

THE HEALTHY MINDS STUDY (HMS): QUESTIONNAIRE MODULES**MENU OF MODULES:****Student Version:**

	<i>Standard Modules¹</i>	Page Number	Number of Items	Estimated Completion Time
(1)	Demographics	4-17	25-34	6 minutes
(2)	Mental Health Status	18-26	44-80	9 minutes
(3)	Mental Health Service Utilization/Help-Seeking	27-38	12-62	5 minutes
	<i>Elective Modules²</i>			
(4)	Substance Use	39-43	37-32	5 minutes
(5)	Eating and Body Image	44-48	32-38	3 minutes
(6)	Assault and Abuse	49-53	31-43	5 minutes
(7)	Overall Health	54-57	11-26	3 minutes
(8)	Knowledge and Attitudes about Mental Health and Mental Health Services	58-60	38-40	4 minutes
(9)	Upstander/Bystander Behaviors	61-62	11-13	2 minutes
(10)	Mental Health Climate	63	14	2 minutes
(11)	Climate for Diversity and Inclusion	64-68	42-45	8 minutes
(12)	Academic Persistence, Retention, and Competition	69-72	39-43	6 minutes
(13)	Resilience and Coping	73	13	2 minutes
(14)	Financial Stress	74-75	16-17	2 minutes
(15)	Student Athletes	76-78	34-38	4 minutes
(16)	Peer Support	79-82	14-28	3 minutes
(17)	Public Safety and Policing	83-86	27-34	5 minutes
(18)	Black College Student Mental Health	87-92	23	8 minutes
(19)	Knowledge and Attitudes about Artificial Intelligence	93-97	51	8 minutes
	<i>Special Modules³</i>			
(19)	MHICC Module	98-109	47-80	18 minutes

Faculty and Staff Version:

	<i>Standard Modules¹</i>	Page Number	Number of Items	Estimated Completion Time
(1)	Demographics	110-113	13-22	4 minutes
(2)	Faculty & Staff Wellbeing	114-118	47-53	7 minutes
(3)	Mental Health Service Utilization, Support, & Help-Seeking	119-122	12-18	3 minutes
(4)	Supporting Students	123-126	17-23	4 minutes
(5)	Campus Climate	127-128	19-20	4 minutes

Additional Questions: [Custom Question Bank](#)

Notes: ¹Standard modules are fielded at all participating institutions. The standard modules include a limited number of questions spanning the majority of the elective module topics, in addition to providing rich data on participants' demographics, mental health status, and help-seeking behaviors.

²Elective modules are chosen by participating institutions from the options listed above. To ensure that the overall survey (*standard modules+elective modules*) remains reasonable in length, participating institutions typically choose 1 elective module per survey (*schools may have multiple surveys sent to different randomly or non-randomly chosen subsamples*).

³Special modules are those given to schools that register for HMS through a special cohort. The MHICC module, developed with Mental Health Improvement through Community Colleges (MHICC; PI: Dr. Shawna Smith; HUM00193791) will be given to participants at schools that have enrolled with HMS as a part of the MHICC Cohort, and the questions were adapted/developed for students at Community Colleges.

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 participants 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 participants, the 'Demographics' module is always first, followed by the 'Mental Health Status' module and then the 'Mental Health Service Utilization/Help-Seeking' 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.

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 participants at the beginning of that module. For example, participants 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 participants 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 participants with certain responses to survey items). Follow-up questions dependent on display logic are 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 participants to "Select all that apply". In some cases, one of the response options is 'mutually exclusive' meaning that a participant 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.

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 'Eating and Body Image' module, a small number of items about eating and body image are included in the 'Mental Health Status' module. If an institution does select the 'Eating and Body Image' module, the items about eating and body image are not included in the 'Mental Health Status' module (because eating and body image are being assessed separately in more detail through the 'Eating and Body Image' module).

Finally, certain items within the standard modules are fielded randomly to students. This is indicated in the questionnaire by "RANDOM #" in the 'Citation/Notes' column. Randomized items are fielded to ~50% of participants. When taking the survey, participants are assigned a random number between 0 and 1 by Qualtrics. If the random number is less than or equal to .5, they will receive one set of randomized questions (indicated with "**RANDOM 1**"), and all others will receive the second set (indicated with "**RANDOM 2**")

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	NOTES/CITATION
Age	How old are you? (You must be 18 years or older to complete this survey.)	1= _____ years old	
	Please select all that apply to you and your gender identity:	1=Man 2=Woman 5=Genderqueer/Gender non-confirming 6=Self identify (please specify) 7=Gender non-binary 3=Transgender 8=Prefer not to respond	
Sex/gender/sexuality	What sex were you assigned at birth?	1=Female 2=Male 3=Intersex	
	How would you describe your sexual orientation? (Select all that apply)	1=Heterosexual 2=Lesbian 3=Gay 4=Bisexual 5=Queer 6=Questioning 7=Self-identify (please specify) 8=Asexual 9=Pansexual 10=Prefer not to respond [mutually exclusive]	
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/Latine 5=Native Hawaiian or Pacific Islander 6=Middle Eastern, Arab, or Arab American 7=White 8=Self-identify (please specify)	
	Which group best represents your race/ethnicity? (Select all that apply)	1=African 2=African American 3=Caribbean/West Indian 4=Afro-Latina/o/x	Display if "1=African American/Black" is selected for "What is your race/ethnicity?"

		5=Other (please describe)	
	Which group best represents your race/ethnicity? (Select all that apply)	1=East Asian (e.g., Chinese, Japanese, Korean, Taiwanese) 2=Southeast Asian (e.g., Cambodian, Vietnamese, Hmong) 3=South Asian (e.g., Indian, Pakistani, Nepalese, Sri Lankan) 4=Filipino 5=Other (please describe)	Display if "3=Asian American/Asian" is selected for "What is your race/ethnicity?"
	Which group best represents your race/ethnicity? (Select all that apply)	1=Mexican/Mexican American 2=Central American 3=South American 4=Caribbean 5= Spain/Portugal 6=Other (please describe)	Display if "4=Hispanic/Latin(x) is selected for "What is your race/ethnicity?"
Citizenship	Are you an international student?	1=Yes 0=No	
Citizenship	What is your citizenship status in the U.S.? (Select all that apply)	1=US Citizen 2=Permanent Resident/Green Card Holder 3=Temporary Resident/Green Card Holder 4=A visa holder (F-1, J-1, H1-B, A, L, G, E, and TN) 5=Temporary Protected Status (TPS) 6=Deferred Action for Childhood Arrivals (DACA) 7=Refugee 8=Other legally documented status (e.g., adjustment of status to permanent Resident) (please specify) 9=I don't know [mutually exclusive] 10=I don't feel comfortable identifying my citizenship status in the U.S. [mutually exclusive] 11=Undocumented	RANDOM 1
Citizenship/Place of Birth	At what age did you first come to live in the U.S.?	1=U.S.-born 2=Less than 12 years 3=12-17 years 4=18-35 years 5=More than 35 years	RANDOM 2 Instructions: "The following questions will ask you about your background, including your citizenship status. At no time will you be identified through this data and your citizenship status will never be shared with your school for any reason."
	In what country or region were you born?	156=United States of America 1=Afghanistan 2=Albania 158=Algeria 159=Andorra 3=Angola 160=Anguilla 4=Antigua and Barbuda	RANDOM 2 Adapted for non-U.S. colleges and universities Display if "U.S.-born" is not selected

