health Status' module (because sleep habits are being assessed separately in more detail through the 'Sleep' half module).

To review:

ITEM BASED ON EMBEDDED SKIP LOGIC

LOGISTIC/PROGRAMMING NOTES

ITEM INCLUDED IF ELECTIVE MODULE ON THAT TOPIC NOT SELECTED

STANDARD MODULES:

(1) DEMOGRAPHICS

Basic Information

This section will ask you to provide basic information about yourself. Remember that your responses are confidential and you may choose to skip questions or stop responding at any point.

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
Age	How old are you? (You must be 18 years or older to complete this survey.)	1=_____ years old	
Sex/gender/sexuality	What was your sex at birth?	1=Female 2=Male 3=Intersex	Based on guidance from the Trevor Project SDS90
	What is your gender identity?	1=Male 2=Female 3=Trans male/Trans man 4=Trans female/Trans woman 5=Genderqueer/Gender non-conforming 6=Self-identify (please specify)	Based on guidance from the Trevor Project SDS88 SDS89: Self-identify gender identity (free response)
	How would you describe your sexual orientation?	1=Heterosexual 2=Lesbian 3=Gay 4=Bisexual 5=Questioning 6=Self-identify (please specify)	SDS91 SDS92: Self-identify sexual orientation (Free response)
	How would you characterize your current relationship status?	1=Single 2=In a relationship 3=Married, in a domestic partnership, or engaged 4=Divorced or separated 5=Widowed 6=Other (please specify)	
Race/ethnicity	What is your race/ethnicity? (Select all that apply)	1=African American / Black 2=American Indian or Alaskan Native 3=Asian American / Asian 4=Hispanic / Latino/a 5=Native Hawaiian or Pacific Islander 6=Middle Eastern, Arab, or Arab American 7=White 8=Self-identify (please specify)	SDS95 SDS29: Self-identify race/ethnicity (Free response)
Citizenship	Are you an international student?	1=Yes 0=No	Adapt for non-U.S. colleges and universities SDS32
	What is your country of origin?	1=Afghanistan 2=Albania 3=Angola 4=Antigua and Barbuda 5=Argentina 6=Armenia 7=Australia 8=Austria 9=Azerbaijan 10=Bahamas 11=Bahrain 12=Bangladesh 13=Barbados 14=Belarus	Instructions for this item: "(Use command or control key to select more than one country.)" Adapt for non-U.S. colleges and universities SDS31

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
		15=Belgium 16=Belize 17=Bolivia 18=Bosnia and Herzegovina 19=Brazil 20=Brunei 21=Bulgaria 22=Burma 23=Burundi 24=Cambodia 25=Cameroon 26=Canada 27=Central African Republic 28=Chile 29=China 30=Colombia 31=Congo, The Democratic Republic 32=Costa Rica 33=Cote d'Ivoire 34=Croatia 35=Cyprus 36=Czech Republic 37=Denmark 38=Dominica 39=Dominican Republic 40=Ecuador 41=Egypt 42=El Salvador 43=Estonia 44=Ethiopia 45=Finland 46=France 47=Gabon 48=Gambia 49=Gaza Strip 50=Georgia 51=Germany 52=Ghana 53=Greece 54=Guatemala 55=Guinea 56=Guyana 57=Haiti 58=Honduras 59=Hungary 60=Iceland 61=India 62=Indonesia 63=Iran 64=Iraq 65=Ireland 66=Israel 67=Italy 68=Jamaica 69=Japan 70=Jordan	

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
		71=Kazakhstan 72=Kenya 73=North Korea 74=South Korea 151=Kosovo 75=Kuwait 76=Kyrgyzstan 77=Laos 78=Latvia 79=Lebanon 80=Lithuania 81=Luxembourg 82=Macedonia 83=Madagascar 84=Malawi 85=Malaysia 86=Mali 87=Mauritania 88=Mauritius 89=Mexico 90=Moldova 91=Mongolia 92=Morocco 93=Mozambique 94=Namibia 95=Nepal 96=Netherlands 97=New Zealand 98=Nicaragua 99=Nigeria 100=Norway 101=Oman 102=Pakistan 103=Panama 104=Paraguay 105=Peru 106=Philippines 107=Poland 108=Portugal 109=Qatar 110=Romania 111=Russia 112=Saint Kitts and Nevis 113=Saint Lucia 114=Saudi Arabia 115=Senegal 116=Serbia 117=Sierra Leone 118=Singapore 119=Slovakia 120=Slovenia 121=South Africa 122=Spain 123=Sri Lanka 124=St Vincent and the Grenadines 125=Sudan	

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
		126=Swaziland 127=Sweden 128=Switzerland 129=Syria 130=Taiwan 131=Tanzania 132=Thailand 133=Trinidad and Tobago 134=Tunisia 135=Turkey 136=Turkmenistan 137=Uganda 138=Ukraine 139=United Arab Emirates 140=United Kingdom 141=Uruguay 142=Uzbekistan 143=Venezuela 144=Vietnam 145=West Bank 146=Yemen 147=Yugoslavia 148=Zambia 149=Zimbabwe 150=Other	
Socioeconomic status	How would you describe your financial situation right now?	1=Always stressful 2=Often stressful 3=Sometimes stressful 4=Rarely stressful 5=Never stressful	SDS57 Included if 'Financial Stress' module not selected
	How would you describe your financial situation while growing up?	1=Always stressful 2=Often stressful 3=Sometimes stressful 4=Rarely stressful 5=Never stressful	SDS58 Included if 'Financial Stress' module not selected
Work responsibilities	What is the average number of hours you work per week during the school year (paid employment only)?	Free Response	SDS55
	What is the highest level of education completed by your parents or stepparents? Parent 1	This parent's relationship to you: 1=Mother or stepmother 2=Father or stepfather 3=Other This parent's education: 1=8th grade or lower 2=Between 9th and 12th grade (but no high school degree) 3=High school degree 4=Some college (but no college degree) 5=Associate's degree 6=Bachelor's degree 7=Graduate degree 8=Don't know	
	What is the highest level of education completed by your parents	This parent's relationship to you:	

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
	or stepparents? Parent 2	1=Mother or stepmother 2=Father or stepfather 3=Other This parent's education: 1=8th grade or lower 2=Between 9th and 12th grade (but no high school degree) 3=High school degree 4=Some college (but no college degree) 5=Associate's degree 6=Bachelor's degree 7=Graduate degree 8=Don't know	
Religiosity	How important is religion in your life?	1=Very Important 2=Important 3=Neutral 4=Unimportant 5=Very unimportant	SDS36
	What is your religious affiliation? (Select all that apply)	1=Agnostic 2=Atheist 3=Buddhist 4=Catholic 5=Christian 6=Hindu 7=Jewish 8=Muslim 9=No preference [mutually exclusive] 10=Self-identify (please specify)	SDS97
Academic information	In what degree program are you currently enrolled? (Select all that apply)	1=Associate's 2=Bachelor's 3=Master's 4=JD 5=MD 6=PhD (or equivalent doctoral program) 7=Other (please specify) 8=Non-degree student [mutually exclusive]	SDS39
	Did you transfer from another campus/institution to this school?	1=Yes, I transferred from a community or junior college. 2=Yes, I transferred from a 4-year college or university. 3=No	SDS46
	What year are you in your current degree program?	1=1st year 2=2nd year 3=3rd year 4=4th year 5=5th year 6=6th year 7=7th+ year	Display if "Non-degree student" not selected for "In what degree program are you currently enrolled?"
	What is your enrollment status?	1=Full-time student 2=Part-time student 3=Other (please specify)	

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
	<p>What is your field of study? (Select all that apply)</p>	<p>1=Humanities (history, languages, philosophy, etc.) 2=Natural sciences or mathematics 3=Social sciences (economics, psychology, etc.) 4=Architecture or urban planning 5=Art and design 6=Business 7=[if graduate, ask→Dentistry] 8=Education 9=Engineering 10=[if graduate, ask→Law] 11=[if graduate, ask→Medicine] 12=Music, theatre, or dance 13=Nursing 14=Pharmacy 15=[if undergraduate, ask→Pre-professional (pre-business, pre-health, pre-law)] 16=Public health 17=Public policy 18=[if graduate, ask→Social work] 19=[if undergraduate, ask→Undecided] [mutually exclusive] 20=Other (please specify)</p>	
	<p>What is your current overall GPA?</p>	<p>0=A+ 1=A 2=A- 3=B+ 4=B 5=B- 6=C+ 7=C 8=C- 9=D+ or below 10=No grade or don't know</p>	<p>SDS46</p>
	<p>In the past 4 weeks, how many days have you felt that emotional or mental difficulties have hurt your academic performance?</p>	<p>1=None 2=1-2 days 3=3-5 days 4=6 or more days</p>	
	<p>How much time do you spend during a typical week attending classes/lab?</p>	<p>1=Less than 1 hour/week 2=1-2 hours/week 3=3-5 hours/week 4=6-10 hours/week 5=11-15 hours/week 6=16-20 hours/week 7=More than 20 hours/week</p>	
	<p>How much time do you spend during a typical week studying/doing homework?</p>	<p>1=Less than 1 hour/week 2=1-2 hours/week 3=3-5 hours/week 4=6-10 hours/week 5=11-15 hours/week 6=16-20 hours/week 7=More than 20 hours/week</p>	
	<p>How much do you agree with the following statement?: I am confident that I will be able to finish my degree no matter what challenges I may face.</p>	<p>1=Strongly agree 2=Agree 3=Somewhat agree</p>	<p>Included if 'Persistence and Retention' module not selected</p>

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
		4=Somewhat disagree 5=Disagree 6=Strongly disagree	
Housing	Where do you currently live?	1=On-campus housing, residence hall 2=On-campus housing, apartment 3=Fraternity or sorority house 4=On- or off-campus co-operative housing 5=Off-campus, non-university housing 6=With my parents (or relatives) 7=Other (please specify)	
Extracurricular activities	What activities do you currently participate in at your school? (Select all that apply)	1=Academic or pre-professional organization 2=Athletics (club) 3=Athletics (intercollegiate varsity) 4=Athletics (intramural) 5=Community service 6=Cultural or racial organization 7=Dance 8=Fraternity or sorority 9=Gender or sexuality organization 10=Government or politics (including student government) 11=Health and wellness organization 12=Media or publications 13=Music or drama 14=Religious organization 15=Social organization (that is not a fraternity or sorority) 16=Visual or fine arts 17=Other (please specify) 18=None [mutually exclusive]	
	What sport(s) do you participate in at your school?	1=Baseball 2=Basketball 3=Boxing 4=Cheering and/or dancing 5=Cross country 6=Cycling 7=Fencing 8=Field hockey 9=Football 10=Golf 11=Gymnastics 12=Ice hockey 13=Lacrosse 14=Rowing 15=Rugby 16=Sailing 17=Soccer 18=Softball 19=Swimming and/or diving 20=Tennis 21=Track and field 22=Volleyball 23=Water polo 24=Wrestling 25=Other	Instructions for this item: "(Use command or control key to select more than 1 sport.)" [multi-select box]

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
Military experience	Have you ever served in the United States Armed Forces, military Reserves, or National Guard?	1=No, never served in the military 2=Yes, currently in Reserve Officers' Training Corps (ROTC) 3=Yes, currently in military Reserves or National Guard 4=Yes, now on active duty 5=Yes, on active duty during the past 12 months, but not now 6=Yes, on active duty in the past, but not during the past 12 months	
Disabilities	Are you registered, with the office for disability services on this campus, as having a documented and diagnosed disability?	1=Yes 2=No	SDS60
	If you selected, "Yes" for the previous question, please indicate which category of disability you are registered for: (Select all that apply)	1=Attention deficit/hyperactivity disorders 2=Deaf or hard of hearing 3=Learning disorders 4=Mobility Impairments 5=Neurological disorders 6=Physical/health related disorders 7=Psychological disorder/condition 8=Visual impairments 9=Other (please specify)	SDS61
	Other disability:	Free Response	SDS21
	How often have you used the disability-related accommodations recommended for you?	1=Not at all 2=Occasionally 3=Frequently	

(2) MENTAL HEALTH STATUS

Mental and Emotional Health

The next set of questions will ask you about your overall well-being. Remember that your responses are confidential and you may choose to skip questions or stop responding at any point.

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
Positive mental health	I lead a purposeful and meaningful life.	1=1=Strongly disagree 2=2=Disagree 3=3=Slightly disagree 4=4=Mixed or neither agree nor disagree 5=5=Slightly agree 6=6=Agree 7=7=Strongly agree	Flourishing Scale (Diener & Biswas-Diener, 2009) Instructions for this item: "Below are 8 statements with which you may agree or disagree. Using the 1-7 scale below, indicate your agreement with each item by indicating that response for each statement."
	My social relationships are supportive and rewarding.	1=1=Strongly disagree 2=2=Disagree 3=3=Slightly disagree 4=4=Mixed or neither agree nor disagree 5=5=Slightly agree 6=6=Agree 7=7=Strongly agree	Flourishing Scale (Diener & Biswas-Diener, 2009) Instructions for this item: "Below are 8 statements with which you may agree or disagree. Using the 1-7 scale below, indicate your agreement with each item by indicating that response for each statement."
	I am engaged and interested in my daily activities.	1=1=Strongly disagree 2=2=Disagree 3=3=Slightly disagree 4=4=Mixed or neither agree nor disagree 5=5=Slightly agree 6=6=Agree 7=7=Strongly agree	Flourishing Scale (Diener & Biswas-Diener, 2009) Instructions for this item: "Below are 8 statements with which you may agree or disagree. Using the 1-7 scale below, indicate your agreement with each item by indicating that response for each statement."
	I actively contribute to the happiness and well-being of others.	1=1=Strongly disagree 2=2=Disagree 3=3=Slightly disagree 4=4=Mixed or neither agree nor disagree 5=5=Slightly agree 6=6=Agree 7=7=Strongly agree	Flourishing Scale (Diener & Biswas-Diener, 2009) Instructions for this item: "Below are 8 statements with which you may agree or disagree. Using the 1-7 scale below, indicate your agreement with each item by indicating that response for each statement."
	I am competent and capable in the activities that are important to me.	1=1=Strongly disagree 2=2=Disagree 3=3=Slightly disagree 4=4=Mixed or neither agree nor disagree 5=5=Slightly agree 6=6=Agree 7=7=Strongly agree	Flourishing Scale (Diener & Biswas-Diener, 2009) Instructions for this item: "Below are 8 statements with which you may agree or disagree. Using the 1-7 scale below, indicate your agreement with each item by indicating that response for each statement."
	I am a good person and live a good life.	1=1=Strongly disagree 2=2=Disagree 3=3=Slightly disagree 4=4=Mixed or neither agree nor disagree 5=5=Slightly agree 6=6=Agree 7=7=Strongly agree	Flourishing Scale (Diener & Biswas-Diener, 2009) Instructions for this item: "Below are 8 statements with which you may agree or disagree. Using the 1-7 scale below, indicate your agreement with each item by indicating that response for each statement."
	I am optimistic about my future.	1=1=Strongly disagree 2=2=Disagree	Flourishing Scale (Diener & Biswas-Diener, 2009)