	<p>5=Argentina 6=Armenia 161=Aruba 7=Australia 8=Austria 9=Azerbaijan 10=Bahamas 11=Bahrain 12=Bangladesh 13=Barbados 14=Belarus 15=Belgium 16=Belize 162=Benin 163=Bermuda 164=Bhutan 17=Bolivia 18=Bosnia and Herzegovina 165=Botswana 19=Brazil 166=British Virgin Islands 20=Brunei 21=Bulgaria 167=Burkina Faso 23=Burundi 24=Cambodia 25=Cameroon 26=Canada 168=Cape Verde 169=Cayman Islands 27=Central African Republic 28=Chad 29=Chile 30=China 31=Colombia 170=Comoros 32=Congo 171=Cook Islands 33=Costa Rica 34=Côte d'Ivoire 35=Croatia 157=Cuba 172=Curaçao</p>	
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		36=Cyprus 37=Czech Republic 38=Denmark 173=Djibouti 39=Dominica 40=Dominican Republic 41=Ecuador 42=Egypt 43=El Salvador 174=Equatorial Guinea 175=Eritrea 44=Estonia 45=Ethiopia 176=Fiji 46=Finland 47=France 177=French Polynesia 48=Gabon 49=Gambia 50=Gaza Strip 51=Georgia 52=Germany 53=Ghana 54=Greece 178=Greenland 179=Grenada 55=Guatemala 56=Guinea 180=Guinea-Bissau 57=Guyana 58=Haiti 59=Honduras 60=Hungary 61=Iceland 62=India 63=Indonesia 64=Iran 65=Iraq 66=Ireland 67=Israel 68=Italy 69=Jamaica 70=Japan	
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		71=Jordan 72=Kazakhstan 73=Kenya 131=Kingdom of Eswatini 181=Kiribati 76=Kosovo 77=Kuwait 78=Kyrgyzstan 79=Lao People's Democratic Republic 80=Latvia 81=Lebanon 182=Lesotho 183=Liberia 82=Libya 184=Liechtenstein 83=Lithuania 84=Luxembourg 86=Madagascar 87=Malawi 88=Malaysia 185=Maldives 89=Mali 186=Malta 187=Marshall Islands 90=Mauritania 91=Mauritius 188=Melanesia 92=Mexico 189=Micronesia 93=Moldova 190=Monaco 94=Mongolia 191=Montenegro 192=Montserrat 95=Morocco 96=Mozambique 22=Myanmar 97=Namibia 193=Nauru 98=Nepal 99=Netherlands 194=New Caledonia 100=New Zealand	
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		101=Nicaragua 195=Niger 102=Nigeria 74=North Korea, Democratic People's Republic of Korea 85=North Macedonia 103=Norway 104=Oman 105=Pakistan 196=Palau 106=Palestine 107=Panama 197=Papua New Guinea 108=Paraguay 109=Peru 110=Philippines 111=Poland 198=Polynesia 112=Portugal 199=Puerto Rico 113=Qatar 114=Romania 115=Russian Federation 200=Rwanda 116=Saint Kitts and Nevis 117=Saint Lucia 201=Saint Vincent and the Grenadines 202=Samoa 203=San Marino 204=Sao Tome and Principe 118=Saudi Arabia 119=Senegal 120=Serbia 205=Seychelles 121=Sierra Leone 122=Singapore 123=Slovakia 124=Slovenia 206=Solomon Islands 125=Somalia 126=South Africa 75=South Korea, Republic of Korea 207=South Sudan 127=Spain	
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		128=Sri Lanka 129=St Vincent and the Grenadines 130=Sudan 208=Suriname 132=Sweden 133=Switzerland 134=Syrian Arab Republic 135=Taiwan 209=Tajikistan 136=Tanzania 137=Thailand 210=Timor-Leste 211=Togo 212=Tonga 138=Trinidad and Tobago 139=Tunisia 140=Turkey 141=Turkmenistan 213=Turks and Caicos Islands 214=Tuvalu 142=Uganda 143=Ukraine 144=United Arab Emirates 145=United Kingdom of Great Britain and Northern Ireland 146=Uruguay 147=Uzbekistan 215=Vanuatu 148=Venezuela 149=Vietnam 150=West Bank 151=Yemen 152=Yugoslavia 153=Zambia 154=Zimbabwe 155=Other (please specify in the following question)	
	Please specify in which country you were born.	[open text]	Display if "Other" is selected for "In which country were you born?"
State Residency	Before coming to college, in what state(s) did you live?	Fill-in table with columns: high school grade (e.g., 9 th , 10 th , 11 th , 12 th), state of residence, academic year (e.g., 2022-23)	Display if "1=US Citizen" is selected for "What is your citizenship status in the U.S.?" AND if respondent's age is between 18 and 24

	For each year you were in high school (9 th -12 th grade), please list the state you lived in and the years you were in that grade		Matrix table with 9th through 12th grade, with drop-down options for state.
Curriculum Policies	In your high school sex education , how would you describe your teacher’s comments about: Transgender, nonbinary and gender diverse people Gay, lesbian, bisexual and queer people	1=Very negative 2=Somewhat negative 3=Neither positive nor negative 4=Somewhat positive 5=Very positive 6=My teacher never talked about this in my high school sex education 7=I did not have sex education at my high school 8=I don’t know	Display if respondent’s age is between 18 and 24 Matrix table with 2 categories
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	Included if ‘Financial Stress’ module not selected CCMH Standardized Data Set
	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	Included if ‘Financial Stress’ module not selected CCMH Standardized Data Set
	Within the past 12 months I was worried whether our food would run out before we got money to buy more.	1=Never true 2=Sometimes true 3=Often true	Included if ‘Financial Stress’ module not selected Adapted from HagerER, Quigg AM, Black MM, et al. Development and validity of a 2-item screen to identify families at risk for food insecurity. Pediatrics. 2010;126(1):26.
	Within the past 12 months I was worried about not having stable housing.	1=Never true 2=Sometimes true 3=Often true	Included if ‘Financial Stress’ module not selected Display definition: “Not having stable housing includes sleeping in vehicles, motels, campgrounds, homeless shelters, single-occupancy facilities, or couches in other people’s homes because you had nowhere else to go.” Definition taken from: https://regents.universityofcalifornia.edu/regmeet/jan20/s3attach.pdf

	<p>What is the highest level of education completed by your parents, step-parents, or guardians?</p> <p>Parent/Guardian 1 Parent/Guardian 2</p>	<p>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) 9=Technical diploma or certificate 5=Associate's degree 6=Bachelor's degree 7=Graduate degree 8=Don't know</p>	<p>Matrix table with 2 statements.</p>
Academic information	<p>In what academic or degree program are you currently enrolled? (Select all that apply)</p>	<p>1=Associate's 2=Bachelor's 3=Master's 4=JD 5=MD 6=PhD (or equivalent doctoral program) 8=Other (please specify) 9=Non-degree student [mutually exclusive] 10=Technical diploma or certificate 11=License 12=Apprenticeship 13=Continuing education 14=Non-credit program</p>	
	<p>Are you a recipient of a Pell grant or Pell eligible?</p>	<p>1=Yes 0=No 2=I don't know</p>	
Extracurricular activities	<p>What activities do you currently participate in at your school? (Select all that apply)</p>	<p>1=Academic or pre-professional organization 2=Athletics (intercollegiate varsity) 3=Athletics (club) 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=Honors organization 18=Advocacy groups</p>	

		19=Other (please specify) 20=None [mutually exclusive]	
	With which council is your fraternity/sorority affiliated?	1=Interfraternity Council (IFC) 2=Multicultural Greek Council (MGC) 3=National Association of Latin Fraternal Organizations (NALFO) 4=National Asian Pacific Islander Desi American Panhellenic Association (NAPA) 5=National Multicultural Greek Council (NMGC) 6=National Pan-Hellenic Council (NPHC) 7=Panhellenic Council (CPC, NPC, PHA, PHC) 8=Other (please specify)	Display if "8=Fraternity or sorority" is selected for "What activities do you currently participate in at your school?"
	How are you taking your classes at this time?	1=All in-person 2=Hybrid (both in-person and online) 3=All online 4=Other (please specify)	RANDOM 1
	Did you transfer from another campus/institution to this school?	1=Yes, I transferred from a community, junior, or technical college. 2=Yes, I transferred from a 4-year college or university. 3=No	Display if "2=Bachelor's" is selected for "In what degree program are you currently enrolled?"
	What year are you in your current academic program?	1=1st year 2=2nd year 3=3rd year 4=4th year 5=5th year 6=6th year 7=7th+ year	
	What is your enrollment status?	1=Full-time student 2=Part-time student 3=Other (please specify)	
	What is your field of study? (Select all that apply)	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, theater, or dance 13=Nursing	Do not display for Technical Colleges