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
		3=3=Slightly disagree 4=4=Mixed or neither agree nor disagree 5=5=Slightly agree 6=6=Agree 7=7=Strongly agree	Instructions for this item: "Below are 8 statements with which you may agree or disagree. Using the 1-7 scale below, indicate your agreement with each item by indicating that response for each statement."
	People respect me.	1=1=Strongly disagree 2=2=Disagree 3=3=Slightly disagree 4=4=Mixed or neither agree nor disagree 5=5=Slightly agree 6=6=Agree 7=7=Strongly agree	Flourishing Scale (Diener & Biswas-Diener, 2009) Instructions for this item: "Below are 8 statements with which you may agree or disagree. Using the 1-7 scale below, indicate your agreement with each item by indicating that response for each statement."
Depression	Over the last 2 weeks, how often have you been bothered by any of the following problems? Little interest or pleasure in doing things	1=Not at all 2=Several days 3=More than half the days 4=Nearly every day	Patient Health Questionnaire-9 (Kroenke et al., 2001)
	Over the last 2 weeks, how often have you been bothered by any of the following problems? Feeling down, depressed or hopeless	1=Not at all 2=Several days 3=More than half the days 4=Nearly every day	Patient Health Questionnaire-9 (Kroenke et al., 2001)
	Over the last 2 weeks, how often have you been bothered by any of the following problems? Trouble falling or staying asleep, or sleeping too much	1=Not at all 2=Several days 3=More than half the days 4=Nearly every day	Patient Health Questionnaire-9 (Kroenke et al., 2001)
	Over the last 2 weeks, how often have you been bothered by any of the following problems? Feeling tired or having little energy	1=Not at all 2=Several days 3=More than half the days 4=Nearly every day	Patient Health Questionnaire-9 (Kroenke et al., 2001)
	Over the last 2 weeks, how often have you been bothered by any of the following problems? Poor appetite or overeating	1=Not at all 2=Several days 3=More than half the days 4=Nearly every day	Patient Health Questionnaire-9 (Kroenke et al., 2001)
	Over the last 2 weeks, how often have you been bothered by any of the following problems? Feeling bad about yourself—or that you are a failure or have let yourself or your family down	1=Not at all 2=Several days 3=More than half the days 4=Nearly every day	Patient Health Questionnaire-9 (Kroenke et al., 2001)
	Over the last 2 weeks, how often have you been bothered by any of the following problems? Trouble concentrating on things, such as reading the newspaper or watching television	1=Not at all 2=Several days 3=More than half the days 4=Nearly every day	Patient Health Questionnaire-9 (Kroenke et al., 2001)
	Over the last 2 weeks, how often have you been bothered by any of the following problems? Moving or speaking so slowly that other people could have noticed; or the opposite—being so fidgety or restless that you have been moving around a lot more than usual	1=Not at all 2=Several days 3=More than half the days 4=Nearly every day	Patient Health Questionnaire-9 (Kroenke et al., 2001)
	Over the last 2 weeks, how often have you been bothered by any of the following problems? Thoughts that you would be better off dead or of hurting yourself in some way	1=Not at all 2=Several days 3=More than half the days 4=Nearly every day	Patient Health Questionnaire-9 (Kroenke et al., 2001)
	How difficult have these problems (noted above) made it for you to do your work, take care of things at home, or get along with other people?	1=Not difficult at all 2=Somewhat difficult 3=Very difficult 4=Extremely difficult	Adapted from Patient Health Questionnaire-9 (Kroenke et al., 2001)

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
	During that period, how often were you bothered by these problems? Little interest or pleasure in doing things	1=Not at all 2=Several days 3=More than half the days 4=Nearly every day	Adapted from Patient Health Questionnaire-2 Instructions for this item: "Think about the 2-week period in the past year when you experienced the 2 problems below the most frequently."
	During that period, how often were you bothered by these problems? Feeling down, depressed or hopeless	1=Not at all 2=Several days 3=More than half the days 4=Nearly every day	Adapted from Patient Health Questionnaire-2 Instructions for this item: "Think about the 2-week period in the past year when you experienced the 2 problems below the most frequently."
Anxiety	Over the last 2 weeks, how often have you been bothered by the following problems? Feeling nervous, anxious or on edge	1=Not at all 2=Several days 3=Over half the days 4=Nearly every day	GAD-7 (Spitzer et al., 2006)
	Over the last 2 weeks, how often have you been bothered by the following problems? Not being able to stop or control worrying	1=Not at all 2=Several days 3=Over half the days 4=Nearly every day	GAD-7 (Spitzer et al., 2006)
	Over the last 2 weeks, how often have you been bothered by the following problems? Worrying too much about different things	1=Not at all 2=Several days 3=Over half the days 4=Nearly every day	GAD-7 (Spitzer et al., 2006)
	Over the last 2 weeks, how often have you been bothered by the following problems? Trouble relaxing	1=Not at all 2=Several days 3=Over half the days 4=Nearly every day	GAD-7 (Spitzer et al., 2006)
	Over the last 2 weeks, how often have you been bothered by the following problems? Being so restless that it's hard to sit still	1=Not at all 2=Several days 3=Over half the days 4=Nearly every day	GAD-7 (Spitzer et al., 2006)
	Over the last 2 weeks, how often have you been bothered by the following problems? Becoming easily annoyed or irritable	1=Not at all 2=Several days 3=Over half the days 4=Nearly every day	GAD-7 (Spitzer et al., 2006)
	Over the last 2 weeks, how often have you been bothered by the following problems? Feeling afraid as if something awful might happen	1=Not at all 2=Several days 3=Over half the days 4=Nearly every day	GAD-7 (Spitzer et al., 2006)
	How difficult have these problems (noted above) made it for you to do your work, take care of things at home, or get along with other people?	1=Not difficult at all 2=Somewhat difficult 3=Very difficult 4=Extremely difficult	
Eating and body image	Do you need to be very thin in order to feel good about yourself?	1=Yes 0=No	Included if 'Eating and Body Image' module not selected
	I think I am...	1=Very underweight 2=Somewhat underweight 3=Normal weight 4=Somewhat overweight 5=Very overweight	Included if 'Eating and Body Image' module not selected
	What is your current height? (If you don't know, please provide your best guess.)	1= _____ feet [force numeric, <7] 2= _____ inches [force numeric, <11]	Included if 'Eating and Body Image' module not selected
	What is your current weight? (If you don't know, please provide your best guess.)	1= _____ pounds [force numeric]	Included if 'Eating and Body Image' module not selected
	Do you ever make yourself sick because you feel uncomfortably full?	1=Yes 0=No	Included if 'Eating and Body Image' module not selected

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
			SCOFF questionnaire (Morgan, Reid, & Lacey, 1999) Instructions for this item: "Please answer the following questions as honestly as possible."
	Do you worry that you have lost control over how much you eat?	1=Yes 0=No	Included if 'Eating and Body Image' module not selected SCOFF questionnaire (Morgan, Reid, & Lacey, 1999) Instructions for this item: "Please answer the following questions as honestly as possible."
	Have you recently lost more than 15 pounds in a 3-month period?	1=Yes 0=No	Included if 'Eating and Body Image' module not selected SCOFF questionnaire (Morgan, Reid, & Lacey, 1999) Instructions for this item: "Please answer the following questions as honestly as possible."
	Do you believe yourself to be fat when others say you are too thin?	1=Yes 0=No	Included if 'Eating and Body Image' module not selected SCOFF questionnaire (Morgan, Reid, & Lacey, 1999) Instructions for this item: "Please answer the following questions as honestly as possible."
	Would you say that food dominates your life?	1=Yes 0=No	Included if 'Eating and Body Image' module not selected SCOFF questionnaire (Morgan, Reid, & Lacey, 1999) Instructions for this item: "Please answer the following questions as honestly as possible."
Non-suicidal self-injury	In the past year, have you ever done any of the following intentionally? (Select all that apply)	1=Cut myself 2=Burned myself 3=Punched or banged myself 4=Scratched myself 5=Pulled my hair 6=Bit myself 7=Interfered with wound healing 8=Carved words or symbols into skin 9=Rubbed sharp objects into skin 10=Punched or banged an object to hurt myself 11=Other (please specify) 12=No, none of these [mutually exclusive]	Instructions for this item: "This question asks about ways you may have hurt yourself on purpose, without intending to kill yourself."
	On average, how often in the past year did you hurt yourself on purpose, without intending to kill yourself?	1=Once or twice 2=Once a month or less 3=2 or 3 times a month 4=Once or twice a week 5=3 to 5 days a week 6=Nearly everyday, or everyday	
Suicidality	In the past year, did you ever seriously think about attempting	1=Yes	

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
	suicide?	0=No	
	In the past year, did you make a plan for attempting suicide?	1=Yes 0=No	
	In the past year, did you attempt suicide?	1=Yes 0=No	
Violence	In your lifetime, how many times has anyone struck or physically injured you?	1=Never 2=1 time 3=2-3 times 4=4-5 times 5=More than 5 times	Included if 'Overall Health' module not selected
	When was the last time anyone has struck or physically injured you?	1=Within the last 2 weeks 2=Within the last month 3=Within the last year 4=Within the last 1-5 years 5=More than 5 years ago	Included if 'Overall Health' module not selected
	Over the past 12 months, did you strike or physically injure anyone?	1=Yes 0=No	Included if 'Overall Health' module not selected
Sexual assault	Over the past 12 months, have you experienced emotional, physical, or sexual abuse (either from someone you know or don't know)?	1=Yes 0=No	Included if 'Sexual Assault' and 'Overall Health' modules both not selected
	Over the past 12 months, were you emotionally abused? (Examples include being called names, being yelled at, humiliated, judged, threatened, coerced, or controlled.)	1=Yes 0=No	Included if 'Sexual Assault' and 'Overall Health' modules both not selected
	Over the past 12 months, were you physically abused? (Examples include being kicked, slapped, punched or otherwise physically mistreated.)	1=Yes 0=No	Included if 'Sexual Assault' and 'Overall Health' modules both not selected
	Over the past 12 months, were you in a sexually abusive relationship? (By 'sexually abusive relationship', we mean one in which an intimate partner forced or coerced you to perform or receive sexual acts, or forced you to have intercourse when you didn't want to.)	1=Yes 0=No	Included if 'Sexual Assault' and 'Overall Health' modules both not selected
	Over the past 12 months, were you ever forced to have unwanted sexual intercourse through the use of physical force or threat by someone who was not an intimate partner? (By 'sexual intercourse', we mean completed or attempted penetration.)	1=Yes 0=No	Included if 'Sexual Assault' and 'Overall Health' modules both not selected Definition from CDC NISVS 2010
Substance use	Over the past 2 weeks, did you drink any alcohol?	1=Yes 0=No	Included if 'Substance Use' and 'Overall Health' modules both not selected
	Over the past 2 weeks, about how many times did you have 4 [female]/5 [male]/4 or 5 [not female or male] or more alcoholic drinks in a row? (1 drink is a can of beer, a glass of wine, a wine cooler, a shot of liquor, or a mixed drink.)	1=0 times 2=1 time 3=2 times 4=3 to 5 times 5=6 to 9 times 6=10 or more times 7=Don't know	Included if 'Substance Use' and 'Overall Health' modules both not selected Definition adapted from National Institute on Alcohol Abuse and Alcoholism
	Over the past 30 days, about how many cigarettes did you smoke per day?	1=0 cigarettes 2=Less than 1 cigarette 3=1 to 5 cigarettes 4=About one-half pack 5=1 or more packs	Included if 'Substance Use' and 'Overall Health' modules both not selected
	Over the past 30 days, have you used any of the following drugs? (Select all that apply)	1=Marijuana 2=Cocaine (any form, including crack, powder, or freebase) 3=Heroin 4=Methamphetamines (also known	Included if 'Substance Use' and 'Overall Health' modules both not selected

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
		as speed, crystal meth, or ice) 5=Other stimulants (such as Ritalin, Adderall) without a prescription 6=Ecstasy 7=Other drugs without a prescription (please specify) 8=No, none of these [mutually exclusive]	
Sleep	During this school year, at approximately what time have you typically gone to sleep on: Weeknights?	1=12:00pm 2=1:00pm 3=2:00pm 4=3:00pm 5=4:00pm 6=5:00pm 7=6:00pm 8=7:00pm 9=8:00pm 10=9:00pm 11=10:00pm 12=11:00pm 13=12:00am 14=1:00am 15=2:00am 16=3:00am 17=4:00am 18=5:00am 19=6:00am 20=7:00am 21=8:00am 22=9:00am 23=10:00am 24=11:00am	Included if 'Sleep' and 'Overall Health' modules both not selected
	During this school year, at approximately what time have you typically gone to sleep on: Weekend nights?	1=12:00pm 2=1:00pm 3=2:00pm 4=3:00pm 5=4:00pm 6=5:00pm 7=6:00pm 8=7:00pm 9=8:00pm 10=9:00pm 11=10:00pm 12=11:00pm 13=12:00am 14=1:00am 15=2:00am 16=3:00am 17=4:00am 18=5:00am 19=6:00am 20=7:00am 21=8:00am 22=9:00am 23=10:00am 24=11:00am	Included if 'Sleep' and 'Overall Health' modules both not selected

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
	<p>During this school year, at approximately what time have you typically woken up on: Weekdays?</p>	<p>1=12:00pm 2=1:00pm 3=2:00pm 4=3:00pm 5=4:00pm 6=5:00pm 7=6:00pm 8=7:00pm 9=8:00pm 10=9:00pm 11=10:00pm 12=11:00pm 13=12:00am 14=1:00am 15=2:00am 16=3:00am 17=4:00am 18=5:00am 19=6:00am 20=7:00am 21=8:00am 22=9:00am 23=10:00am 24=11:00am</p>	<p>Included if 'Sleep' and 'Overall Health' modules both not selected</p>
	<p>During this school year, at approximately what time have you typically woken up on: Weekend days?</p>	<p>1=12:00pm 2=1:00pm 3=2:00pm 4=3:00pm 5=4:00pm 6=5:00pm 7=6:00pm 8=7:00pm 9=8:00pm 10=9:00pm 11=10:00pm 12=11:00pm 13=12:00am 14=1:00am 15=2:00am 16=3:00am 17=4:00am 18=5:00am 19=6:00am 20=7:00am 21=8:00am 22=9:00am 23=10:00am 24=11:00am</p>	<p>Included if 'Sleep' and 'Overall Health' modules both not selected</p>
	<p>During this school year, on how many days have you taken naps during a typical week?</p>	<p>1=I don't take naps. 2=1 3=2 4=3 5=4 6=5 7=6 8=7</p>	<p>Included if 'Sleep' and 'Overall Health' modules both not selected</p>

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
	How long is your typical nap?	1=Less than 1 hour 2=Between 1 and 2 hours 3=Between 2 and 3 hours 4=More than 3 hours	Included if 'Sleep' and 'Overall Health' modules both not selected

(3) MENTAL HEALTH SERVICE UTILIZATION/HELP-SEEKING

Experiences with Services and Support

The next questions will ask you about your experiences using mental health services. Remember that your responses are confidential and you may choose to skip questions or stop responding at any point.

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
Diagnosed mental illnesses	Have you ever been diagnosed with any of the following conditions by a health professional (e.g., primary care doctor, psychiatrist, psychologist, etc.)? (Select all that apply)	1=Depression (e.g., major depressive disorder, bipolar/manic depression, dysthymia, persistent depressive disorder) 2=Anxiety (e.g., generalized anxiety disorder, phobias, obsessive-compulsive disorder, post-traumatic stress disorder) 3=Attention disorder or learning disability (e.g., attention deficit disorder, attention deficit hyperactivity disorder, learning disability) 4=Eating disorder (e.g., anorexia nervosa, bulimia nervosa) 5=Psychosis (e.g., schizophrenia, schizo-affective disorder) 6=Personality disorder (e.g., antisocial personality disorder, paranoid personality disorder, schizoid personality disorder) 7=Substance abuse disorder (e.g., alcohol abuse, abuse of other drugs) 8=No, none of these [mutually exclusive] 9=Don't know	
	Specifically, which of the following depression disorders were you diagnosed with by a professional? (Select all that apply)	1=Major depressive disorder 2=Dysthymia or persistent depressive disorder 3=Bipolar/manic depression 4=Cyclothymia (can be thought of as low-level bipolar disorder) 5=Other (please specify) 6=Don't know	
	Specifically, which of the following anxiety disorders were you diagnosed with by a professional? (Select all that apply)	1 =Generalized anxiety disorder 2=Panic disorder 3=Agoraphobia 4=Specific phobia (e.g., claustrophobia, arachnophobia, etc.) 5=Social phobia 6=Obsessive-compulsive disorder 7=Acute stress disorder 8=Post traumatic stress disorder (PTSD) 9=Other (please specify) 10=Don't know	
	Specifically which of the following attention or learning disability disorders were you diagnosed with by a professional? (Select all that apply)	1=Attention deficit hyperactivity disorder (ADHD or ADD) 2=Other learning disability 3=Other (please specify) 4=Don't know	
	Specifically, which of the following eating disorders were you diagnosed with by a professional? (Select all that apply)	1=Anorexia nervosa 2=Bulimia nervosa 3=Binge-eating Disorder 4=Other (please specify) 5=Don't know	

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
	Specifically, which of the following psychotic disorders were you diagnosed with by a professional? (Select all that apply)	1=Schizophrenia 2=Schizo-affective disorder 3=Brief psychotic disorder 4=Delusional disorder 5=Schizophreniform disorder 6=Shared psychotic disorder 7=Other (please specify) 8=Don't know	
	Specifically, which of the following personality disorders were you diagnosed with by a professional? (Select all that apply)	1=Antisocial personality disorder 2=Avoidant personality disorder 3=Borderline personality disorder 4=Dependent personality disorder 5=Histrionic personality disorder 6=Narcissistic personality disorder 7=Obsessive-Compulsive personality disorder 8=Paranoid personality disorder 9=Schizoid personality disorder 10=Schizotypal personality disorder 11=Other (please specify) 12=Don't know	
	Specifically, which of the following substance disorders were you diagnosed with by a professional? (Select all that apply)	1=Alcohol abuse or other alcohol-related disorders 2=Other (please specify) 3=Don't know	
Knowledge of campus services	How much do you agree with the following statement?: If I needed to seek professional help for my mental or emotional health, I would know where to go on my campus.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	Included if 'Knowledge and Attitudes about Mental Health and Mental Health Services' module not selected
Beliefs about treatment efficacy	How helpful on average do you think medication is, when provided competently, for people your age who are clinically depressed?	1=Very helpful 2=Helpful 3=Somewhat helpful 4=Not helpful	Included if 'Knowledge and Attitudes about Mental Health and Mental Health Services' module not selected
	How helpful on average do you think therapy or counseling is, when provided competently, for people your age who are clinically depressed?	1=Very helpful 2=Helpful 3=Somewhat helpful 4=Not helpful	Included if 'Knowledge and Attitudes about Mental Health and Mental Health Services' module not selected
Stigma	How much do you agree with the following statement?: Most people think less of a person who has received mental health treatment.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	Included if 'Knowledge and Attitudes about Mental Health and Mental Health Services' module not selected
	How much do you agree with the following statement?: I would think less of a person who has received mental health treatment.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	Included if 'Knowledge and Attitudes about Mental Health and Mental Health Services' module not selected
Perceived need	How much do you agree with the following statement?: In the past 12 months, I needed help for emotional or mental health problems such as feeling sad, blue, anxious or nervous.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree	

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
		6=Strongly disagree	
	How much do you agree with the following statement?: I currently need help for emotional or mental health problems such as feeling sad, blue, anxious or nervous.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	Display only if previous item answered with at least "somewhat agree"
Help-seeking intentions	If you were experiencing serious emotional distress, whom would you talk to about this? (Select all that apply)	1=Professional clinician (e.g., psychologist, counselor, or psychiatrist) 2=Roommate 3=Friend (who is not a roommate) 4=Significant other 5=Family member 6=Religious counselor or other religious contact 7=Support group 8=Other non-clinical source (please specify) 9=No one [mutually exclusive]	
Use of counseling/therapy	Have you ever received counseling or therapy for mental health concerns?	1=No, never 2=Yes, prior to starting college 3=Yes, since starting college 4=Yes, both of the above (prior to college and since starting college)	SDS01
	How many total visits or sessions for counseling or therapy have you had in the past 12 months?	0=0 1=1-3 2=4-6 3=7-9 4=10 or more	Display only if selected 2, 3 or 4 previously
	Are you currently receiving counseling or therapy?	1=Yes 0=No	Display only if selected 1-4 for previous question
	From which of the following places did you receive counseling or therapy? (Select all that apply)	1=[Insert name of institution's student counseling services] 2=[Insert name of institution's campus health services] 3=[Insert other campus counseling or health service] 4=Psychiatric Emergency Services/Psych Emergency Room (ER) 5=Inpatient psychiatric hospital 6=Partial hospitalization program 7=Provider in the local community (not on campus) 8=Provider in another location (such as your hometown) 9=Other (please specify) 10=Don't know	Display only if selected 1-4 for question before last
Satisfaction with counseling/therapy	How satisfied/dissatisfied are you with the following aspects of your therapy or counseling that you received in the past 12 months at [pipe in selected options from: "From which of the following places did you receive counseling or therapy?"] ?: Convenient hours	1=Very dissatisfied 2=Dissatisfied 3=Somewhat dissatisfied 4=Somewhat satisfied 5=Satisfied 6=Very satisfied	
	How satisfied/dissatisfied are you with the following aspects of your therapy or counseling that you received in the past 12 months at [pipe in selected options from: "From which of the following	1=Very dissatisfied 2=Dissatisfied 3=Somewhat dissatisfied	

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
	places did you receive counseling or therapy?"]?: Location	4=Somewhat satisfied 5=Satisfied 6=Very satisfied	
	How satisfied/dissatisfied are you with the following aspects of your therapy or counseling that you received in the past 12 months at [pipe in selected options from: "From which of the following places did you receive counseling or therapy?"]?: Quality of therapists/counselors	1=Very dissatisfied 2=Dissatisfied 3=Somewhat dissatisfied 4=Somewhat satisfied 5=Satisfied 6=Very satisfied	
	How satisfied/dissatisfied are you with the following aspects of your therapy or counseling that you received in the past 12 months at [pipe in selected options from: "From which of the following places did you receive counseling or therapy?"]?: Respect for your privacy concerns	1=Very dissatisfied 2=Dissatisfied 3=Somewhat dissatisfied 4=Somewhat satisfied 5=Satisfied 6=Very satisfied	
	How satisfied/dissatisfied are you with the following aspects of your therapy or counseling that you received in the past 12 months at [pipe in selected options from: "From which of the following places did you receive counseling or therapy?"]?: Ability to schedule appointments without long delays	1=Very dissatisfied 2=Dissatisfied 3=Somewhat dissatisfied 4=Somewhat satisfied 5=Satisfied 6=Very satisfied	
	How helpful, overall, do you think therapy or counseling was or has been for your mental or emotional health?	1=Very helpful 2=Helpful 3=Somewhat helpful 4=Not helpful	
Use of medication	In the past 12 months have you taken any of the following types of prescription medications? (Please count only those you took, or are taking, several times per week.) (Select all that apply)	1=Psychostimulants (methylphenidate (Ritalin or Concerta), amphetamine salts (Adderall), dextroamphetamine (Dexerdine), etc.) 2=Antidepressants (e.g., fluoxetine (Prozac), sertraline (Zoloft), paroxetine (Paxil), escitalopram (Lexapro), venlafaxine (Effexor), bupropion (Wellbutrin), etc.) 3=Anti-psychotics (e.g., haloperidol (Haldol), clozapine (Clozaril), risperidone (Risperdal), olanzapine (Zyprexa), etc.) 4=Anti-anxiety medications (e.g., lorazepam (Ativan), clonazepam (Klonopin), alprazolam (Xanax), buspirone (BuSpar), etc.) 5=Mood stabilizers (e.g., lithium, valproate (Depakote), lamotrigine (Lamictal), carbamazepine (Tegretol), etc.) 6=Sleep medications (e.g., zolpidem (Ambien), zaleplon (Sonata), etc.) 7=Other medication for mental or emotional health (please specify) 8=No, none of these [mutually exclusive] 9=Don't know	
	For what purpose(s) have you taken the medication(s) you just indicated? (Select all that apply)	1=Mental or emotional health 2=Other health reasons 3=Academic performance 4=Recreation/fun 5=Other (please specify)	
	In the past 12 months how many times have you discussed with a doctor or other health professional your use of the medication(s)	1=Not at all 2=1-2 times	

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
	you just noted?	3=3-5 times 4=More than 5 times 5=Don't know	
	Who wrote your most recent prescription for the medication(s) you noted in the last question? (Select all that apply)	1=A general practitioner, nurse practitioner, or primary care physician 2=A psychiatrist 3=Other type of doctor (please specify) 4=Took the medication(s) without a prescription 5=Don't know	
	Of the medication(s) you just noted, which are you currently taking? (Select all that apply)	1=Psychostimulants (methylphenidate (Ritalin, or Concerta), amphetamine salts (Adderall), dextroamphetamine (Dexerline), etc.) 2=Antidepressants (e.g., fluoxetine (Prozac), sertraline (Zoloft), paroxetine (Paxil), escitalopram (Lexapro), venlafaxine (Effexor), bupropion (Wellbutrin), etc.) 3=Anti-psychotics (e.g., haloperidol (Haldol), clozapine (Clozaril), risperidone (Risperdal), olanzapine (Zyprexa), etc.) 4=Anti-anxiety medications (e.g., lorazepam (Ativan), clonazepam (Klonopin), alprazolam (Xanax), buspirone (BuSpar), etc.) 5=Mood stabilizers (e.g., lithium, valproate (Depakote), lamotrigine (Lamictal), carbamazepine (Tegretol), etc.) 6=Sleep medications (e.g., zolpidem (Ambien), zaleplon (Sonata), etc.) 7=Other medication for mental or emotional health (please specify) 8=None of the above [mutually exclusive]	
	During the past year, for how long, in total, have you taken the following medication(s)?	1=Less than 1 month 2=Between 1 and 2 months 3=2 months or more 4=Did not take	Pipe in selected options from: "In the past 12 months have you taken any of the following types of prescription medications? (Please count only those you took, or are taking, several times per week.)"
	How helpful, overall, do you think the medication(s) was or has been for your mental or emotional health?	1=Very helpful 2=Helpful 3=Somewhat helpful 4=Not helpful	
	Which of the following are important reasons why you received those services? (Select all that apply)	1=I decided on my own to seek help. 2=A friend encouraged me to seek help. 3=A friend pressured me to seek help. 4=A family member encouraged me to seek help. 5=A family member pressured me to seek help. 6=Someone other than a friend or family member encouraged me to seek help (please specify person's relationship to you). 7=I was mandated to seek help by campus staff. 8=I acquired more information about my options from (please specify where). 9=Other (please specify)	Instructions for this item: "Earlier in this survey you reported that you have taken medication and/or received counseling/therapy in the past 12 months for your mental or emotional health."
Barriers to help-seeking	In the past 12 months, which of the following factors have caused you to receive fewer services (counseling, therapy, or medications) for your mental or emotional health than you would have	1=No need for services 2=Financial reasons (too expensive, not covered by insurance)	

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
	otherwise received? (Select all that apply)	3=Not enough time 4=Not sure where to go 5=Difficulty finding an available appointment 6=Prefer to deal with issues on my own or with support from family/friends 7=Other (please specify) 8=No barriers [mutually exclusive]	
	In the past 12 months which of the following explain why you have not received medication or therapy for your mental or emotional health? (Select all that apply)	1=I haven't had the chance to go but I plan to. 2=No need for services 3=Financial reasons (too expensive, not covered by insurance) 4=Not enough time 5=Not sure where to go 6=Difficulty finding an available appointment 7=Prefer to deal with issues on my own or with support from family/friends 8=Other (please specify) 9=No barriers [mutually exclusive]	
Visit to medical providers	In the past 12 months, have you visited any medical provider, such as a primary care doctor or other type of doctor, for a check-up or any other medical reasons?	1=Yes 0=No	
Informal help-seeking	In the past 12 months have you received counseling or support for your mental or emotional health from any of the following sources? (Select all that apply)	1=Roommate 2=Friend (who is not a roommate) 3=Significant other 4=Family member 5=Religious counselor or other religious contact 6=Support group 7=Other non-clinical source (please specify) 8=No, none of these [mutually exclusive]	
	How helpful was it to discuss these concerns?	1=Very helpful 2=Helpful 3=Somewhat helpful 4=Not helpful	
	If you had a mental health problem that you believed was affecting your academic performance, which people at school would you talk to? (Select all that apply)	1=Professor from one of my classes 2=Academic advisor 3=Another faculty member 4=Teaching assistant 5=Student services staff 6=Dean of Students or class dean 7=Other (please specify) 8=No one [mutually exclusive]	
	During this school year have you talked with any academic personnel (such as instructors, advisors, or other academic staff) about any mental health problems that were affecting your academic performance?	1=Yes 0=No	
	Overall, how supportive was the response of the academic personnel with whom you talked?	1=Very supportive 2=Supportive 3=Not supportive 4=Very unsupportive	
Insurance	What is the source of your current health insurance coverage? (Select all that apply)	1=I do not have any health insurance coverage (uncovered).	

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
		<p>[mutually exclusive] 2=I have health insurance through my parent(s) or their employer. 3=I have health insurance through my employer. 4=I have health insurance through my spouse's employer. 5=I have a student health insurance plan. 6=I have health insurance through an embassy or sponsoring agency for international students. 7=I have individual health insurance purchased directly from an insurance carrier. 8=I have Medicaid or other governmental insurance. 9=I am uncertain about whether I have health insurance. 10=I have health insurance but am uncertain about where it is from.</p>	
	<p>Do you know if your health insurance plan would provide any coverage for a visit to a mental health professional (psychiatrist, psychologist, clinical social worker, etc.)?</p>	<p>1=Yes, it definitely would. 2=I think it would but am not sure. 3=I have no idea. 4=I think it would not but am not sure. 5=No, it definitely would not.</p>	
	<p>Does your current health insurance plan meet your needs for mental health services?</p>	<p>1=I have not needed to use my current insurance plan to cover mental health services. 2=Yes, everything I have needed is covered. 3=No, the coverage is inadequate to meet my needs.</p>	
	<p>I feel that coverage is inadequate because my plan... (Select all that apply)</p>	<p>1=...doesn't cover any mental health services. 2=...doesn't cover preexisting conditions. 3=...doesn't cover certain conditions. 4=...has a co-pay that is too expensive. 5=...has a deductible that is too expensive. 6=...doesn't cover certain types of services or providers. 7=...has a limit on the number of services that are covered. 8=Other (please specify)</p>	
	<p>This semester, how easy or difficult has it been paying for mental health care?</p>	<p>1=Very easy 2=Easy 3=Somewhat easy 4=Somewhat difficult 5=Difficult 6=Very difficult 7=Not applicable</p>	<p>Additional insurance-related question from CCMH</p>

ELECTIVE MODULES:**(4) SUBSTANCE USE**

Substance Use

The next questions will ask you about your experiences with and opinions about alcohol and other drugs. Remember that your responses are confidential and you may choose to skip questions or stop responding at any point.