		<p>14=Pharmacy 15=[if undergraduate, ask→Pre-professional (pre-business, pre-health, pre-law)] 16=Public health 17=Public policy 18=Social work 21=Library/Information Sciences 19=[if undergraduate, ask→Undecided] [mutually exclusive] 20=Other (please specify)</p>	
	<p>What is your field of study?</p>	<p>1=Natural sciences (agriculture, environment, etc) 2=Architecture or Urban planning 5=Construction (plumbing, electrical, HVAC, etc) 6=Business (entrepreneurship, marketing, etc) 7=Dentistry (dental hygienist, dental assisting) 8=Education 9=Manufacturing (CAD/CAM, industrial automation, robotics, machining, composites, welding/fabrication, etc.) 10=Automotive Technology 12= Health Sciences (pharmacy technology, medical assisting, medical coding/billing, lab technology, phlebotomy, emergency medicine, etc.) 13=Nursing 14=Culinary Arts/Food Processing 16=Criminal Justice and Policy 17=Veterinary Science 18=Hospitality 19=Engineering 20=Computer Sciences (web Design, programming, cyber security, data security, IT, etc.) 22=Finance (accounting, payroll assistant, etc) 23=Human Services 24=Animation 25=Film/Media/Video 26=Design (game, graphic, interior, etc) 27=Cosmetology 28=Fashion 29=Library and Information Sciences 30=Photography 31=Other (please specify)</p>	<p>Display only for Technical Colleges</p>
	<p>On average, what grades do you earn in classes? (Select up to two answers)</p>	<p>1=Mostly A's 2=Mostly B's 3=Mostly C's 4=Mostly D's</p>	<p>Do not display for Technical Colleges</p>

		5=Mostly F's 6=None of these [mutually exclusive] 7=No grade or don't know [mutually exclusive]	
	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	Included if 'Persistence and Retention' module not selected
Housing	What is your current living situation?	1=I have a steady place to live 2=I have a place to live today, but I am worried about losing it in the future 3=I do not have a steady place to live (e.g. I am temporarily staying with others, in a hotel, in a shelter, living outside on the street, on a beach, in a car, abandoned building, bus or train station, or in a park) 4=Other (please specify)	
	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=Off-campus, with my parent(s)/guardian(s) (or relatives) 7=Other (please specify) 8=I am currently houseless / homeless	Do not display for Technical Colleges
Housing Instability	In the past 12 months, have you slept in any of the following places? Please select all that apply.	5=At a shelter 6=At a hotel or motel 7=A transitional housing or independent living program 8=A group home such as a halfway house or residential program for mental health or substance abuse 9=At a treatment center (such as detox, hospital, etc.) 10=An outdoor location (such as street, sidewalk, or alley; bus or train stop; campground or woods, park, beach, or riverbed; under a bridge or overpass; or other) 11=In a closed area/space with a roof not meant for human habitation (such as an abandoned building; car, truck, van, RV or camper; encampment or tent; unconverted garage, attic, or basement, etc.)	Display if "I do not have a steady place to live" is selected for "What is your current living situation?" OR "I am currently houseless / homeless" is selected for "Where do you currently live?"
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)

	<p>How much do you agree with the following statement?</p> <p>At my school, I feel that students' mental and emotional well-being is a priority.</p>	<p>1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree</p>	<p>Included if 'Mental Health Climate' module not selected</p>
Institutional LGBT Policies	<p>Please select below the policies, programs, or resources that you are aware your college/university has.</p> <p>(Select all that apply)</p>	<p>1=LGBTQ center 2=LGBTQ student organization 3=gender inclusive bathrooms gender inclusive housing options as a standard option available through the on-campus room selection process (defined as housing not segregated into men's and women's spaces--including double and multiple occupancy bedrooms--and welcoming to students who identify outside of the gender binary) 4=nondiscrimination policy that includes protections based on gender identity and expression 5=nondiscrimination policy that includes protections based on sexual orientation 6=policy/procedure allowing students to indicate their preferred name and pronouns on campus records 7=student health insurance coverage for gender-affirming medical care (e.g., hormone replacement therapy) 8=none of the above [mutually exclusive]</p>	<p>Display if respondent's age is between 18 and 24</p> <p>Included if "Climate for Diversity and Inclusion" module not selected</p>
	<p>In the past 12 months, have you been treated unfairly at your school because of any of the following?</p> <p>Your race/ethnicity Your cultural background Your gender Your sexual orientation Your religion For any other reason (if yes, please specify)</p>	<p>1=Yes 2=No</p>	
LGBT Stigma Experienced	<p>In your lifetime, have you personally experienced any exclusionary, intimidating, offensive and/or hostile behavior on the basis of your:</p> <p>Gender identity and/or expression Sexual orientation</p>	<p>1=Yes 2=No</p>	<p>Display if respondent's age is between 18 and 24</p> <p>Matrix table with 2 categories</p>
	<p>Over the past 12 months at your college/university, have you personally</p>	<p>1=Yes 2=No</p>	<p>Display if respondent's age is between 18 and 24</p>

	<p>experienced any exclusionary, intimidating, offensive and/or hostile behavior on the basis of your:</p> <p>Gender identity and/or expression Sexual orientation</p>		
<p>LGBT Stigma Observed</p>	<p>Over the past 12 months at your college/university, have you observed any exclusionary, intimidating, offensive and/or hostile behavior towards a person or group of people for either of the following reasons?</p> <p>Gender identity and/or expression Sexual orientation</p>	<p>1=Yes 2=No</p>	<p>Display if respondent's age is between 18 and 24</p>

(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	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 lead a purposeful and meaningful life. My social relationships are supportive and rewarding. I am engaged and interested in my daily activities. I actively contribute to the happiness and well-being of others. I am competent and capable in the activities that are important to me. I am a good person and live a good life. I am optimistic about my future. People respect me.	1=Strongly disagree 2=Disagree 3=Slightly disagree 4=Mixed or neither agree nor disagree 5=Slightly agree 6=Agree 7=Strongly agree	Matrix table with 8 statements. Flourishing Scale (Diener & Biswas-Diener, 2009)
Depression (PHQ-9)	Over the last 2 weeks, how often have you been bothered by any of the following problems? Little interest or pleasure in doing things Feeling down, depressed or hopeless Trouble falling or staying asleep, or sleeping too much Feeling tired or having little energy Poor appetite or overeating Feeling bad about yourself– or that you are a failure or have let yourself or your family down Trouble concentrating on things, such as reading the newspaper or watching television 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 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	Matrix table with 9 statements. 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	Display if respondent selects anything other than “1=Not at all” for any statement.

			Adapted from Patient Health Questionnaire-9 (Kroenke et al., 2001)
	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? Little interest or pleasure in doing things Feeling down, depressed, or hopeless	1=Not at all 2=Several days 3=More than half the days 4=Nearly every day	RANDOM 2 Matrix table with 2 statements. Adapted from Patient Health Questionnaire-2
Anxiety (GAD-7)	Over the last 2 weeks, how often have you been bothered by the following problems? Feeling nervous, anxious or on edge Not being able to stop or control worrying Worrying too much about different things Trouble relaxing Being so restless that it's hard to sit still Becoming easily annoyed or irritable Feeling afraid as if something awful might happen	1=Not at all 2=Several days 3=Over half the days 4=Nearly every day	Matrix table with 7 statements. 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	Display if "Several days", "Over half the days", or "Nearly every day" are selected for any statement from GAD-7
Academic Impairment	In the past 4 weeks, how many days have you felt that emotional or mental difficulties have hurt your academic performance?	1=None 2=1-2 days 3=3-5 days 4=6 or more days	
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
SDE	Please answer the following questions as honestly as possible. Do you often feel the desire to eat when you are emotionally upset or stressed? Do you often feel that you can't control what or how much you eat? Do you sometimes make yourself throw up (vomit) to control your weight? Are you often preoccupied with a desire to be thinner? Do you believe yourself to be fat when others say you are thin?	1=Yes 0=No	Included if 'Eating and Body Image' module not selected SDE (Maguen et al., 2018)

Psychosis Screen	Please answer the following yes/no questions: Do you ever hear the voice of someone talking that other people cannot hear? Have you ever felt that someone was playing with your mind?	0=No 1=Yes	Matrix table with 2 questions. Two-item screen for early psychosis (Phalen, et al., 2018)
Non-suicidal self-injury	In the past year, have you ever done any of the following with the intent to harm yourself or manage strong emotions? (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."
Suicidality	In the past year, did you ever seriously think about attempting suicide?	1=Yes 2=No	
	In the past year, did you... ... make a plan for attempting suicide? ... attempt suicide?	1=Yes 0=No	Matrix table with 2 questions.
Loneliness	Please answer the following: How often do you feel that you lack companionship? How often do you feel left out? How often do you feel isolated from others?	1=Hardly ever 2=Some of the time 3=Often	Matrix table with 3 questions. UCLA 3-item Loneliness Scale
Sexual assault	Since you began as a student at your school, have you experienced sexual assault?	1=Yes 2=No 3=Don't know [mutually exclusive] 4=Prefer Not to Say	Display if Assault and Abuse Module is not selected
Intimate Partner Violence	Since you began at your school, has someone ever: Physically hurt you? Insulted or talked down to you? Threatened your or someone you care about with harm? Screamed or cursed at you? Harassed, shared private information such as text, images, or videos or demanded/accessed online profiles without permission?	0=No 1=Yes	Matrix table with 4 questions. Adapted from HITS. Sherin KM, Sinacore JM, Li XQ, Zitter RE, Shakil A. HITS: a short domestic violence screening tool for use in a family practice setting. Fam Med 1998; 30(7):508-12.

			Display if Assault and Abuse Module is not selected
	Please select how you know the person or people that treated you the way(s) you've just indicated. (Select all that apply)	1=I didn't know them (stranger) 2=Family member 3=Acquaintance 4=Coworker 5=Employer/supervisor 6=College professor/instructor 7=College staff member 8=Non-romantic friend 9=Casual or first date 10=Current significant other/romantic partner 11=Ex-significant other/romantic partner 12=Medical professional 13=Coach [if inter-collegiate varsity athlete] 14=Teammate [if inter-collegiate varsity athlete] 15=Trainer [if inter-collegiate varsity athlete] 15=Athletic medical staff member [if inter-collegiate varsity athlete] 16=Roommate 14=Do not wish to disclose	Display if selected "Yes, by someone who is not a current or past dating/romantic partner" Display if Assault and Abuse Module is not selected
Racial Trauma	Due to past experience(s) of racially discriminatory acts... ...I often worry too much about different things. ...I often try hard not to think about it or go out of my way to avoid. ...I often fear embarrassment. ...I often feel nervous, anxious, or on edge, especially around certain people. ...I often feel afraid as if something awful might happen. ...I often have nightmares about the past experience or think about it when I do not want to. ...I often have trouble relaxing. ...I often feel numb or detached from others, activities, or my surroundings. ...I often avoid certain activities in which I am the center of attention. ...Due to past experiences of discrimination, I often cannot stop or control my worrying. ...I often find that being embarrassed or looking stupid are one of my worst fears. ...I often become easily annoyed or irritable.	1=1 (Never) 2=2 3=3 4=4 (Often)	Display to students who did not only select "White" for "What is your race/ethnicity?" Matrix table question with 21 statements. Trauma Symptoms of Discrimination Scale, Monnica T. Williams et al., 2018

	<p>...I often feel constantly on guard, watchful, or easily startled, especially around certain people or places.</p> <p>...I often feel so restless that it is hard to sit still.</p> <p>...I feel the world is an unsafe place.</p> <p>...in social situations I feel a rush of intense discomfort, and may feel my heart pounding, muscles tense up, or sweat.</p> <p>...I feel isolated and set apart from others.</p> <p>...I avoid certain situations or speaking to certain people.</p> <p>...I cannot control my emotions.</p> <p>...I am nervous in social situations, and am afraid people will notice that I am sweating, blushing, or trembling.</p> <p>...fear of social situations causes me a lot of problems in my daily functioning.</p>		
Substance use	Over the past 2 weeks, did you drink any alcohol?	1=Yes 0=No	
	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	<p>Definition adapted from National Institute on Alcohol Abuse and Alcoholism</p> <p>Display if "1=Yes" is selected for "Over the past 2 weeks, did you drink any alcohol?"</p>
	Do you use any of the following nicotine-containing products? Select all that apply.	0=None of these [mutually exclusive] 1=Cigarettes 2=Nicotine vape 3=Chewing tobacco 4=Nicotine pouches (i.e., Zyn) 5=Smoking cessation aids (e.g., nicotine patches or gum)	Included if 'Substance Use' module not selected
	On average, about how often do you use the nicotine product(s) you selected? Cigarettes Nicotine vape Chewing tobacco Nicotine pouches Smoking cessation aids (e.g., nicotine patches or gum)	1=Multiple times throughout the day 2=Once a day 3=Once every few days 4=Once a week 5=A few times a month 6=Once a month 7=Less than once a month	<p>Included if 'Substance Use' module not selected</p> <p>Products presented dependent upon if they were selected in "Do you use any of the following nicotine-containing products?"</p>
	Over the past 30 days, have you used any of the following drugs recreationally? (Select all that apply)	1=Cannabis products that contain THC (including smoking, vaping, and edibles) 2=Cocaine (any form, including crack, powder, or freebase) 3=Heroin	<p>Included if 'Substance Use' and 'Overall Health' modules both not selected</p> <p>Display response option "13=Performance enhancers" if "3= Athletics (intercollegiate varsity)" is</p>

		<p>4=Opioid pain relievers (such as Vicodin, OxyContin, Percocet, Demerol, Dilaudid, codeine, hydrocodone, methadone, morphine) without a prescription or more than prescribed</p> <p>5=Benzodiazepines (such as Valium, Ativan, Klonopin, Xanax, Rohypnal (Roofies))</p> <p>6=Methamphetamines (also known as speed, crystal meth, Tina, T, or ice)</p> <p>7=Other stimulants (such as Ritalin, Adderall) without a prescription or more than prescribed</p> <p>8=MDMA (also known as Ecstasy or Molly)</p> <p>9=Ketamine (also known as K, Special K)</p> <p>10=LSD (also known as acid)</p> <p>11=Psilocybin (also known as magic mushrooms, boomers, shrooms)</p> <p>12=Kratom</p> <p>13=Athletic performance enhancers (anything that violates policies set by your school or any athletic governing body)</p> <p>14=Other drugs without a prescription (please specify)</p> <p>15=No, none of these [mutually exclusive]</p>	<p>selected for “What activities do you currently participate in at your school?”</p>
	<p>Over the past 30 days, how often have you used cannabis products containing THC (either smoking, vaping, edibles or otherwise)?</p>	<p>1= Every day</p> <p>2=Nearly every day</p> <p>3=3-4 days per week</p> <p>4=1-2 days per week</p> <p>5=Less than once per week</p>	<p>Included if ‘Substance Use’ and ‘Overall Health’ modules both not selected</p> <p>Display if “Cannabis products containing THC” is selected for “Over the past 30 days, have you used any of the following drugs?(Select all that apply)”</p>
	<p>Please indicate all of the ways you use cannabis products containing THC.</p>	<p>1=Smoking (e.g., joints, pipes, bongs)</p> <p>2=Consuming edible THC products (e.g., gummies, purchased or homemade baked goods)</p> <p>3=Vaping</p>	<p>Display if “Cannabis products” is selected for “Over the past 30 days, have you used any of the following drugs?(Select all that apply)”</p>
Exercise	<p>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)</p>	<p>1=Less than 1 hour</p> <p>6=1-2 hours</p> <p>2=2-3 hours</p> <p>3=3-4 hours</p> <p>4=5 or more hours</p>	<p>RANDOM 2</p> <p>Included ‘Overall Health’ module not selected</p>
Sleep	<p>On average, how many hours of sleep, on average, do you get on weeknights?</p>	<p>Dropdown list: 1-8 or more</p>	<p>RANDOM 1</p> <p>Included if ‘Overall Health’ module not selected</p>
	<p>On average, year, how many hours of sleep, on average, do you get on weekend nights?</p>	<p>Dropdown list: 1-8 or more</p>	<p>RANDOM 1</p> <p>Included if ‘Overall Health’ module not selected</p>