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
Personal alcohol use	How often do you have a drink containing alcohol?	1=Never 2=Monthly or less 3=2-4 times a month 4=2-3 times a week 5=4 or more times a week	AUDIT (Saunders et al., 1993)
	How many drinks containing alcohol do you have on a typical day when you are drinking? (1 drink is a can of beer, a glass of wine, a wine cooler, a shot of liquor, or a mixed drink.)	1=1 or 2 2=3 or 4 3=5 or 6 4=7 to 9 5=10 or more	AUDIT (Saunders et al., 1993) Definition adapted from National Institute on Alcohol Abuse and Alcoholism
	How often do you have 4 [female]/5 [male]/4 or 5 [not female or male] or more drinks on 1 occasion? (1 drink is a can of beer, a glass of wine, a wine cooler, a shot of liquor, or a mixed drink.)	1=Never 2=Less than monthly 3=Monthly 4=Weekly 5=Daily or almost daily	AUDIT (Saunders et al., 1993) Definition adapted from National Institute on Alcohol Abuse and Alcoholism
	How often during the last year have you found that you were not able to stop drinking once you had started?	1=Never 2=Less than monthly 3=Monthly 4=Weekly 5=Daily or almost daily	AUDIT (Saunders et al., 1993)
	How often during the last year have you failed to do what was normally expected of you because of drinking?	1=Never 2=Less than monthly 3=Monthly 4=Weekly 5=Daily or almost daily	AUDIT (Saunders et al., 1993)
	How often during the last year have you needed a drink in the morning to get yourself going after a heavy drinking session?	1=Never 2=Less than monthly 3=Monthly 4=Weekly 5=Daily or almost daily	AUDIT (Saunders et al., 1993)
	How often during the last year have you had a feeling of guilt or remorse after drinking?	1=Never 2=Less than monthly 3=Monthly 4=Weekly 5=Daily or almost daily	AUDIT (Saunders et al., 1993)
	How often during the last year have you been unable to remember what happened the night before of your drinking?	1=Never 2=Less than monthly 3=Monthly 4=Weekly 5=Daily or almost daily	AUDIT (Saunders et al., 1993)
	Have you or someone else been injured because you had been drinking?	0=No 1=Yes, but not in the last year 2=Yes, during the last year	AUDIT (Saunders et al., 1993)
	Has a relative, friend, doctor, or other health care worker been concerned about your drinking or suggested you cut down?	1=No 2=Yes, but not in the last year 3=Yes, during the last year	AUDIT (Saunders et al., 1993)
	Have you ever received counseling or treatment for an alcohol-	1=Yes	

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
	related problem from a health professional (such as psychiatrist, psychologist, social worker, or primary care doctor)?	0=No	
Personal substance use	Over the past 30 days, have you used any of the following drugs? (Select all that apply)	1=Marijuana 2=Cocaine (any form, including crack, powder, or freebase) 3=Heroin 4=Methamphetamines (also known as speed, crystal meth, or ice) 5=Other stimulants (such as Ritalin, Adderall) without a prescription 6=Ecstasy 7=Other drugs without a prescription (please specify) 8=No, none of these [mutually exclusive]	
	Over the past 30 days, about how many cigarettes did you smoke per day?	1=0 cigarettes 2=Less than 1 cigarette 3=1 to 5 cigarettes 4=About one-half pack 5=1 or more packs	
Perception of risk regarding substance use	How much do you think people risk harming themselves physically or in other ways when they have 5 or more drinks containing alcohol once or twice a week? (1 drink is a can of beer, a glass of wine, a wine cooler, a shot of liquor, or a mixed drink.)	1=No risk 2=Slight risk 3=Moderate risk 4=Great risk	Adapted from Drug Free Communities Support Program Evaluation of Core Measures Survey (2012) Definition adapted from National Institute on Alcohol Abuse and Alcoholism
	How much do you think people risk harming themselves physically or in other ways if they smoke 1 or more packs of cigarettes per day?	1=No risk 2=Slight risk 3=Moderate risk 4=Great risk	Adapted from Drug Free Communities Support Program Evaluation of Core Measures Survey (2012)
	How much do you think people risk harming themselves physically or in other ways if they smoke marijuana once or twice a week?	1=No risk 2=Slight risk 3=Moderate risk 4=Great risk	Adapted from Drug Free Communities Support Program Evaluation of Core Measures Survey (2012)
	How much do you think people risk harming themselves physically or in other ways if they use prescription drugs that are not prescribed to them?	1=No risk 2=Slight risk 3=Moderate risk 4=Great risk	Adapted from Drug Free Communities Support Program Evaluation of Core Measures Survey (2012)
Other students alcohol use	In the past 30 days, how often have you had to "baby-sit" or take care of another student who drank too much?	1=0 times 2=1 times 3=2 times 4=3 times 5=4 or more times	
	In the past 30 days, how often have you experienced an unwanted sexual advance because of other students' drinking?	1=0 times 2=1 times 3=2 times 4=3 times 5=4 or more times	
	In the past 30 days, how often have you been a victim of sexual assault or "date rape" because of other students' drinking?	1=0 times 2=1 times 3=2 times 4=3 times 5=4 or more times	
Perceptions of peer substance use	In the past 30 days, about what percent of students at your school drank alcohol?	1= _____ % [force numeric, 0-100]	Instructions for this item: "The next few items ask for your perceptions of other students' behaviors regarding alcohol and substance use. Please provide your best guess."

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
	In the past 30 days, about what percent of students at your school smoked cigarettes?	1= _____ % [force numeric, 0-100]	Instructions for this item: "The next few items ask for your perceptions of other students' behaviors regarding alcohol and substance use. Please provide your best guess."
	In the past 30 days, about what percent of students at your school smoked (or otherwise used) marijuana?	1= _____ % [force numeric, 0-100]	Instructions for this item: "The next few items ask for your perceptions of other students' behaviors regarding alcohol and substance use. Please provide your best guess."
	How much do you agree with the following statement?: Alcohol use is a problem for students on my campus.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	

(5) SLEEP (HALF MODULE)

Sleep Habits

The next questions will ask you about your sleep habits. Remember that your responses are confidential and you may choose to skip questions or stop responding at any point.

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
Sleep habits	During this school year, at approximately what time have you typically gone to sleep on: Weeknights?	1=12:00pm 2=1:00pm 3=2:00pm 4=3:00pm 5=4:00pm 6=5:00pm 7=6:00pm 8=7:00pm 9=8:00pm 10=9:00pm 11=10:00pm 12=11:00pm 13=12:00am 14=1:00am 15=2:00am 16=3:00am 17=4:00am 18=5:00am 19=6:00am 20=7:00am 21=8:00am 22=9:00am 23=10:00am 24=11:00am	
	During this school year, at approximately what time have you typically gone to sleep on: Weekend nights?	1=12:00pm 2=1:00pm 3=2:00pm 4=3:00pm 5=4:00pm 6=5:00pm 7=6:00pm 8=7:00pm 9=8:00pm 10=9:00pm 11=10:00pm 12=11:00pm 13=12:00am 14=1:00am 15=2:00am 16=3:00am 17=4:00am 18=5:00am 19=6:00am 20=7:00am 21=8:00am 22=9:00am 23=10:00am 24=11:00am	
	During this school year, at approximately what time have you typically woken up on: Weekdays?	1=12:00pm 2=1:00pm	

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
		3=2:00pm 4=3:00pm 5=4:00pm 6=5:00pm 7=6:00pm 8=7:00pm 9=8:00pm 10=9:00pm 11=10:00pm 12=11:00pm 13=12:00am 14=1:00am 15=2:00am 16=3:00am 17=4:00am 18=5:00am 19=6:00am 20=7:00am 21=8:00am 22=9:00am 23=10:00am 24=11:00am	
	During this school year, at approximately what time have you typically woken up on: Weekend days?	1=12:00pm 2=1:00pm 3=2:00pm 4=3:00pm 5=4:00pm 6=5:00pm 7=6:00pm 8=7:00pm 9=8:00pm 10=9:00pm 11=10:00pm 12=11:00pm 13=12:00am 14=1:00am 15=2:00am 16=3:00am 17=4:00am 18=5:00am 19=6:00am 20=7:00am 21=8:00am 22=9:00am 23=10:00am 24=11:00am	
	During this school year, on how many days have you taken naps during a typical week?	1=I don't take naps. 2=1 3=2 4=3 5=4 6=5 7=6 8=7	
	How long is your typical nap?	1=Less than 1 hour	

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
		2=Between 1 and 2 hours 3=Between 2 and 3 hours 4=More than 3 hours	
Insomnia severity	Difficulty falling asleep	1=None 2=Mild 3=Moderate 4=Severe 5=Very severe	Insomnia Severity Index (Morin et al., 2011) Instruction for this item: "Please rate the current (i.e., last 2 weeks) severity of your insomnia problem(s)." Guidelines for scoring: Add the scores for all 7 items (questions 1 (-1) + 2 (-1) + 3 (-1) + 4 (-1) + 5 (-1) + 6 (-1) + 7 (-1)) >11=Refresh cut-off
	Difficulty staying asleep	1=None 2=Mild 3=Moderate 4=Severe 5=Very severe	Insomnia Severity Index (Morin et al., 2011) Instruction for this item: "Please rate the current (i.e., last 2 weeks) severity of your insomnia problem(s)." Guidelines for scoring: Add the scores for all 7 items (questions 1 (-1) + 2 (-1) + 3 (-1) + 4 (-1) + 5 (-1) + 6 (-1) + 7 (-1)) >11=Refresh cut-off
	Problem waking up too early	1=None 2=Mild 3=Moderate 4=Severe 5=Very severe	Insomnia Severity Index (Morin et al., 2011) Instruction for this item: "Please rate the current (i.e., last 2 weeks) severity of your insomnia problem(s)." Guidelines for scoring: Add the scores for all 7 items (questions 1 (-1) + 2 (-1) + 3 (-1) + 4 (-1) + 5 (-1) + 6 (-1) + 7 (-1)) >11=Refresh cut-off
	How satisfied/dissatisfied are you with your current sleep pattern?	1=Very satisfied 2=Satisfied 3=Moderately satisfied 4=Dissatisfied 5=Very dissatisfied	Insomnia Severity Index (Morin et al., 2011) Guidelines for scoring: Add the scores for all 7 items (questions 1 (-1) + 2 (-1) + 3 (-1) + 4 (-1) + 5 (-1) + 6 (-1) + 7 (-1)) >11=Refresh cut-off
	How noticeable to others do you think your sleep problem is in terms of impairing the quality of your life?	1=Not at all noticeable 2=A little 3=Somewhat 4=Much 5=Very much noticeable	Insomnia Severity Index (Morin et al., 2011) Guidelines for scoring: Add the scores for all 7 items (questions 1 (-1) + 2 (-1) + 3 (-1) + 4 (-1) + 5 (-1) + 6 (-1) + 7 (-1)) >11=Refresh cut-off
	How worried/distressed are you about a current sleep problem?	1=Not at all worried 2=A little 3=Somewhat 4=Much 5=Very much worried	Insomnia Severity Index (Morin et al., 2011) Guidelines for scoring: Add the scores for all 7 items (questions 1 (-1) + 2 (-1) + 3 (-1) + 4 (-1) + 5 (-1) + 6 (-1) + 7 (-1))

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
			<p>7 (-1) ≥11=Refresh cut-off</p>
	<p>To what extent do you consider a sleep problem to interfere with your daily functioning (e.g., daytime fatigue, mood, ability to function at work/daily chores, concentration, memory, etc.) currently?</p>	<p>1=Not at all interfering 2=A little 3=Somewhat 4=Much 5=Very much interfering</p>	<p>Insomnia Severity Index (Morin et al., 2011)</p> <p>Guidelines for scoring: Add the scores for all 7 items (questions 1 (-1) + 2 (-1) + 3 (-1) + 4 (-1) + 5 (-1) + 6 (-1) + 7 (-1)) ≥11=Refresh cut-off</p>

(6) EATING AND BODY IMAGE

Eating and Body Image

The next questions will ask you about your behaviors and attitudes related to eating, body shape and weight. Remember that your responses are confidential and you may choose to skip questions or stop responding at any point.

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
Weight concerns	How much more or less do you feel you worry about your weight and body shape than [other women/men/peers] your age?	1=I worry a lot less than [other women/men/my peers]. 2=I worry a little less than [other women/men/my peers]. 3=I worry about the same as [other women/men/my peers]. 4=I worry a little more than [other women/men/my peers]. 5=I worry a lot more than [other women/men/my peers].	Weight Concerns Scale (WCS) (Killen et al., 1994; Killen et al., 1996)
	How afraid are you of gaining 3 pounds?	1=Not afraid of gaining 2=Slightly afraid of gaining 3=Moderately afraid of gaining 4=Very afraid of gaining 5=Terrified of gaining	Weight Concerns Scale (WCS) (Killen et al., 1994; Killen et al., 1996)
	When was the last time you went on a diet?	1=I've never been on a diet. 2=I was on a diet about 1 year ago. 3=I was on a diet about 6 months ago. 4=I was on a diet about 3 months ago. 5=I was on a diet about 1 month ago. 6=I was on a diet less than 1 month ago. 7=I'm now on a diet.	Weight Concerns Scale (WCS) (Killen et al., 1994; Killen et al., 1996)
	Compared to other things in your life, how important is your weight to you?	1=My weight is not important compared to other things in my life. 2=My weight is a little more important than some other things in my life. 3=My weight is more important than most, but not all, things in my life. 4=My weight is the most important thing in my life.	Weight Concerns Scale (WCS) (Killen et al., 1994; Killen et al., 1996)
	Do you ever feel fat?	1=Never 2=Rarely 3=Sometimes 4=Often 5=Always	Weight Concerns Scale (WCS) (Killen et al., 1994; Killen et al., 1996)
	Do you need to be very thin in order to feel good about yourself?	1=Yes 0=No	
	I think I am...	1=Very underweight 2=Somewhat underweight 3=Normal weight 4=Somewhat overweight 5=Very overweight	
	How much do you agree with the following statement?: I have become more concerned about my body shape and weight since I began as a student at my school.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	
	How much do you agree with the following statement?: I am worried about gaining the "freshman fifteen".	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	
Height/weight	About how often do you weigh yourself?	1=Never	

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
		2=Less than once per month 3=Once per month 4=2 to 3 times per month 5=Once per week 6=2 to 3 times per week 7=4 to 6 times per week 8=Once per day 9=More than once per day	
	What is your current height? (If you don't know, please provide your best guess.)	1=_____ feet [force numeric, <=7] 2=_____ inches [force numeric, <=11]	
	What is your current weight? (If you don't know, please provide your best guess.)	1=_____ pounds [force numeric]	
	What would your ideal weight be if you could choose it?	1=_____ pounds (please specify) [force numeric] 2=I don't have an ideal weight for myself	
Eating disorder symptoms	Do you ever make yourself sick because you feel uncomfortably full?	1=Yes 0=No	SCOFF questionnaire (Morgan, Reid, & Lacey, 1999) Instructions for this item: "Please answer the following questions as honestly as possible."
	Do you worry that you have lost control over how much you eat?	1=Yes 0=No	SCOFF questionnaire (Morgan, Reid, & Lacey, 1999) Instructions for this item: "Please answer the following questions as honestly as possible."
	Have you recently lost more than 15 pounds in a 3-month period?	1=Yes 0=No	SCOFF questionnaire (Morgan, Reid, & Lacey, 1999) Instructions for this item: "Please answer the following questions as honestly as possible."
	Do you believe yourself to be fat when others say you are too thin?	1=Yes 0=No	SCOFF questionnaire (Morgan, Reid, & Lacey, 1999) Instructions for this item: "Please answer the following questions as honestly as possible."
	Would you say that food dominates your life?	1=Yes 0=No	SCOFF questionnaire (Morgan, Reid, & Lacey, 1999) Instructions for this item: "Please answer the following questions as honestly as possible."
Binging and purging	Over the past 4 weeks (28 days), on how many days have you eaten an unusually large amount of food and have had a sense of loss of control at the time?	Range: 0-28 days	Eating Disorder Examination Questionnaire (EDE-Q) (Fairburn, Cooper, & O'Connor, 2008)
	Over the past 4 weeks (28 days), how many times have you made yourself sick (vomit) as a means of controlling your shape or weight?	[open text]	Eating Disorder Examination Questionnaire (EDE-Q) (Fairburn, Cooper, & O'Connor, 2008)
	Over the past 4 weeks (28 days), how many times have you taken laxatives as a means of controlling your shape or weight?	[open text]	Eating Disorder Examination Questionnaire (EDE-Q)