	Have you ever participated in sports betting?	1=Yes 0=No	RANDOM 1
	How often have you used online sportsbook applications (e.g., Draftkings, FanDuel, Bet MGM) in the past year in order to participate in sports betting?	1=Often 2=Sometimes 3=Rarely 4=Never	Display if "Yes" is selected for "Have you ever participated in sports betting?"
	To what extent to which you agree or disagree with each of the following statements: I feel like sports betting controls my life I have no problem setting limits on how much money I bet on sports	1=Strongly agree 2=Agree 3=Somewhat agree 4=Neither agree nor disagree 5=Somewhat disagree 6=Disagree 7=Strongly disagree	Display if "Yes" is selected for "Have you ever participated in sports betting?" Matrix table with 2 statements.
Suicide Contagion	Are you aware of anyone who died by suicide in your current college or university community during your time as a student there? Please count any faculty, staff, or students who died by suicide, even if they were not on campus when they died (e.g., were on a school break, or on a leave of absence).	0=No 1=Yes 3=Unsure (e.g., there was a death and I suspected that it might have been a suicide, but it was never confirmed to be a suicide by my school or the media)	
	When did the confirmed or possible suicide death(s) occur?	1=More than 1 year ago 2=In the past year 3=Both (at least one death occurred more than a year ago, and at least one death occurred in the past year)	Display if "Yes" OR "Unsure" is selected for "Are you aware of anyone who died by suicide in your current college or university community during your time as a student there?"
	Please select all statements that apply about the individual who died by suicide or suspected suicide. If there was more than one death during your time as a student, please answer for the first death that you remember on your campus. Select all that apply.	1=We had a social relationship (e.g., partners, friends, etc.) 2=We shared an aspect of our identity (e.g., same race/ethnicity, shared religion, both identify as LGBTQ+, etc.) 3=We shared an academic affiliation (e.g., in the same major, department, or student organization) 4=We both lived in the same housing building (e.g., dorm, apartment) 5=None of these [mutually exclusive]	Display if "Yes" OR "Unsure" is selected for "Are you aware of anyone who died by suicide in your current college or university community during your time as a student there?"
	In which venues was the death by suicide discussed or acknowledged? Select all that apply.	1=An official institutional communication (e.g., email, emergency alert system) 2=A memorial 3=News media (e.g., newspapers or blogs) 4=Social media (e.g., Reddit, Instagram, Meta, X) 5=Word of mouth from my peers 6=Other (please specify) 7=I don't remember 8=None of these	Display if "Yes" OR "Unsure" is selected for "Are you aware of anyone who died by suicide in your current college or university community during your time as a student there?"

	Thinking about the effect of the person’s suicide on your life, what response is closest to your experience?	1=The death had little effect on my life 2=The death had somewhat of an effect on me but didn’t disrupt my life 3=The death disrupted my life for a short time 4=The death disrupted my life in a significant or devastating way, but I no longer feel that way 5=The death had a significant or devastating effect on me that I still feel	Display if “Yes” OR “Unsure” is selected for “Are you aware of anyone who died by suicide in your current college or university community during your time as a student there?”
	How close would you describe your relationship with this person?	1=Not close 2=A little close 3=Somewhat close 4=Moderately close 5=Very close	Display if “Yes” OR “Unsure” is selected for “Are you aware of anyone who died by suicide in your current college or university community during your time as a student there?”
Climate anxiety	Please indicate your level of agreement or disagreement with the following statements. When I think about climate change, I feel... ...sad about the world changing ...anxious about my future ...hopeful that we will solve the problem	1=Strongly disagree 2=Disagree 3=Somewhat disagree 4=Somewhat agree 5=Agree 6=Strongly agree	
Social media/internet	In the past week, on average, approximately how much time <i>per day</i> have you spent using online spaces not for school or work, such as social media, gaming, etc.?	1=Not at all 2=Less than 1 hour per day 3=1-2 hours 4=2-3 hours 5=3-4 hours 6=4-6 hours 7=6-9 hours 8=10 or more hours	RANDOM 2 Display if “Knowledge and Attitudes about Artificial Intelligence” module not selected

	<p>We know that there are many experiences in the online space, ranging from positive to neutral to negative. For this item, we want to know more about your negative online experiences. Please select all the negative experiences you have had in online spaces (such as social media) <u>in the past year</u>.</p>	<p>1=I've not had any negative experiences online in the past year [mutually exclusive] 2=Been harassed and/or been called names or otherwise harmed by other people through online spaces, <i>not</i> including dating partners 3=Been harassed, called names or bullied or otherwise harmed by other people through online spaces, by a dating partner 4=Had someone share explicit real images (not Ai generated) of you without your permission (e.g., revenge porn) 5=Had someone create/share sexually explicit or otherwise embarrassing images of you using Ai (e.g., deep fakes) 6=Experienced doxing, whereby someone intentionally 'outed' one or more of your social identities (e.g., sexual, gender, etc.) 7=Since turning 18, had someone try to control your use or access to online medical or financial tools or accounts not in good faith (not a parent or caregiver who is helping) 8=Group harassment, sometimes called roasting, where multiple people are posting harassing things 9=Flaming, whereby someone is being encouraged (egged on) to die by suicide 10=Swatting, whereby false information is intentionally submitted to an emergency responding service in order to elicit a public response (e.g., Police, emergency medical services) on someone or a group of people 11=Cyber stalking, whereby someone was tracking you through your social media or other online account posts 12=Cyber monitoring, whereby someone covertly gained access to your accounts or technology to track your activities 13=Sextortion, whereby money or other resources were demanded in exchange for not sharing explicit images or other depictions of you 14=Other (please specify)</p>	<p>Display if "Not at all" is NOT selected for "In the past week, on average, how much time <i>per day</i> have you spent using online spaces not for school or work, such as social media, gaming, etc.?"</p>
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(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	NOTES/CITATION
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, persistent depressive disorder) 2=Bipolar (e.g., bipolar I or II, cyclothymia) 3=Anxiety (e.g., generalized anxiety disorder, phobias) 4=Obsessive-compulsive or related disorders (e.g., obsessive-compulsive disorder, body dysmorphia) 5=Trauma and Stressor Related Disorders (e.g, post-traumatic stress disorder), 6=Neurodevelopmental disorder or intellectual disability (e.g., attention deficit disorder (ADD), attention deficit hyperactivity disorder (ADHD), intellectual disability, autism spectrum disorder) 7=Eating disorder (e.g., anorexia nervosa, bulimia nervosa) 8=Psychosis (e.g., schizophrenia, schizo-affective disorder) 9=Personality disorder (e.g., antisocial personality disorder, paranoid personality disorder, schizoid personality disorder) 10=Substance use disorder (e.g., alcohol abuse, abuse of other drugs) 11=No, none of these [mutually exclusive] 12=Don't know 13=Other mental health condition (please specify)	
	Specifically, which of the following depressive disorders were you diagnosed with by a professional? (Select all that apply)	1=Major depressive disorder 2=Dysthymia or persistent depressive disorder 3=Premenstrual dysphoric disorder 4=Other (please specify) 5=Don't know	
	Specifically, which of the following bipolar and related disorders were you diagnosed with by a professional? (Select all that apply)	1=Bipolar I disorder 2=Bipolar II disorder 3=Cyclothymic disorder 4=Other (please specify) 5=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 anxiety disorder (or social phobia) 6=Other (please specify) 7=Don't know	

	<p>Specifically, which of the following obsessive-compulsive or related disorders were you diagnosed with by a professional? (Select all that apply)</p>	<p>1=Obsessive-compulsive disorder 2=Body dysmorphic disorder 3=Hoarding disorder 4=Trichotillomania (hair-pulling disorder) 5=Excoriation (skin-picking) disorder 6=Other (please specify) 7=Don't know</p>	
	<p>Specifically, which of the following trauma and stressor related disorders were you diagnosed with by a professional? (Select all that apply)</p>	<p>1=Post-traumatic stress disorder 2=Acute stress disorder 3=Adjustment disorder 4=Other (please specify) 5=Don't know</p>	
	<p>Specifically, which of the following neurodevelopmental disorder or intellectual disability were you diagnosed with by a professional? (Select all that apply)</p>	<p>1=Attention deficit hyperactivity disorder (ADHD or ADD) 2=Other intellectual disability 3=Autism spectrum disorder 4=Other (please specify) 5=Don't know</p>	
	<p>Specifically, which of the following eating disorders were you diagnosed with by a professional? (Select all that apply)</p>	<p>1=Anorexia nervosa 2=Bulimia nervosa 3=Binge-eating disorder 4=Pica 5=Avoidant/restrictive food intake disorder (selective eating disorder) 6=Other (please specify) 7=Don't know</p>	
	<p>Specifically, which of the following psychotic disorders were you diagnosed with by a professional? (Select all that apply)</p>	<p>1=Schizophrenia 2=Schizo-affective disorder 3=Brief psychotic disorder 4=Delusional disorder 5=Schizophreniform disorder 6=Other (please specify) 7=Don't know</p>	
	<p>Specifically, which of the following personality disorders were you diagnosed with by a professional? (Select all that apply)</p>	<p>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</p>	