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
			(Fairburn, Cooper, & O'Connor, 2008)
	Over the past 4 weeks (28 days), how many times have you taken diuretics (water pills) or diet pills as a means of controlling your shape or weight?	[open text]	Eating Disorder Examination Questionnaire (EDE-Q) (Fairburn, Cooper, & O'Connor, 2008)
	Over the past 4 weeks (28 days), how many times have you exercised in a "driven" or "compulsive" way as a means of controlling your weight, shape or amount of fat, or to burn off calories?	[open text]	Eating Disorder Examination Questionnaire (EDE-Q) (Fairburn, Cooper, & O'Connor, 2008)
	Over the past 4 weeks (28 days), how many times have you fasted (intentionally not eaten anything at all for at least 8 waking hours)?	[open text]	Eating Disorder Examination Questionnaire (EDE-Q) (Fairburn, Cooper, & O'Connor, 2008)
Eating habits	For about what percentage of the last 12 months were you on a diet?	1=More than 75% (more than 270 days total) 2=Between 50% and 75% (180 to 270 days total) 3=Between 25% and 49% (90 to 179 days total) 4=Less than 25% (1 to 90 days total) 5=I was not on a diet at all in the last 12 months.	
	How much do you agree with the following statement?: My eating habits have changed a lot since I began as a student at my school.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	
	How have your eating habits changed since you began as a student at your school? (Select all that apply)	1=I think about food more often. 2=I think about food less often. 3=I am more concerned about what I eat. 4=I am less concerned about what I eat. 5=I consume more calories on average per day. 6=I consume fewer calories on average per day. 7=I eat more junk food/fast food. 8=I eat less junk food/fast food. 9=I eat more junk food late at night. 10=I eat more fruits/vegetables. 11=I eat less fruits/vegetables. 12=I became a vegetarian/vegan. 13=I began limiting (or increased the extent to which I limit) the quantity or types of foods and drinks I consume in order to influence my body shape or weight. 14=I began purging (vomiting, using laxatives, diet pills etc.). 15=Other (please specify)	
Perception of peers	Do you know at least 1 student at your school who you suspect has an eating disorder?	1=Yes 0=No	

(7) SEXUAL ASSAULT

Perceptions and Experiences of Sexual Assault on Campus

The next set of questions asks you about perceptions and experiences related to sexual assault. Remember that your responses are confidential and you may choose to skip questions or stop responding at any point.

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
Perceptions of leadership, policies, and reporting	If someone were to report a sexual assault to a campus authority, how likely is it that your school would take the report seriously?	1=Very likely 2=Moderately likely 3=Slightly likely 4=Not at all likely	Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014)
	If someone were to report a sexual assault to a campus authority, how likely is it that your school would keep knowledge of the report limited to those who need to know in order for your school to respond properly?	1=Very likely 2=Moderately likely 3=Slightly likely 4=Not at all likely	Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014)
	If someone were to report a sexual assault to a campus authority, how likely is it that your school would forward the report outside the campus to criminal investigators?	1=Very likely 2=Moderately likely 3=Slightly likely 4=Not at all likely	Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014)
	If someone were to report a sexual assault to a campus authority, how likely is it that your school would take steps to protect the safety of the person making the report?	1=Very likely 2=Moderately likely 3=Slightly likely 4=Not at all likely	Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014)
	If someone were to report a sexual assault to a campus authority, how likely is it that your school would support the person making the report?	1=Very likely 2=Moderately likely 3=Slightly likely 4=Not at all likely	Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014)
	If someone were to report a sexual assault to a campus authority, how likely is it that your school would take corrective action to address factors that may have led to the sexual assault?	1=Very likely 2=Moderately likely 3=Slightly likely 4=Not at all likely	Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014)
	If someone were to report a sexual assault to a campus authority, how likely is it that your school would take corrective action against the offender?	1=Very likely 2=Moderately likely 3=Slightly likely 4=Not at all likely	Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014)
	If someone were to report a sexual assault to a campus authority, how likely is it that your school would take steps to protect the person making the report from retaliation?	1=Very likely 2=Moderately likely 3=Slightly likely 4=Not at all likely	Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014)
	If someone were to report a sexual assault to a campus authority, how likely is it that students would label the person making the report as a troublemaker?	1=Very likely 2=Moderately likely 3=Slightly likely 4=Not at all likely	Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014)
	If someone were to report a sexual assault to a campus authority, how likely is it that students would support the person making the report?	1=Very likely 2=Moderately likely 3=Slightly likely 4=Not at all likely	Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014)
	If someone were to report a sexual assault to a campus authority, how likely is it that the alleged offender(s) or their associates would retaliate against the person making the report?	1=Very likely 2=Moderately likely 3=Slightly likely 4=Not at all likely	Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014)
	If someone were to report a sexual assault to a campus authority, how likely is it that the educational achievement/career of the person making the report would suffer?	1=Very likely 2=Moderately likely 3=Slightly likely 4=Not at all likely	Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014)

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
Sexual violence and sexual assault	Have you received training in policies and procedures regarding incidents of sexual assault (e.g., what is defined as sexual assault, how to report an incident, confidential resources, procedures for investigating)?	1=Yes 0=No	Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014)
	Have you received training in prevention of sexual assault?	1=Yes 0=No	Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014)
	How useful did you think the training was?	1=Very 2=Moderately 3=Somewhat 4=Slightly 5=Not useful	Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014)
	If a friend or I were sexually assaulted, I know where to go to get help.	1=Strongly agree 2=Agree 3=Neither agree nor disagree 4=Disagree 5=Strongly disagree 6=Don't know	Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014) Instruction for this item: "Please indicate your level of agreement to the following statements:"
	I understand my school's formal procedures to address complains of sexual assault.	1=Strongly agree 2=Agree 3=Neither agree nor disagree 4=Disagree 5=Strongly disagree 6=Don't know	Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014) Instruction for this item: "Please indicate your level of agreement to the following statements:"
	I have confidence that my school administers the formal procedures to address complaints of sexual assault fairly.	1=Strongly agree 2=Agree 3=Neither agree nor disagree 4=Disagree 5=Strongly disagree 6=Don't know	Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014) Instruction for this item: "Please indicate your level of agreement to the following statements:"
	Forced touching of a sexual nature (forced kissing, touching of private parts, grabbing, fondling, rubbing up against you in a sexual way, even if it was over your clothes)	1=Yes 0=No	Adapted from Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014) Instructions for this item: "This section asks about nonconsensual or unwanted sexual contact you may have experienced since beginning at your school. The person with whom you had the unwanted sexual contact could have been a stranger or someone you know, such as a family member or someone you were dating or going out with. Please indicate if you have experienced any of the following five types of unwanted sexual contact:"
	Oral sex (someone's mouth or tongue making contact with your genitals or your mouth or tongue making contact with someone else's genitals)	1=Yes 0=No	Adapted from Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014) Instructions for this item: "This section asks about nonconsensual or unwanted sexual contact you may have experienced since beginning at your school. The person with whom you had the unwanted sexual contact could have been a stranger or someone you know, such as a family member or someone you were dating or going out with. Please indicate if you have experienced any of the following five types of unwanted sexual contact:"
	Sexual intercourse (someone's penis being put in your vagina or anus)	1=Yes 0=No	Adapted from Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014) Instructions for this item: "This section asks about nonconsensual or unwanted sexual contact you may have experienced since beginning at your school. The person with whom you had the unwanted sexual contact could have been a stranger or someone you know, such as a family member or someone you were dating or going out with."

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
			Please indicate if you have experienced any of the following five types of unwanted sexual contact:"
	Anal sex (someone's penis being put in your anus)	1=Yes 0=No	Adapted from Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014) Instructions for this item: "This section asks about nonconsensual or unwanted sexual contact you may have experienced since beginning at your school. The person with whom you had the unwanted sexual contact could have been a stranger or someone you know, such as a family member or someone you were dating or going out with. Please indicate if you have experienced any of the following five types of unwanted sexual contact:"
	Sexual penetration with a finger or object (someone putting their finger or an object like a bottle or a candle in your vagina or anus)	1=Yes 0=No	Adapted from Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014) Instructions for this item: "This section asks about nonconsensual or unwanted sexual contact you may have experienced since beginning at your school. The person with whom you had the unwanted sexual contact could have been a stranger or someone you know, such as a family member or someone you were dating or going out with. Please indicate if you have experienced any of the following five types of unwanted sexual contact:"
	Has anyone had sexual contact with you by using physical force or threatening to physically harm you?	1=Yes 0=No	Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014) Instructions for these items: "The questions below ask about unwanted sexual contact that involved force or threats of force against you since you began at your school. Force could include someone holding you down with his or her body weight, pinning your arms, hitting or kicking you, or using or threatening to use a weapon against you."
	Has anyone attempted but not succeeded in having sexual contact with you by using or threatening to use physical force against you?	1=Yes 0=No	Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014) Instructions for these items: "The questions below ask about unwanted sexual contact that involved force or threats of force against you since you began at your school. Force could include someone holding you down with his or her body weight, pinning your arms, hitting or kicking you, or using or threatening to use a weapon against you."
	Since beginning at your school, has someone had sexual contact with you when you were unable to provide consent or stop what was happening because you were passed out, drugged, drunk, incapacitated, or asleep?	1=Yes, I am certain this has happened. 2=I suspect this has happened but am not certain. 3=No, this has not happened.	Adapted from Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014) Instructions for this item: "The next question asks about your experiences with unwanted sexual contact while you were unable to provide consent or stop what was happening you were passed out, drugged, drunk, incapacitated or asleep. These situations might include times that you voluntarily consumed alcohol or drugs and times that you were given drugs without your knowledge or consent."
	When the person had sexual contact with you by using or threatening you with physical force, which of the following happened? (Select all that apply)	1=Forced touching of a sexual nature 2=Oral sex 3=Sexual intercourse 4=Anal sex 5=Sexual penetration with a finger or object 6=Other (please specify)	Adapted from Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014) Instructions for this item: "Earlier you indicated that since beginning at your school, someone has had sexual contact with you by using physical force or threatening to physically harm you. The question below asks about that experience."
	When the person had sexual contact with you when you were unable to provide consent or stop what was happening because you were passed out, drugged, drunk, incapacitated, or asleep, which of the following happened? (Select all that apply)	1=Forced touching of a sexual nature 2=Oral sex 3=Sexual intercourse 4=Anal sex 5=Sexual penetration with a finger or object	Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014) Instructions for this item: "Earlier you indicated that since beginning at your school, someone has had sexual contact with you when you were unable to provide consent or stop what was happening because you were passed out, drugged, drunk, incapacitated,

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
		6= Other (please specify) 7=Don't know [mutually exclusive]	or asleep. The questions below ask about that experience."
	Just prior to the incident(s), had you been drinking alcohol?	1=Yes 0=No	Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014) Instructions for this item: "Earlier you indicated that since beginning at your school, someone has had sexual contact with you when you were unable to provide consent or stop what was happening because you were passed out, drugged, drunk, incapacitated, or asleep. The questions below ask about that experience. Keep in mind that you are in no way responsible for the assault that occurred, even if you had been drinking."
	Were you drunk?	1=Yes 0=No	Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014) Instructions for this item: "Earlier you indicated that since beginning at your school, someone has had sexual contact with you when you were unable to provide consent or stop what was happening because you were passed out, drugged, drunk, incapacitated, or asleep. The questions below ask about that experience."
	Just prior to the incident(s), had you voluntarily been taking or using any drugs other than alcohol?	1=Yes 0=No	Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014) Instructions for this item: "Earlier you indicated that since beginning at your school, someone has had sexual contact with you when you were unable to provide consent or stop what was happening because you were passed out, drugged, drunk, incapacitated, or asleep. The questions below ask about that experience."
	Just prior to the incident(s), had you been given a drug without your knowledge or consent?	1=Yes 2=No 3=Don't know	Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014) Instructions for this item: "Earlier you indicated that since beginning at your school, someone has had sexual contact with you when you were unable to provide consent or stop what was happening because you were passed out, drugged, drunk, incapacitated, or asleep. The questions below ask about that experience."
Context and disclosure	Whom did the unwanted behavior involve? (Select all that apply)	1=Stranger 2=Family member 3=Acquaintance 4=Coworker 5=Employer/supervisor 6=College professor/instructor 7=College staff 8=Non-romantic friend 9=Casual or first date 10=Current romantic partner 11=Ex-romantic partner 12=Other (please specify)	Adapted from Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014) Instructions for these items: "For the next set of questions, please pick the most serious incident if you had more than one, and answer the questions below about this experience."
	Was this person a student at your school?	1=Yes 2=No 3=Don't know	Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014) Instructions for these items: "For the next set of questions, please pick the most serious incident if you had more than one, and answer the questions below about this experience."
	Was this person affiliated with your school as an employee, staff, or faculty member?	1=Yes 2=No 3=Don't know	Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014) Instructions for these items: "For the next set of questions, please pick the most serious incident if you had more than one, and answer the questions below about this

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
			experience.”
	What was the gender of the individual who did this to you?	1=Man 2=Woman 3=Another gender identity (please specify) 4=Don't know	Adapted from Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014) Instructions for these items: “For the next set of questions, please pick the most serious incident if you had more than one, and answer the questions below about this experience.”
	Did the incident involve any of the following? (Select all that apply)	1=The other person’s use of alcohol 2=Your use of alcohol 3=The other person’s use of drugs 4=Your use of drugs 5=None of the above [mutually exclusive]	Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014) Instructions for these items: “For the next set of questions, please pick the most serious incident if you had more than one, and answer the questions below about this experience.”
	How frightened were you by the incident?	1=Extremely frightened 2=Somewhat frightened 3=Only a little frightened 4=Not at all frightened	Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014) Instructions for these items: “For the next set of questions, please pick the most serious incident if you had more than one, and answer the questions below about this experience.”
	Where did the incident occur? (Select all that apply)	1=Off-campus 2=On-campus	Adapted from Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014) Instructions for these items: “For the next set of questions, please pick the most serious incident if you had more than one, and answer the questions below about this experience.”
	Whom did you tell about the incident? (Select all that apply)	1=No one [mutually exclusive] 2=Roommate 3=Close friend other than roommate 4=Parent or guardian 5=Other family member 6=Counselor 7=Faculty or staff 8=Residence hall staff 9=Police 10=Romantic partner (other than the one who did this to you) 11=Campus sexual assault advocate 12=Other (please specify)	Adapted from Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014) Instructions for these items: “For the next set of questions, please pick the most serious incident if you had more than one, and answer the questions below about this experience.”
	Did you use your school’s formal procedures to report the incident(s)?	1=Yes 0=No	Adapted from Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014) Instructions for these items: “For the next set of questions, please pick the most serious incident if you had more than one, and answer the questions below about this experience.”
	Did your school’s formal procedures help you deal with the problem?	1=Didn’t help me at all 2=Helped me a little 3=Helped, but could have helped more 4=Helped me a lot 5=Completely solved the problem	Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014) Instructions for these items: “For the next set of questions, please pick the most serious incident if you had more than one, and answer the questions below about this experience.”
	Why did you not tell anyone? (Select all that apply)	1=Ashamed/embarrassed 2=Is a private matter-wanted to deal with it on own 3=Concerned others would find out	Adapted from Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014) Instructions for these items: “For the next set of questions, please pick the most

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
		4=Didn't want the person who did it to get in trouble 5=Fear of retribution from the person who did it 6=Fear of not being believed 7=Thought I would be blamed for what happened 8=Didn't think what happened was serious enough to talk about 9=Didn't think others would think it was serious 10=Thought people would try to tell me what to do 11=Would feel like an admission of failure 12=Didn't think others would think it was important 13=Didn't think others would understand 14=Didn't have time to deal with it due to academics, work, etc. 15=Didn't know reporting procedure on campus 16=Feared I or another would be punished for infractions or violations (such as underage drinking) 17=Did not feel the campus leadership would solve my problems 18=Feared others would harass me or react negatively toward me 19=Thought nothing would be done 20=Didn't want others to worry about me 21=Wanted to forget it happened 22=Had other things I needed to focus on and was concerned about (classes, work) 23=Didn't think the school would do anything about my report 24=Other (please specify)	serious incident if you had more than one, and answer the questions below about this experience."
Stalking	In the past 12 months, have you experienced stalking (e.g., someone waiting for you outside of your home, classroom, or workplace; repeated unwanted emails/phone calls)?	1=Yes 0=No	

(8) OVERALL HEALTH

Overall Health

The next questions will ask you about various aspects of your overall health. Remember that your responses are confidential and you may choose to skip questions or stop responding at any point.

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
Perceived health status	Overall, how you would describe your health?	1=Excellent 2=Good 3=Fair 4=Poor 5=Very poor	
Chronic disease	Have you ever been diagnosed with any of the following health conditions, which required ongoing treatment by a health care professional (i.e., chronic diseases)? (Select all that apply)	1=Diabetes 2=High blood pressure 3=Asthma 4=Thyroid disease (e.g., hypothyroid or hyperthyroid) 5=Gastrointestinal disease (e.g., Crohn's Disease, Ulcerative Colitis) 6=Arthritis 7=Sickle cell anemia 8=Seizure disorders (e.g., epilepsy) 9=Cancers 10=High cholesterol 11=Other chronic disease (please specify) 12=No, never been diagnosed with a chronic disease. [mutually exclusive] 13=Don't know	
Exercise	In the past 30 days, about how many hours per week on average did you spend exercising? (Include any exercise of moderate or higher intensity, where "moderate intensity" would be roughly equivalent to brisk walking or bicycling)	1=Less than 1 hour 2=2-3 hours 3=3-4 hours 4=5 or more hours	
	How much do you agree with the following statement?: My exercise habits have changed a lot since I began as a student at my school.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	
	How have your exercise habits changed since you began as a student at your school?	1=I exercise more now. 2=I exercise less now. 3=Other (please specify)	
Nutrition	Do the following eating practices apply to you?: I am a vegetarian.	1=Yes 0=No	
	Do the following eating practices apply to you?: I am vegan.	1=Yes 0=No	
	Do the following eating practices apply to you?: I eat raw food (most of or all the time).	1=Yes 0=No	
	Compared to other reasons for [being a vegetarian/being vegan/eating raw food most of or all the time], how important is a desire to influence your body shape or weight?	1=Very important 2=Important 3=Somewhat important 4=Not important	
	How many servings of fruits and vegetables do you usually have per day? (1 serving is 1 medium piece of fruit, 1 cup raw leafy vegetables, 1/2 cup fresh/frozen/canned fruits/vegetables, 3/4 cup fruit/vegetable juice, or 1/4 dried fruit)	1=0 2=1-2 3=3-4 4=5 or more	Definition from American Heart Association 2014
Sexual health	With how many people have you had oral sex, vaginal intercourse, or anal intercourse in	1=0	

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
and behavior	the past 12 months?	2=1 3=2 4=3 5=4 6=5-9 7=10 or more	
	In the past 12 months, did you have sexual partner(s) who were female?	1=Yes 0=No	
	In the past 12 months, did you have sexual partner(s) who were male?	1=Yes 0=No	
	In the past 12 months, did you have sexual partner(s) who were transgender?	1=Yes 0=No	
	In the past 30 days, with how many people have you had oral sex, vaginal intercourse, or anal intercourse?	1=0 2=1 3=2 4=3 or more	
	In the past 30 days, did you have oral sex?	1=Yes 2=No 3=Don't know	
	In the past 30 days, did you have vaginal intercourse?	1=Yes 2=No 3=Don't know	
	In the past 30 days, did you have anal intercourse?	1=Yes 2=No 3=Don't know	
	In the past 30 days, what type of birth control method did you or your partner use during your last sexual intercourse experience? (Select all that apply)	1=Male condom 2=Withdrawal (i.e., "pulling out") 3=Contraceptive pills 4=Contraceptive patch 5=Contraceptive ring (e.g., Nuvaring) 6=Contraceptive injectable (e.g., Depo-Provera shot) 7=Intrauterine device (IUD) 8=Contraceptive implant (e.g., implanon/nexplanon) 9=Emergency contraception (i.e., "morning after pill") 10=Other contraceptive method (please specify) 11=No contraceptive method was used. [mutually exclusive] 12=Don't know	
	In the past 30 days, did you or your partner(s) use some form of birth control or protection (e.g. condoms, birth control pills) every single time you had sex?	1=Yes 2=No 3=Don't know	
	Have you or a sexual partner (current or past) ever become pregnant? (Select all that apply)	1=No [mutually exclusive] 2=Yes, unintentionally 3=Yes, intentionally 4=Don't know	
	Are you currently pregnant and/or have you given birth in the last 12 months?	1=Yes 0=No	
Violence	In your lifetime, how many times has anyone struck or physically injured you?	1=Never 2=1 time 3=2-3 times 4=4-5 times	

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
		5=More than 5 times	
	When was the last time anyone has struck or physically injured you?	1=Within the last 2 weeks 2=Within the last month 3=Within the last year 4=Within the last 1-5 years 5=More than 5 years ago	Display if previous question answered with anything other than "Never"
	Over the past 12 months, did you strike or physically injure anyone?	1=Yes 0=No	
Sexual assault	Over the past 12 months, have you experienced emotional, physical, or sexual abuse (either from someone you know or don't know)?	1=Yes 0=No	Included if 'Sexual Assault' module not selected
	Over the past 12 months, were you emotionally abused? (Examples include being called names, being yelled at, humiliated, judged, threatened, coerced, or controlled.)	1=Yes 0=No	Included if 'Sexual Assault' module not selected
	Over the past 12 months, were you physically abused? (Examples include being kicked, slapped, punched or otherwise physically mistreated.)	1=Yes 0=No	Included if 'Sexual Assault' module not selected
	Over the past 12 months, were you in a sexually abusive relationship? (By 'sexually abusive relationship', we mean one in which an intimate partner forced or coerced you to perform or receive sexual acts, or forced you to have intercourse when you didn't want to.)	1=Yes 0=No	Included if 'Sexual Assault' module not selected
	Over the past 12 months, were you ever forced to have unwanted sexual intercourse through the use of physical force or threat by someone who was not an intimate partner? (By 'sexual intercourse', we mean completed or attempted penetration.)	1=Yes 0=No	Included if 'Sexual Assault' module not selected Definition from CDC NISVS 2010
Substance use	Over the past 2 weeks, did you drink any alcohol?	1=Yes 0=No	Included if 'Substance Use' module not selected
	Over the past 2 weeks, about how many times did you have 4 [female]/5 [male]/4 or 5 [not female or male] or more alcoholic drinks in a row? (1 drink is a can of beer, a glass of wine, a wine cooler, a shot of liquor, or a mixed drink.)	1=0 times 2=1 time 3=2 times 4=3 to 5 times 5=6 to 9 times 6=10 or more times 7=Don't know	Included if 'Substance Use' module not selected Definition adapted from National Institute on Alcohol Abuse and Alcoholism
	Over the past 30 days, about how many cigarettes did you smoke per day?	1=0 cigarettes 2=Less than 1 cigarette 3=1 to 5 cigarettes 4=About one-half pack 5=1 or more packs	Included if 'Substance Use' module not selected
	Over the past 30 days, have you used any of the following drugs? (Select all that apply)	1=Marijuana 2=Cocaine (any form, including crack, powder, or freebase) 3=Heroin 4=Methamphetamines (also known as speed, crystal meth, or ice) 5=Other stimulants (such as Ritalin, Adderall) without a prescription 6=Ecstasy 7=Other drugs without a prescription (please specify) 8=No, none of these [mutually exclusive]	Included if 'Substance Use' module not selected
Sleep	During this school year, at approximately what time have you typically gone to sleep on: Weeknights?	1=12:00pm 2=1:00pm 3=2:00pm 4=3:00pm 5=4:00pm	Included if 'Sleep' module not selected

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
		6=5:00pm 7=6:00pm 8=7:00pm 9=8:00pm 10=9:00pm 11=10:00pm 12=11:00pm 13=12:00am 14=1:00am 15=2:00am 16=3:00am 17=4:00am 18=5:00am 19=6:00am 20=7:00am 21=8:00am 22=9:00am 23=10:00am 24=11:00am	
	During this school year, at approximately what time have you typically gone to sleep on: Weekend nights?	1=12:00pm 2=1:00pm 3=2:00pm 4=3:00pm 5=4:00pm 6=5:00pm 7=6:00pm 8=7:00pm 9=8:00pm 10=9:00pm 11=10:00pm 12=11:00pm 13=12:00am 14=1:00am 15=2:00am 16=3:00am 17=4:00am 18=5:00am 19=6:00am 20=7:00am 21=8:00am 22=9:00am 23=10:00am 24=11:00am	Included if 'Sleep' module not selected
	During this school year, at approximately what time have you typically woken up on: Weekdays?	1=12:00pm 2=1:00pm 3=2:00pm 4=3:00pm 5=4:00pm 6=5:00pm 7=6:00pm 8=7:00pm 9=8:00pm 10=9:00pm 11=10:00pm 12=11:00pm 13=12:00am	Included if 'Sleep' module not selected

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
		14=1:00am 15=2:00am 16=3:00am 17=4:00am 18=5:00am 19=6:00am 20=7:00am 21=8:00am 22=9:00am 23=10:00am 24=11:00am	
	During this school year, at approximately what time have you typically woken up on: Weekend days?	1=12:00pm 2=1:00pm 3=2:00pm 4=3:00pm 5=4:00pm 6=5:00pm 7=6:00pm 8=7:00pm 9=8:00pm 10=9:00pm 11=10:00pm 12=11:00pm 13=12:00am 14=1:00am 15=2:00am 16=3:00am 17=4:00am 18=5:00am 19=6:00am 20=7:00am 21=8:00am 22=9:00am 23=10:00am 24=11:00am	Included if 'Sleep' module not selected
	During this school year, on how many days have you taken naps during a typical week?	1=I don't take naps. 2=1 3=2 4=3 5=4 6=5 7=6 8=7	Included if 'Sleep' module not selected
	How long is your typical nap?	1=Less than 1 hour 2=Between 1 and 2 hours 3=Between 2 and 3 hours 4=More than 3 hours	Included if 'Sleep' module not selected

(g) KNOWLEDGE AND ATTITUDES ABOUT MENTAL HEALTH AND MENTAL HEALTH SERVICES

Knowledge and Beliefs about Services

The next questions will ask you about your knowledge and beliefs about services and treatment for mental health. Remember that your responses are confidential and you may choose to skip questions or stop responding at any point.

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
Knowledge of mental illness and treatments	Relative to the average person, how knowledgeable are you about mental illnesses (such as depression and anxiety disorders) and their treatments?	1=Well above average 2=Above average 3=Average 4=Below average 5=Well below average	
	As far as you know, which of the following are generally considered highly effective treatments for depression? (Select all that apply)	1=Cognitive behavioral therapy (CBT) 2=Antidepressant medication 3=Psychoanalysis 4=Psychostimulant medication (e.g., Ritalin)	
	As far as you know, which of the following are common symptoms of depression? (Select all that apply)	1=Sleep changes (substantial increases or decreases) 2=Hallucinations or delusions 3=Appetite changes (substantial increases or decreases) 4=Reduced interest in usual activities	
	As far as you know, which of the following are considered to be effective self-help strategies for reducing anxiety? (Select all that apply)	1=Physical exercise 2=Spending more time alone 3=Slow breathing exercises 4=Meditation	
	As far as you know, which of the following are common symptoms of eating disorders? (Select all that apply)	1=Dramatic weight loss 2=Strong need for control 3=Restrictive eating/fasting 4=Self-induced vomiting, abuse of laxatives, diet pills and/or diuretics 5=Rapid, unintermittible speech 6=Eating an unusually large amount of food while feeling out of control	
	How much do you agree with the following statement?: I have a good idea of how to recognize that someone is in emotional or mental distress.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	
	How much do you agree with the following statement?: I feel confident in helping someone with a mental health problem.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	
	Have you ever participated in a mental health gatekeeper-training program? (A program to enhance your skills to recognize signs of emotional distress in other people and refer them to appropriate resources. Examples include Mental Health First Aid, Question, Persuade, Refer (QPR), and At-Risk.)	1=Yes 0=No	
Knowledge and perceptions of campus services	How much do you agree with the following statement?: If I needed to seek professional help for my mental or emotional health, I would know where to go on my campus.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
	Are you aware of mental health outreach efforts on your campus (such as educational programs, awareness events, anti-stigma campaigns, screening days)?	1=Yes 0=No	
	What have you heard from other students about the quality of mental health and psychological counseling services on your campus?	1=I have mostly heard negative opinions. 2=I have heard an even mix of negative and positive opinions. 3=I have mostly heard positive opinions. 4=I haven't heard anything.	
	How much do you agree with the following statement?: There is a good support system on campus for students going through difficult times.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	
Beliefs about treatment efficacy	How helpful on average do you think medication is, when provided competently, for people your age who are clinically depressed?	1=Very helpful 2=Helpful 3=Somewhat helpful 4=Not helpful	
	How helpful on average do you think medication would be for you if you were having mental or emotional health problems?	1=Very helpful 2=Helpful 3=Somewhat helpful 4=Not helpful	
	How helpful on average do you think therapy or counseling is, when provided competently, for people your age who are clinically depressed?	1=Very helpful 2=Helpful 3=Somewhat helpful 4=Not helpful	
	How helpful on average do you think therapy or counseling would be for you if you were having mental or emotional health problems?	1=Very helpful 2=Helpful 3=Somewhat helpful 4=Not helpful	
Identity, secrecy, and disclosure	How much do you agree with the following statement?: I see myself as a person with mental illness.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	
	How much do you agree with the following statement?: When I feel depressed or sad, I tend to keep those feelings to myself.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	
	How much do you agree with the following statement?: Sometimes I feel ashamed of having a mental illness.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	
	How much do you agree with the following statement?: Sometimes I keep my mental illness a secret.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	
	How much do you agree with the following statement?: I wish I could disclose to others my mental illness.	1=Strongly agree 2=Agree	

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
		3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	
Perceived stigma	How much do you agree with the following statement?: Most people would willingly accept someone who has received mental health treatment as a close friend.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	
	How much do you agree with the following statement?: Most people feel that receiving mental health treatment is a sign of personal failure.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	
	How much do you agree with the following statement?: Most people think less of a person who has received mental health treatment.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	
Personal stigma	How much do you agree with the following statement?: I would willingly accept someone who has received mental health treatment as a close friend.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	
	How much do you agree with the following statement?: I feel that receiving mental health treatment is a sign of personal failure.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	
	How much do you agree with the following statement?: I would think less of a person who has received mental health treatment.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	
Other factors	As far as you know, how many of your close friends or family have ever sought professional help for an emotional or mental health problem?	1=None 2=At least 1 or 2 3=3 or more 4=Don't know	

(10) UPSTANDER/BYSTANDER BEHAVIORS (HALF MODULE)

Witnessing and Reacting to Difficult Situations on Campus

The next questions will ask you about difficult situations that you may have witness on your campus in the past year and whether you have intervened (by trying to help). Remember that your responses are confidential and you may choose to skip questions or stop responding at any point.