	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 4=Opioid Use Disorder 2=Other (please specify) 3=Don't know	
Disability	Do you have a disability or disabilities from any of the following categories? (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) 10=Prefer not to respond [mutually exclusive] 11=I do not have a disability[mutually exclusive]	
	Are you registered with the office for disability services/ADA office on this campus as having a disability?	1=Yes 2=No 3=Prefer not to say	If any of the disabilities above are selected
	When were you diagnosed with ADHD ?	0=Prior to starting college 1=After starting college	Display if "1=ADHD" is selected for "Specifically, which of the following neurodevelopmental disorders or intellectual disabilities were you diagnosed with by a professional?" or "1=Attention deficit/hyperactivity disorders" is selected for "Do you have a disability or disabilities from any of the following categories?"
	What type of treatment for ADHD have you received in the past year?	0=No treatment 1=Medication only 2=Therapy only (e.g., CBT for ADHD, Executive Function Coaching, etc.) 3=Medication and therapy 4=Other (please specify)	Display if previous question is displayed
	What type of treatment for ADHD did you receive prior to starting college?	0=No treatment 1=Medication only 2=Therapy only (e.g., CBT for ADHD, Executive Function Coaching, etc.) 3=Medication and therapy 4=Other (please specify)	Display if "0=Prior to starting college" is selected for "When were you diagnosed with ADHD ?"
Chronic disease	Have you ever been diagnosed with any of the following health conditions, which required ongoing treatment by a healthcare 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)	Included if "Overall Health" module not selected

		<p>6=Arthritis 7=Sickle cell anemia 8=Seizure disorders (e.g., epilepsy) 9=Cancers 10=High cholesterol 11=HIV/AIDS 12=Other autoimmune disorder (please specify) 13=Other chronic disease (please specify) 14=No, never been diagnosed with a chronic disease. [mutually exclusive] 15=Don't know</p>	
Knowledge of campus services	<p>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 access resources from my school.</p>	<p>1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree</p>	Included if 'Knowledge and Attitudes about Mental Health and Mental Health Services' module not selected
Stigma	<p>How much do you agree with the following statements? Most people think less of a person who has received mental health treatment. I would think less of a person who has received mental health treatment.</p>	<p>1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree</p>	<p>Matrix table with 2 statements. Included if 'Knowledge and Attitudes about Mental Health and Mental Health Services' module not selected</p>
Perceived need	<p>How much do you agree with the following statement? In the past 12 months, I needed help for emotional or mental health problems or challenges such as feeling sad, blue, anxious or nervous.</p>	<p>1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree</p>	
	<p>How much do you agree with the following statement? I currently need help for emotional or mental health problems or challenges such as feeling sad, blue, anxious or nervous.</p>	<p>1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree</p>	Display only if "Somewhat Agree," "Agree" or "Strongly Agree" is selected for "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"
Help-seeking intentions	<p>If you were experiencing serious emotional distress, whom would you talk to about this? (Select all that apply)</p>	<p>1=Professional clinician (e.g., psychologist, counselor, or psychiatrist) 2=Roommate 3=Friend (who is not a roommate) 4=Significant other/romantic partner 5=Family member</p>	

		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 at this school 3=Yes, since starting at this school 4=Yes, both of the above (prior to and since starting at this school)	CCMH Standardized Data Set
	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 "Yes, prior to starting college", "Yes, since starting college", or "Yes, both of the above (prior to college and since starting college)" is selected for "Have you ever received counseling or therapy for mental health concerns?"
	Are you currently receiving counseling or therapy?	1=Yes 0=No	Display only if "How many total visits or sessions for counseling or therapy have you had in the past 12 months?" is not 0=0.
	From which of the following did you receive counseling or therapy in the past 12 months? (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 "Are you currently receiving counseling or therapy" is displayed. Display only if "How many total visits or sessions for counseling or therapy have you had in the past 12 months?" is not 0=0.
	From which campus counseling or health service did you receive counseling or therapy?	[open text]	Display only if "Insert other campus counseling or health service" is selected for "From which of the following places did you receive counseling or therapy?"
	Of the places you reported receiving counseling or therapy, how were your counseling or therapy sessions conducted? [pipe in selected options from the question, "From which of the following places did you receive counseling or therapy?"]	1=In-person only 2=Remote/telehealth only (digital video conferencing, text/app chat, etc...) 3=Both in-person and remote	Matrix table question where the statements are the selected options for "From which of the following places did you receive counseling or therapy?" Display only if "How many total visits or sessions for counseling or therapy have you had in the past 12 months?" is not 0=0.
Satisfaction with counseling/therapy	How satisfied/dissatisfied are you with your overall therapy or counseling experience?	6=Very satisfied 5=Satisfied 4=Somewhat satisfied 3=Somewhat dissatisfied 2=Dissatisfied	Display only if "Have you ever received counseling or therapy for mental health concerns?" is not "No, Never."

		1=Very dissatisfied	
	<p>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?"]?</p> <p>Convenient hours Location [Do not display for digital resources] Quality of therapists/counselors Respect for my privacy concerns Ability to schedule appointments without long delays Respect and consideration for my identities (e.g., race/ethnicity, gender, etc.)</p>	<p>6=Very satisfied 5=Satisfied 4=Somewhat satisfied 3=Somewhat dissatisfied 2=Dissatisfied 1=Very dissatisfied</p>	<p>One matrix table question with 6 statements for each option selected for "From which of the following places did you receive counseling or therapy?" (Up to 8)</p>
	<p>How satisfied/dissatisfied are you with the telemental health services you have received from the following providers?</p> <p>[pipe in the selected options remote/both in-person & remote from the question: Of the places you reported receiving counseling or therapy, how were your counseling or therapy sessions conducted?]</p>	<p>6=Very satisfied 5=Satisfied 4=Somewhat satisfied 3=Somewhat dissatisfied 2=Dissatisfied 1=Very dissatisfied</p>	
	<p>How helpful, overall, do you think therapy or counseling was or has been for your mental or emotional health?</p>	<p>1=Very helpful 2=Helpful 3=Somewhat helpful 4=Not helpful</p>	<p>Displayed if "No, never" is not selected for "Have you ever received counseling or therapy for your mental health?"</p>
Use of medication	<p>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)</p>	<p>1=Psychostimulants (methylphenidate (Ritalin or Concerta), amphetamine salts (Adderall), dextroamphetamine (Dexedrine), etc.) 2=Antidepressants (e.g., fluoxetine (Prozac), sertraline (Zoloft), paroxetine (Paxil), escitalopram (Lexapro), venlafaxine (Effexor), bupropion (Wellbutrin), etc.) 3=Antipsychotics (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)</p>	

		8=No, none of these [mutually exclusive] 9=Don't know	
	For what reason(s) do you use Psychostimulants (methylphenidate (Ritalin or Concerta), amphetamine salts (Adderall), dextroamphetamine (Dexedrine), etc.) ? (Select all that apply)	1=Mental or emotional health 2=Other health reasons 3=Academic performance 4=Recreation/fun 5=Other (please specify)	If "1=Psychostimulants (methylphenidate (Ritalin or Concerta), amphetamine salts (Adderall), dextroamphetamine (Dexedrine), etc.)" is selected for "In the past 12 months have you taken any of the following types of prescription medications?"
	For what reason(s) do you use Anti-anxiety medications (e.g., lorazepam (Ativan), clonazepam (Klonopin), alprazolam (Xanax), buspirone (BuSpar), etc.) (Select all that apply)	1=Mental or emotional health 2=Other health reasons 3=Academic performance 4=Recreation/fun 5=Other (please specify)	Display if "4=Anti-anxiety medications (e.g., lorazepam (Ativan), clonazepam (Klonopin), alprazolam (Xanax), buspirone (BuSpar), etc.)" is selected for "In the past 12 months have you taken any of the following types of prescription medications?"
	In the past 12 months how many times have you discussed with a doctor or other health professional your use of the medication(s) you just noted?	1=Not at all 2=1-2 times 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 (Dexedrine), etc.) 2=Antidepressants (e.g., fluoxetine (Prozac), sertraline (Zoloft), paroxetine (Paxil), escitalopram (Lexapro), venlafaxine (Effexor), bupropion (Wellbutrin), etc.) 3=Antipsychotics (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]	Pipe in selected options from: "In the past 12 months have you taken any of the following types of prescription medications?"
	In the past 12 months, have you used your prescription stimulant (e.g., Ritalin, Adderall) in any way not directed by a doctor (e.g., use in greater amounts or more often than directed)?	1=Yes 2=No	If "1=Psychostimulants" is selected for "In the past 12 months have you taken any of the following types of prescription medications?"

	In the past 12 months, have you given away, traded, or sold your prescription stimulant (e.g., Ritalin, Adderall)?	1=Yes 2=No	If "1=Psychostimulants" is selected for "In the past 12 months have you taken any of the following types of prescription medications?"
	Where is the prescriber located who wrote most of the prescriptions for your stimulant in the past 12 months?	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=Urgent Care or the Emergency Room 5=Provider in the local community (not on campus) 6=Provider in my hometown 7=Provider affiliated with a telehealth company 8=Other (please specify)	If "1=Psychostimulants" is selected for "In the past 12 months have you taken any of the following types of prescription medications?"
	Within the last 12 months, how has ADHD affected your academic performance?	1=It has not impaired my academic performance 2=It has minimally impaired my academic performance 3=It has moderately impaired my academic performance 4=It has significantly impaired my academic performance	Display if "1=Attention deficit hyperactivity disorder (ADHD or ADD)" is selected for "Specifically, which of the following neurodevelopmental disorder or intellectual disability were you diagnosed with by a professional?" OR "1=Attention deficit/hyperactivity disorders" is selected for "Do you have a disability or disabilities from any of the following categories?"
	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?"
	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 the person's relationship to you). 7= A campus advisor mandated me to seek help 11= A campus advisor referred me to seek help 8=I acquired more information about my options from (please specify where). 10= A health professional recommended or referred me to seek help. 12=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	1=No need for services 2=Financial reasons (too expensive, not covered by insurance) 3=Not enough time	

	mental or emotional health than you would have otherwise received? (Select all that apply)	<p>4=Not sure where to go</p> <p>5=Difficulty finding an available appointment</p> <p>6=Prefer to deal with issues on my own or with support from family/friends</p> <p>7=Privacy concerns</p> <p>8= People providing services don't understand me</p> <p>9=Other (please specify)</p> <p>10= No barriers [mutually exclusive]</p> <p>11= fear of being mistreated due to my identity/identities</p> <p>12=The clinic or clinician had limits on the number of times I could be seen</p>	
	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)	<p>1=I haven't had the chance to go but I plan to.</p> <p>2=No need for services</p> <p>3=Financial reasons (too expensive, not covered by insurance)</p> <p>4=Not enough time</p> <p>5=Not sure where to go</p> <p>6=Difficulty finding an available appointment</p> <p>7=Prefer to deal with issues on my own or with support from family/friends</p> <p>8=Other (please specify)</p> <p>9=No barriers [mutually exclusive]</p> <p>10=Privacy concerns</p> <p>11=People providing services don't understand me</p> <p>12=Fear of being mistreated due to my identity/identities</p> <p>13=The clinic or clinician had limits on the number of times I could be seen</p>	
Healthcare Avoidance	Was there a time in the past 12 months when you needed to see a doctor but did not because you were concerned about being refused care due to your: Gender identity and/or expression Sexual orientation	<p>1=Yes</p> <p>2=No</p>	<p>Matrix table with 2 components</p> <p>Display if respondents' age is between 18 and 24</p>
Healthcare experiences	In your lifetime, have you ever been refused healthcare on the basis of your: Gender identity and/or expression Sexual orientation	<p>1=Yes</p> <p>2=No</p>	<p>Display if respondents' age is between 18 and 24</p>
	In the past year , have you been refused healthcare on the basis of your: Gender identity and/or expression [piped in if selected in previous question]	<p>1=Yes</p> <p>2=No</p>	<p>Display if respondents' age is between 18 and 24 and if "1=Yes" is selected for either component in "In your lifetime, have you ever been refused health care on the basis of your..."</p>

	Sexual orientation [piped in if selected in previous question]		
	Thinking about the healthcare you received in the past 12 months, how often was the following true? I disclosed my LGBTQ+ identity/identities to a healthcare provider.	1=Never 2=Rarely 3=Sometimes 4=Most of the time 5=Always 6=Don't know 7=Not applicable	Display if respondents' age is between 18 and 24 AND respondent has identified themselves as LGBTQ+ (i.e. "Heterosexual" is not selected for "What is your sexual orientation?" OR "Transgender", "Gender non-binary," "Genderqueer/Gender non-conforming," or "Self identify" are selected for "Please select all that apply to your gender identity")
Access to Care	In your lifetime, have you been refused access to gender-affirming medical care (e.g., puberty blockers, hormone replacement therapy)?	1=Yes 2=No 3=I don't know 4=I have never sought gender-affirming medical care	Display if respondents' age is between 18 and 24 AND respondent has identified themselves as LGBTQ+ (i.e. "Heterosexual" is not selected for "What is your sexual orientation?" OR "Transgender", "Gender non-binary," "Genderqueer/Gender non-conforming," or "Self identify" are selected for "Please select all that apply to your gender identity")
	In the past year, have you been refused access to gender-affirming medical care (e.g., puberty blockers, hormone replacement therapy)?	1=Yes 2=No 3=I don't know 4=I have never sought gender-affirming medical care	Display if respondents' age is between 18 and 24 AND respondent has identified themselves as LGBTQ+ (i.e. "Heterosexual" is not selected for "What is your sexual orientation?" OR "Transgender", "Gender non-binary," "Genderqueer/Gender non-conforming," or "Self identify" are selected for "Please select all that apply to your gender identity") AND "1=Yes" is selected for "In your lifetime, have you been refused access to gender-affirming medical care?"
Refusal/Denial of services	In your lifetime, have you been denied services or goods from a company, store, organization or individual on the basis of your: Gender identity and/or expression Sexual orientation	1=Yes 2=No 3=I don't know	Display if respondents' age is between 18 and 24
	In your the past year , have you been denied services or goods from a company, store, organization or individual on the basis of your: Gender identity and/or expression [piped in if selected in previous question] Sexual orientation [piped in if selected in previous question]	1=Yes 2=No 3=I don't know	Display if respondents' age is between 18 and 24 AND "1=Yes" is selected for either component in "In your lifetime, have you been denied services or goods from a company, store, organization, or individual on the basis of your..."