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
Campus climate around upstanding	How much do you agree with the following statement?: At my school, we are a campus where we look out for each other.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	
	How much do you agree with the following statement?: I am responsible to help if a friend is struggling.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	
	How much do you agree with the following statement?: I am responsible to help if a classmate is struggling.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	
Witnessing	In the past year, I have witnessed the following situations on my campus: (Select all that apply)	1=Someone was drinking too much 2=Someone was at risk of being sexually assaulted 3=Someone was using hurtful language (e.g., bullying, sexist, racist, or homophobic comments) 4=Someone was experiencing significant emotional distress or thoughts of suicide 5=There was a physical altercation/fight 6=Other (please specify) 7=None of the above [mutually exclusive]	
Upstanding	How much do you agree with the following statement?: If I saw someone was drinking too much, I would intervene (by trying to help).	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	
	How much do you agree with the following statement?: If I saw someone was at risk of being sexually assaulted, I would intervene (by trying to help).	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	
	How much do you agree with the following statement?: If I saw someone was using hurtful language (e.g., bullying, sexist, racist, or homophobic comments), I would intervene (by trying to help).	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	
	How much do you agree with the following statement?: If I saw someone was experiencing significant emotional distress or thoughts of suicide, I would intervene (by trying to help).	1=Strongly agree 2=Agree 3=Somewhat agree	

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
		4=Somewhat disagree 5=Disagree 6=Strongly disagree	
	In the past year, I have intervened (by trying to help) in the following situations on my campus: (Select all that apply)	1=Someone was drinking too much 2=Someone was at risk of being sexually assaulted 3=Someone was using hurtful language (e.g., bullying, sexist, racist, or homophobic comments) 4=Someone was experiencing significant emotional distress or thoughts of suicide 5=There was a physical altercation/fight 6=Other (please specify) 7=None of the above [mutually exclusive]	
	How much do you agree with the following statement?: When I intervened, I was able to make the situation better. (If you intervened in multiple situations, please consider them as a whole.)	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	
Bystanding	In the past year, I witnessed the following risky or difficult situations on my campus but did not intervene: (Select all that apply)	1=Someone was drinking too much 2=Someone was at risk of being sexually assaulted 3=Someone was using hurtful language (e.g., bullying, sexist, racist, or homophobic comments) 4=Someone was experiencing significant emotional distress or thoughts of suicide 5=There was a physical altercation/fight 6=Other (please specify) 7=None of the above [mutually exclusive]	
	I decided not to intervene because... (Select all that apply)	1=I was afraid of embarrassing myself. 2=I assumed someone else would do something. 3=I didn't know what to do. 4=I didn't feel confident. 5=I felt it was none of my business. 6=I was afraid my friends wouldn't support me. 7=I felt it was unsafe. 8=I was afraid I'd get in trouble. 9=Other (please specify)	

(11) CAMPUS CLIMATE AND CULTURE

Campus Climate and Culture

The next questions will ask you about the campus climate and culture and how you feel about this. Remember that your responses are confidential and you may choose to skip questions or stop responding at any point.

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
Sense of belonging	How much do you agree with the following statement?: I see myself as a part of the campus community.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	Adapted from Perceived Cohesion Scale (Bollen & Hoyle, 1990)
	How much do you agree with the following statement?: I fit in well at my school.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	Adapted from Sense of Social and Academic Fit (Walton & Cohen, 2007)
	How much do you agree with the following statement?: I feel isolated from campus life.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	
	How much do you agree with the following statement?: Other people understand more than I do about what is going on at my school.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	Adapted from Sense of Social and Academic Fit (Walton & Cohen, 2007)
Perceptions of campus climate	How much do you agree with the following statement?: At my school, I feel that students' mental and emotional well-being is a priority.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	
	How much do you agree with the following statement?: At my school, I feel that the campus climate encourages free and open discussion about mental and emotional health.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	
	How much do you agree with the following statement?: At my school, students are working to promote mental health on campus.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	
	How much do you agree with the following statement?: At my school, the administration is listening to the concerns of students when it comes to health and wellness.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
	How much do you agree with the following statement?: At my school, I feel that the campus environment has a negative impact on students' mental and emotional health.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	
	How much do you agree with the following statement?: At my school, I feel that the campus environment has a negative impact on students' eating and body image.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	
Feelings of safety	How safe do you feel on your campus during the day?	1=Very safe 2=Safe 3=Somewhat safe 4=Somewhat unsafe 5=Unsafe 6=Very unsafe	
	How safe do you feel on your campus at night?	1=Very safe 2=Safe 3=Somewhat safe 4=Somewhat unsafe 5=Unsafe 6=Very unsafe	
	How safe do you feel in the community surrounding your campus during the day?	1=Very safe 2=Safe 3=Somewhat safe 4=Somewhat unsafe 5=Unsafe 6=Very unsafe	
	How safe do you feel in the community surrounding your campus at night?	1=Very safe 2=Safe 3=Somewhat safe 4=Somewhat unsafe 5=Unsafe 6=Very unsafe	
Diversity and discrimination	How much do you agree with the following statement?: At my school, I have been exposed to diverse opinions, cultures, and values.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	
	In the past 12 months, how many times have you been treated unfairly because of your race, ethnicity, gender, sexual orientation, or cultural background?	1=Never 2=Once in a while 3=Sometimes 4=A lot 5=Most of the time 6=Almost all of the time	

(12) COMPETITION

Stress and Competition

The next questions will ask you about stress and competition. Remember that your responses are confidential and you may choose to skip questions or stop responding at any point.

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
Stress mindset	Experiencing stress depletes health and vitality.	1=Strongly disagree 2=Disagree 3=Neither agree nor disagree 4=Agree 5=Strongly agree	Crum et al. (working paper) Instructions for this item: "Please rate the extent to which you agree or disagree with the following statements."
	Experiencing stress enhances performance and productivity.	1=Strongly disagree 2=Disagree 3=Neither agree nor disagree 4=Agree 5=Strongly agree	Crum et al. (working paper) Instructions for this item: "Please rate the extent to which you agree or disagree with the following statements."
	Experiencing stress inhibits learning and growth.	1=Strongly disagree 2=Disagree 3=Neither agree nor disagree 4=Agree 5=Strongly agree	Crum et al. (working paper) Instructions for this item: "Please rate the extent to which you agree or disagree with the following statements."
	The effects of stress are positive and should be utilized.	1=Strongly disagree 2=Disagree 3=Neither agree nor disagree 4=Agree 5=Strongly agree	Crum et al. (working paper) Instructions for this item: "Please rate the extent to which you agree or disagree with the following statements."
Perceived competition	How would you rate the overall competitiveness among students in your current classes?	1=Very competitive 2=Competitive 3=Somewhat competitive 4=Not competitive 5=Very uncompetitive	
	How would you rate the overall competitiveness among students at your school?	1=Very competitive 2=Competitive 3=Somewhat competitive 4=Not competitive 5=Very uncompetitive	
	How would you rate the overall competitiveness among students in your field of study?	1=Very competitive 2=Competitive 3=Somewhat competitive 4=Not competitive 5=Very uncompetitive	
	How frequently do instructors in your major/field of study grade your work on a curve (adjust grades based on the grade distribution among students in a class)?	1=Never 2=Almost never 3=Occasionally/Sometimes 4=Almost every time 5=Every time	
Clarifying achievement goals and their impact	How much do you agree with the following statements?: It is very important to me to do well in my courses.	1=Strongly disagree 2=Disagree 3=Neither agree nor disagree 4=Agree	Adapted from Achievement Goal Inventory (Grant & Dweck, 2003)

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
	<p>How much do you agree with the following statements?: It is important to me to confirm my intelligence through my schoolwork.</p>	<p>5=Strongly agree 1=Strongly disagree 2=Disagree 3=Neither agree nor disagree 4=Agree 5=Strongly agree</p>	<p>Adapted from Achievement Goal Inventory (Grant & Dweck, 2003)</p>
	<p>How much do you agree with the following statements?: In school I am always seeking opportunities to develop new skills and acquire new knowledge.</p>	<p>1=Strongly disagree 2=Disagree 3=Neither agree nor disagree 4=Agree 5=Strongly agree</p>	<p>Adapted from Achievement Goal Inventory (Grant & Dweck, 2003)</p>
	<p>How much do you agree with the following statements?: It is very important to me to feel that my coursework offers me real challenges.</p>	<p>1=Strongly disagree 2=Disagree 3=Neither agree nor disagree 4=Agree 5=Strongly agree</p>	<p>Adapted from Achievement Goal Inventory (Grant & Dweck, 2003)</p>

(13) RESILIENCE AND COPING

Resilience and Coping

The next questions will ask you about how you respond to stressful feelings and experiences. Remember that your responses are confidential and you may choose to skip questions or stop responding at any point.

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
Psychological inflexibility/Experiential Avoidance	My painful experiences and memories make it difficult for me to live a life that I would value.	1=Never true 2=Very seldom true 3=Seldom true 4=Sometimes true 5=Frequently true 6=Almost always true 7=Always true	Acceptance and Action Questionnaire-II (AAQ-II) (Bond, Hayes, Baer, Carpetner, Guenole, Orcutt, Waltz, & Zettle, 2011) Instructions for this item (adapted from AAQ-II (Bond et al., 2011)): "Below you will find a list of statements. Please rate how true each statement is for you. Use the scale below to make your choice."
	I'm afraid of my feelings.	1=Never true 2=Very seldom true 3=Seldom true 4=Sometimes true 5=Frequently true 6=Almost always true 7=Always true	Acceptance and Action Questionnaire-II (AAQ-II) (Bond, Hayes, Baer, Carpetner, Guenole, Orcutt, Waltz, & Zettle, 2011) Instructions for this item (adapted from AAQ-II (Bond et al., 2011)): "Below you will find a list of statements. Please rate how true each statement is for you. Use the scale below to make your choice."
	I worry about not being able to control my worries and feelings.	1=Never true 2=Very seldom true 3=Seldom true 4=Sometimes true 5=Frequently true 6=Almost always true 7=Always true	Acceptance and Action Questionnaire-II (AAQ-II) (Bond, Hayes, Baer, Carpetner, Guenole, Orcutt, Waltz, & Zettle, 2011) Instructions for this item (adapted from AAQ-II (Bond et al., 2011)): "Below you will find a list of statements. Please rate how true each statement is for you. Use the scale below to make your choice."
	My painful memories prevent me from having a fulfilling life.	1=Never true 2=Very seldom true 3=Seldom true 4=Sometimes true 5=Frequently true 6=Almost always true 7=Always true	Acceptance and Action Questionnaire-II (AAQ-II) (Bond, Hayes, Baer, Carpetner, Guenole, Orcutt, Waltz, & Zettle, 2011) Instructions for this item (adapted from AAQ-II (Bond et al., 2011)): "Below you will find a list of statements. Please rate how true each statement is for you. Use the scale below to make your choice."
	Emotions cause problems in my life.	1=Never true 2=Very seldom true 3=Seldom true	Acceptance and Action Questionnaire-II (AAQ-II) (Bond, Hayes, Baer, Carpetner, Guenole, Orcutt, Waltz, & Zettle, 2011) Instructions for this item (adapted from AAQ-II (Bond et al., 2011)): "Below you will find a list of statements. Please

		4=Sometimes true 5=Frequently true 6=Almost always true 7=Always true	rate how true each statement is for you. Use the scale below to make your choice.”
	It seems like most people are handling their lives better than I am.	1=Never true 2=Very seldom true 3=Seldom true 4=Sometimes true 5=Frequently true 6=Almost always true 7=Always true	Acceptance and Action Questionnaire-II (AAQ-II) (Bond, Hayes, Baer, Carpetner, Guenole, Orcutt, Waltz, & Zettle, 2011) Instructions for this item (adapted from AAQ-II (Bond et al., 2011)): “Below you will find a list of statements. Please rate how true each statement is for you. Use the scale below to make your choice.”
	Worries get in the way of my success.	1=Never true 2=Very seldom true 3=Seldom true 4=Sometimes true 5=Frequently true 6=Almost always true 7=Always true	Acceptance and Action Questionnaire-II (AAQ-II) (Bond, Hayes, Baer, Carpetner, Guenole, Orcutt, Waltz, & Zettle, 2011) Instructions for this item (adapted from AAQ-II (Bond et al., 2011)): “Below you will find a list of statements. Please rate how true each statement is for you. Use the scale below to make your choice.”
Emotional resilience	I tend to bounce back quickly after hard times.	1=Strongly disagree 2=Disagree 3=Neutral 4=Agree 5=Strongly agree	Brief Resilience Scale (BRS) (Smith, Dalen, Wiggins, Tooley, Christopher, & Bernard, 2008) Instructions for this item (adapted from BRS (Smith et al., 2008)): “Please indicate the extent to which you agree with each of the following statements:”
	I have a hard time making it through stressful events.	1=Strongly disagree 2=Disagree 3=Neutral 4=Agree 5=Strongly agree	Brief Resilience Scale (BRS) (Smith, Dalen, Wiggins, Tooley, Christopher, & Bernard, 2008) Instructions for this item (adapted from BRS (Smith et al., 2008)): “Please indicate the extent to which you agree with each of the following statements:”
	It does not take me long to recover from a stressful event.	1=Strongly disagree 2=Disagree 3=Neutral 4=Agree 5=Strongly agree	Brief Resilience Scale (BRS) (Smith, Dalen, Wiggins, Tooley, Christopher, & Bernard, 2008) Instructions for this item (adapted from BRS (Smith et al., 2008)): “Please indicate the extent to which you agree with each of the following statements:”
	It is hard for me to snap back when something bad happens.	1=Strongly disagree 2=Disagree 3=Neutral 4=Agree 5=Strongly agree	Brief Resilience Scale (BRS) (Smith, Dalen, Wiggins, Tooley, Christopher, & Bernard, 2008) Instructions for this item (adapted from BRS (Smith et al., 2008)): “Please indicate the extent to which you agree with each of the following statements:”
	I usually come through difficult times with little trouble.	1=Strongly disagree 2=Disagree	Brief Resilience Scale (BRS) (Smith, Dalen, Wiggins, Tooley, Christopher, & Bernard, 2008)

		<p>3=Neutral 4=Agree 5=Strongly agree</p>	<p>Instructions for this item (adapted from BRS (Smith et al., 2008)): "Please indicate the extent to which you agree with each of the following statements:"</p>
	<p>I tend to take a long time to get over set-backs in my life.</p>	<p>1=Strongly disagree 2=Disagree 3=Neutral 4=Agree 5=Strongly agree</p>	<p>Brief Resilience Scale (BRS) (Smith, Dalen, Wiggins, Tooley, Christopher, & Bernard, 2008)</p> <p>Instructions for this item (adapted from BRS (Smith et al., 2008)): "Please indicate the extent to which you agree with each of the following statements:"</p>

(14) PERSISTENCE AND RETENTION

Academic Experiences and Goals

The next questions will ask you about your experiences as a student, your academic goals, and factors that may affect your classroom performance. Remember that your responses are confidential and you may choose to skip questions or stop responding at any point.

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
Overall academic experience	How much do you agree with the following statement?: If I could make my choice over, I would still choose to enroll at my school.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	
	How much do you agree with the following statement?: I am confident that I will be able to finish my degree no matter what challenges I may face.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	Display if “Non-degree student” not selected for “In what degree program are you currently enrolled?”
	Which of the following challenges are most likely to prevent you from finishing your degree? (Select all that apply)	1=Financial challenges 2=Mental or emotional health problems 3=Other health problems (not directly related to mental or emotional health) 4=Family obligations 5=Family or relationship difficulties 6=Academic challenges (struggling to pass classes) 7=[if not U.S. citizen, ask→Visa or other challenges related to being a non-U.S. citizen] 8=Lack of motivation or desire 9=Work or professional commitments 10=Career opportunities 11=Other challenge(s) (please specify)	
	What is the highest degree you plan to pursue?	1=2-year college degree (associate’s) 2=4-year college degree (bachelor’s) 3=Master’s degree 4=Doctoral degree (JD, MD, PhD, etc.) 5=Other degree (please specify) 6=Don’t know	
	How much do you agree with the following statement?: I have doubts about whether [college/graduate school] is worth the time, money, and effort that I’m spending on it.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	
	How much do you agree with the following statement?: My family is very supportive of my educational goals.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	
	How much do you agree with the following statement?: My professors believe in my potential to succeed academically.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree	

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
		6=Strongly disagree	
	How has it been to adjust to the academic demands of [college/graduate school] since you began as a student at your school?	1=Very easy 2=Easy 3=Somewhat easy 4=Somewhat difficult 5=Difficult 6=Very difficult	
	Have you decided to pursue a different major since you began as a student at your school?	1=Yes 0=No	
	Have you failed one or more courses since you began as a student at your school?	1=Yes 0=No	
	How often have you turned in course assignments late since you began as a student at your school?	1=Everyday or nearly everyday 2=2 to 3 times per week 3=Once per week 4=1 to 2 times per month 5=1 to 2 times per semester 6=Never	
	How often have you fallen asleep in class since you began as a student at your school?	1=Everyday or nearly everyday 2=2 to 3 times per week 3=Once per week 4=1 to 2 times per month 5=1 to 2 times per semester 6=Never	
Experiences with faculty and academic support services	How often have you utilized academic support services (e.g., a writing center, tutor, etc.) since you began as a student at your school?	1=Everyday or nearly everyday 2=2 to 3 times per week 3=Once per week 4=1 to 2 times per month 5=1 to 2 times per semester 6=Never	
	How often have you interacted with faculty during office hours since you began as a student at your school?	1=Everyday or nearly everyday 2=2 to 3 times per week 3=Once per week 4=1 to 2 times per month 5=1 to 2 times per semester 6=Never	
	How often have you interacted with faculty outside of class or office hours (e.g., by phone, email, text, or in person) since you began as a student at your school?	1=Everyday or nearly everyday 2=2 to 3 times per week 3=Once per week 4=1 to 2 times per month 5=1 to 2 times per semester 6=Never	
	How often have you interacted with academic advisors/counselors (e.g., by phone, email, text, or in person) since you began as a student at your school?	1=Everyday or nearly everyday 2=2 to 3 times per week 3=Once per week 4=1 to 2 times per month 5=1 to 2 times per semester 6=Never	
	How often have you interacted with graduate students/teaching assistants (e.g., by phone, email, text, or in person) since you began as a student at your school?	1=Everyday or nearly everyday 2=2 to 3 times per week 3=Once per week 4=1 to 2 times per month 5=1 to 2 times per semester 6=Never	
Overall social experience	How satisfied are you with your overall social and extracurricular experiences at your school?	1=Very dissatisfied 2=Dissatisfied	

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
		3=Somewhat dissatisfied 4=Somewhat satisfied 5=Satisfied 6=Very satisfied	
	How has it been to develop close friendships with other students at your school?	1=Very easy 2=Easy 3=Somewhat easy 4=Somewhat difficult 5=Difficult 6=Very difficult	
	How has it been to manage your time effectively since you began as a student at your school?	1=Very easy 2=Easy 3=Somewhat easy 4=Somewhat difficult 5=Difficult 6=Very difficult	
Issues affecting academic performance	In the past year, how has the following affected your academic performance?: (Select all that apply) Anxiety/stress	1=I did not experience this. 2=I experienced this but it did not affect my academic performance. 3=I received a lower grade on one or more exams or projects. 4=I received a lower grade in one or more courses. 5=I received an incomplete or dropped one or more courses. 6= I had a significant disruption in research, practicum, thesis, or dissertation work. 7=Other	
	In the past year, how has the following affected your academic performance?: (Select all that apply) Depression/suicidality	1=I did not experience this. 2=I experienced this but it did not affect my academic performance. 3=I received a lower grade on one or more exams or projects. 4=I received a lower grade in one or more courses. 5=I received an incomplete or dropped one or more courses. 6= I had a significant disruption in research, practicum, thesis, or dissertation work. 7=Other	
	In the past year, how has the following affected your academic performance?: (Select all that apply) Eating/body image concern	1=I did not experience this. 2=I experienced this but it did not affect my academic performance. 3=I received a lower grade on one or more exams or projects. 4=I received a lower grade in one or more courses. 5=I received an incomplete or dropped one or more courses. 6= I had a significant disruption in research, practicum, thesis, or dissertation work. 7=Other	
	In the past year, how has the following affected your academic performance?: (Select all that apply) Attention disorder or learning disability (e.g., attention deficit disorder, attention deficit	1=I did not experience this. 2=I experienced this but it did not affect my academic performance.	

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
	hyperactivity disorder, learning disability)	3=I received a lower grade on one or more exams or projects. 4=I received a lower grade in one or more courses. 5=I received an incomplete or dropped one or more courses. 6= I had a significant disruption in research, practicum, thesis, or dissertation work. 7=Other	
	In the past year, how has the following affected your academic performance?: (Select all that apply) Alcohol/substance use	1=I did not experience this. 2=I experienced this but it did not affect my academic performance. 3=I received a lower grade on one or more exams or projects. 4=I received a lower grade in one or more courses. 5=I received an incomplete or dropped one or more courses. 6= I had a significant disruption in research, practicum, thesis, or dissertation work. 7=Other	
	In the past year, how has the following affected your academic performance?: (Select all that apply) Physical health condition	1=I did not experience this. 2=I experienced this but it did not affect my academic performance. 3=I received a lower grade on one or more exams or projects. 4=I received a lower grade in one or more courses. 5=I received an incomplete or dropped one or more courses. 6= I had a significant disruption in research, practicum, thesis, or dissertation work. 7=Other	
	In the past year, how has the following affected your academic performance?: (Select all that apply) Physical assault	1=I did not experience this. 2=I experienced this but it did not affect my academic performance. 3=I received a lower grade on one or more exams or projects. 4=I received a lower grade in one or more courses. 5=I received an incomplete or dropped one or more courses. 6= I had a significant disruption in research, practicum, thesis, or dissertation work. 7=Other	
	In the past year, how has the following affected your academic performance?: (Select all that apply) Sexual assault	1=I did not experience this. 2=I experienced this but it did not affect my academic performance. 3=I received a lower grade on one or more exams or projects. 4=I received a lower grade in one or more courses. 5=I received an incomplete or dropped one or more courses. 6= I had a significant disruption in research, practicum, thesis, or dissertation work.	

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
		7=Other	

(15) FINANCIAL STRESS

Financial Stress

The next questions will ask you about your financial situation and ways in which this may be impacting your college experience. Remember that your responses are confidential and you may choose to skip questions or stop responding at any point.

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
Socioeconomic status	How would you describe your financial situation while growing up?	1=Always stressful 2=Often stressful 3=Sometimes stressful 4=Rarely stressful 5=Never stressful	SDS58
	How would you describe your financial situation right now?	1=Always stressful 2=Often stressful 3=Sometimes stressful 4=Rarely stressful 5=Never stressful	SDS57
	On a scale from 0 (much poorer) to 10 (much wealthier), how do you think your socioeconomic status compares relative to other students at your school?	1=0=Much poorer than most students at my school 2=1 3=2 4=3 5=4 6=5=Average (about 50% of students are poorer and about 50% are wealthier than me) 7=6 8=7 9=8 10=9 11=10=Much wealthier than most students at my school	
	How much do you agree with the following statement?: Other students at my school are able to do things that I cannot afford to do.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	
Financing education	How much do you agree with the following statement?: I am worried about my ability to pay for school.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	
	How much of the past year's educational expenses (room, board, tuition, and fees) were covered by family resources (parents, relatives, spouse, etc.)?	1=None 2=\$1-\$2,999 3=\$3,000-\$5,999 4=\$6,000-\$9,999 5=\$10,000-\$14,999 6=\$15,000 or more 7=Don't know	
	How much of the past year's educational expenses (room, board, tuition, and fees) were covered by your own resources (income from work, work-study, etc.)?	1=None 2=\$1-\$2,999 3=\$3,000-\$5,999 4=\$6,000-\$9,999 5=\$10,000-\$14,999 6=\$15,000 or more 7=Don't know	

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
	How much of the past year's educational expenses (room, board, tuition, and fees) were covered by aid that need not be repaid (grants, scholarships, military, etc.)?	1=None 2=\$1-\$2,999 3=\$3,000-\$5,999 4=\$6,000-\$9,999 5=\$10,000-\$14,999 6=\$15,000 or more 7=Don't know	
	How much of the past year's educational expenses (room, board, tuition, and fees) were covered by aid that must be repaid (loans)?	1=None 2=\$1-\$2,999 3=\$3,000-\$5,999 4=\$6,000-\$9,999 5=\$10,000-\$14,999 6=\$15,000 or more 7=Don't know	
	How much of the past year's educational expenses (room, board, tuition, and fees) were covered by other sources?	1=None 2=\$1-\$2,999 3=\$3,000-\$5,999 4=\$6,000-\$9,999 5=\$10,000-\$14,999 6=\$15,000 or more 7=Don't know	

SURVEY ENDINGS:

[SURVEY ENDING #1: CONSENT/ASSENT NOT GRANTED]

Because you have not [consented/assented] to complete the survey you may now close your browser.

[\[local resources\]](#)

If you would like to learn more about the Healthy Minds Study, you can visit healthymindsnetwork.org/hms.

[SURVEY ENDING #2, PART 1: SURVEY COMPLETERS, FEEDBACK]

You're almost done!

You answered several questions in this survey that are part of commonly used screening tools to help determine symptom levels and risk for various mental health problems. Please indicate whether you'd like to view your personalized feedback page (which includes scores on screening tools pertaining to Depression, Anxiety, and Eating Disorders. As with all screening instruments, the results (phrases and numbers) correspond simply to your pattern of responding and are compared to other people who have taken the instrument. This screening is not a substitute for a clinical evaluation and is not an actual diagnosis, and only suggests that compared to other people you MAY have the presence of mental health symptoms. You should contact a health professional for more information and a complete evaluation, if you are interested, by consulting the resources noted for your campus.

"Yes, I'd like to view my personalized feedback page"

"No, I would not like to view my personalized feedback page"

[DISPLAY IF ITEM ABOVE ANSWERED "YES"]

Below is some personalized feedback based on your responses. Once you have read this information, please click "CONTINUE" to submit the survey and view a list of resources.

The Healthy Minds Study includes several commonly used screening tools that are used to determine symptom levels and risk for various mental health problems. Note that these results are not diagnoses but we hope they will help put things in perspective for you. To print this feedback page, please feel free to right-click the page and click "print". Here's what your responses indicate:

Depression: You answered a series of 9 questions used to assess symptoms of depression. Scores range from 0 to 27, with higher scores indicating higher levels of depression. Scores are interpreted as follows: 0-4 "no signs of depression", 5-9 "mild depression", 10-14 "moderate depression", 15-19 "moderately severe depression", and 20-27 "severe depression". Your score is [\[insert score\]](#).

Anxiety: You answered a series of 7 questions used to assess symptoms of anxiety. Scores range from 0 to 21, with higher scores indicating higher levels of anxiety. Scores are interpreted as follows: 0-4 "no signs of anxiety", 5-9 "mild anxiety", 10-14 "moderate anxiety", and 15-21 "severe anxiety". Your score is [\[insert score\]](#).

Eating disorder: You answered a series of 5 questions used to assess symptoms of eating disorders. Scores range from 0 to 5, with higher scores indicating higher levels of disordered eating. A score of 2 or higher is considered a positive screen for an eating disorder. Your score is [\[insert score\]](#).

[if reported suicidal ideation→Because you indicated that you have had suicidal thoughts or attempts in the past year, we are especially concerned about whether you are receiving the support you may need. We urge you to consider the resources shown below and on the next page if you are not already receiving help.

National Suicide Prevention Lifeline

Phone: 1-800-273-TALK

Website: www.suicidepreventionlifeline.org

The National Suicide Prevention Lifeline is a 24-hour, toll-free, confidential suicide prevention hotline available to anyone in suicidal crisis or emotional distress.]

[SURVEY ENDING #2, PART 2A: SURVEY COMPLETERS (LOW-RISK), RESOURCES]

Thank you for completing the Healthy Minds Study!

As stated before you began the survey, all of your responses will remain confidential. Your participation will help inform programs and resources for [\[name of school\]](#) students. We also hope that taking this survey has been a valuable experience for you. Below is a list of resources. If you'd like to save this information, please print this page from your web browser now by right-clicking this page and clicking "print". Please click **HERE** if you wish to print a copy of the consent form.

HMS, ACADEMIC YEAR 2016-2017

Also, you have been automatically entered into a sweepstakes for 1 of 2 \$500 prizes or 1 of 10 \$100 prizes. The drawing will be conducted by researchers at the University of Michigan School of Public Health in Ann Arbor, Michigan in summer 2017. Winners will be notified by email and provided with information about how to collect the prize.

[Insert school's custom incentives if applicable]

Resources:

[local resources]

Other resources:

National Sexual Assault Online Hotline

Website: <https://ohl.rainn.org/online/>

If you would like to learn more about the Healthy Minds Study, you can visit healthymindsnetwork.org/hms. To provide feedback about this survey, please email the researchers at healthyminds@umich.edu or [local contact information].

[SURVEY ENDING #2, PART 2B: SURVEY COMPLETERS (HIGH-RISK: DEPRESSION \geq 10, ANXIETY \geq 10, AND/OR EATING DISORDER \geq 2, Suicidal ideation), RESOURCES]

Thank you for completing the Healthy Minds Study!

As stated before you began the survey, all of your responses will remain confidential. Your participation will help inform programs and resources for [name of school] students. We also hope that taking this survey has been a valuable experience for you. Based on your previous responses, you might find it helpful to speak with a trained professional about the topics addressed in this survey. There are resources available for you at [name of school]. Below is a list of resources. If you'd like to save this information, please print this page from your web browser now by right-clicking this page and clicking "print". Please click **HERE** if you wish to print a copy of the consent form.

Also, you have been automatically entered into a sweepstakes for 1 of 2 \$500 prizes or 1 of 10 \$100 prizes. The drawing will be conducted by researchers at the University of Michigan School of Public Health in Ann Arbor, Michigan in summer 201#. Winners will be notified by email and provided with information about how to collect the prize.

[Insert school's custom incentives if applicable]

Campus/local resources:

[local resources]

Other resources:

Crisis Text Line

Website: www.crisistextline.org/

Crisis Text Line serves anyone in any type of crisis, providing them access to free, confidential 24/7 emotional support and counseling they need via text.

Text HEALTH to 741-741.

National Sexual Assault Online Hotline

Website: <https://ohl.rainn.org/online/>

National Eating Disorder Association

Phone: 1-800-931-2237

Website: www.nationaleatingdisorders.org

The National Eating Disorders Association (NEDA) is the leading non-profit organization in the United States advocating on behalf of and supporting individuals and families affected by eating disorders.

ULifeline

Website: www.ulifeline.org

Online resource for college mental health.

If you would like to learn more about the Healthy Minds Study, you can visit healthymindsnetwork.org/hms. To provide feedback about this survey, please email the researchers at healthyminds@umich.edu or [local contact information].