<p>Informal help-seeking</p>	<p>In the past 12 months have you received support for your mental or emotional health from any of the following sources? (Select all that apply)</p>	<p>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 9=Faculty member/professor/instructor 10=Staff member 7=Other non-clinical source (please specify) 8=No, none of these [mutually exclusive]</p>	
	<p>How helpful was it to discuss these concerns?</p>	<p>1=Very helpful 2=Helpful 3=Somewhat helpful 4=Not helpful</p>	<p>Display if any option other than “8=No, none of these” is selected for “In the past 12 months, have you received support for your mental or emotional health from any of the following sources?”</p>
	<p>If you had a mental health problem that you believed was affecting your academic performance, which people at your school would you talk to? (Select all that apply)</p>	<p>1=Professor/Instructor from one of my classes 2=Academic advisor/academic counselor 3=Another faculty member or instructor 4=Teaching assistant 5=Student services staff 6=Dean of Students or class dean 7=Other (please specify) 8=No one [mutually exclusive]</p>	<p>RANDOM 1</p>
	<p>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?</p>	<p>1=Yes 0=No</p>	<p>RANDOM 2</p>
	<p>Overall, how supportive was the response of the academic personnel with whom you talked?</p>	<p>1=Very supportive 2=Supportive 3=Not supportive 4=Very unsupportive</p>	<p>Display if “1=Yes” is selected for “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?”</p>
<p>Insurance</p>	<p>What is the source of your current health insurance coverage? (Select all that apply)</p>	<p>1=I do not have any health insurance coverage (uncovered). [mutually exclusive] 2=I have health insurance through my parent/guardian(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.</p>	<p>RANDOM 2</p>

		<p>7=I have individual health insurance purchased directly from an insurance carrier.</p> <p>8=I have Medicaid or other governmental insurance.</p> <p>9=I am uncertain about whether I have health insurance.</p> <p>10=I have health insurance but am uncertain about where it is from.</p>	
	Do you know if your health insurance plan would provide any coverage for a visit to a mental health professional (such as a psychiatrist, psychologist, clinical social worker, etc.)?	<p>1=Yes, it definitely would.</p> <p>2=I think it would but am not sure.</p> <p>3=I have no idea.</p> <p>4=I think it would not but am not sure.</p> <p>5=No, it definitely would not.</p>	Display if any option other than “1=I do not have any health insurance coverage” is selected for “What is the source of your current health insurance coverage?”
	Does your current health insurance plan meet your needs for mental health services?	<p>1=I have not needed to use my current insurance plan to cover mental health services.</p> <p>2=Yes, everything I have needed is covered.</p> <p>3=No, the coverage is inadequate to meet my needs.</p> <p>4=I’m not sure</p>	Display if any option <u>other than</u> “1=I do not have any health insurance coverage” is selected for “What is the source of your current health insurance coverage?”
	I feel that coverage is inadequate because my plan... (Select all that apply)	<p>1=...doesn’t cover any mental health services.</p> <p>2=...doesn’t cover pre existing conditions.</p> <p>3=...doesn’t cover certain conditions.</p> <p>4=...has a co-pay that is too expensive.</p> <p>5=...has a deductible that is too expensive.</p> <p>6=...doesn’t cover certain types of services or providers.</p> <p>7=...has a limit on the number of services that are covered.</p> <p>8=Other (please specify)</p>	Display if “No, the coverage is inadequate to meet my needs” is selected for “Does your current health insurance plan meet your needs for mental health services?”

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 Display if "1=Never" is not selected for "How often do you have a drink containing alcohol?"
	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 Display if "1=Never" is not selected for "How often do you have a drink containing alcohol?"
	How often during the last year have you... ...found that you were not able to stop drinking once you had started? ...failed to do what was normally expected of you because of drinking? ...needed a drink in the morning to get yourself going after a heavy drinking session? ...had a feeling of guilt or remorse after drinking? ...been unable to remember what happened the night before because you had been drinking?	1=Never 2=Less than monthly 3=Monthly 4=Weekly 5=Daily or almost daily	Matrix table with 5 statements. AUDIT (Saunders et al., 1993) Display if "1=Never" is not selected for "How often do you have a drink containing alcohol?"
	How often during the last year have you been unable to remember what happened the night before your drinking?	1=Never 2=Less than monthly 3=Monthly 4=Weekly 5=Daily or almost daily	AUDIT (Saunders et al., 1993) Display if "1=Never" is not selected for "How often do you have a drink containing alcohol?"

	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) Display if “1=Never” is not selected for “How often do you have a drink containing alcohol?”
	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) Display if “1=Never” is not selected for “How often do you have a drink containing alcohol?”
	Please answer the following yes or no questions. Have you ever received counseling or treatment for an alcohol-related problem from a health professional (such as psychiatrist, psychologist, social worker, or primary care doctor)? Are you currently in recovery from alcohol or other drugs? Have you ever participated in a substance use rehabilitation program, voluntarily or involuntarily? Have you ever thought that you might benefit from attending a support group and/or 12-step program related to alcohol or other drugs?	1=Yes 0=No	Matrix table with 4 questions.
Personal substance use	Over the past 30 days, have you used any of the following drugs recreationally? Please do not include medications that are being used as directed by a health professional. (Select all that apply)	1=Cannabis products that include THC (including smoking, vaping, and edibles) 2=Cocaine (any form, including crack, powder, or freebase) 3=Heroin 4=Opioid pain relievers (such as Vicodin, OxyContin, Percocet, Demerol, Dilaudid, codeine, hydrocodone, methadone, morphine) 5=Benzodiazepines (such as Valium, Ativan, Klonopin, Xanax, Rohypnal (Roofies)) 6=Methamphetamines (also known as speed, crystal meth, Tina, T, or ice) 7=Other stimulants (such as Ritalin, Adderall) 8=MDMA (also known as Ecstasy or Molly) 9=Ketamine (also known as K, Special K) 10=LSD (also known as acid) 11=Psilocybin (also known as magic mushrooms, boomers, shrooms) 12=Kratom 13=Athletic performance enhancers (anything that violates policies set by your school or any athletic governing body) 14=Other drugs (please specify) 15=No, none of these [mutually exclusive]	

	Over the past 30 days, how often have you used any cannabis products that include THC (either smoking, vaping, edibles or otherwise)?	1= Every day 2=Nearly every day 3=3-4 days per week 4=1-2 days per week 5=Less than once per week	Included if 'Overall Health' module not selected Display if "Cannabis products" is selected for "Over the past 30 days, have you used any of the following drugs?(Select all that apply)"
	Please indicate all of the ways you use cannabis products containing THC.	1=Smoking (e.g., joints, pipes, bongs) 2=Consuming edible THC products (e.g., gummies, purchased or homemade baked goods) 3=Vaping	Included if 'Overall Health' module not selected Display if "Cannabis products" is selected for "Over the past 30 days, have you used any of the following drugs?(Select all that apply)"
	Do you use any of the following nicotine-containing products? Select all that apply.	0=None of these [mutually exclusive] 1=Cigarettes 2=Nicotine vape 3=Chewing tobacco 4=Nicotine pouches (i.e., Zyn) 5=Smoking cessation aids (e.g., nicotine patches or gum)	Included if 'Overall Health' module not selected
	On average, about how often do you use the nicotine product(s) you selected? Cigarettes Nicotine vape Chewing tobacco Nicotine pouches Smoking cessation aids (e.g., nicotine patches or gum)	1=Multiple times throughout the day 2=Once a day 3=Once every few days 4=Once a week 5=A few times a month 6=Once a month 7=Less than once a month	Included if 'Substance Use' module not selected Products presented dependent upon if they were selected in "Do you use any of the following nicotine-containing products?"
	Have you ever used the following drugs/supplements for the purpose of enhancing appearance or performance? (Select all that apply)	1=Anabolic Steroids 2=Other Synthetic Muscle Enhancers (such as clenbuterol, human growth hormone) 3=Protein Supplements (such as whey protein, protein shakes, protein bars) 4=Creatine Supplements (such as creatine monohydrate, creatine ethyl ester, and others) 5= Diuretics/Water Pills (such as furosemide (Lasix), hydrochlorothiazide, spironolactone, and others) 6=I have never used these drugs or supplements	Included if 'Eating and Body Image' module not selected
	To the best of your knowledge, what is naloxone used for?	1=To reverse the effects of an opioid overdose (e.g., heroin, methadone) [CORRECT] 2=To reverse the effects of an amphetamine overdose 3=To reverse the effects of a cocaine overdose 4=To reverse the effects of any drug overdose 5=Don't know	If any answer EXCEPT "To reverse the effects of an opioid overdose (e.g., heroin, methadone)", display the correct answer
	Please answer the following questions thinking about how you would deal with an overdose from opioids used	1=Strongly agree 2=Agree	

	<p>without a prescription/not as directed (opioids such as: OxyContin, Percocet, Vicodin, heroin, fentanyl)</p> <p>I know how to use naloxone if someone overdoses</p> <p>I would be concerned about calling emergency services in case I get into trouble with my school or the police come</p>	<p>3=Somewhat agree</p> <p>4=Somewhat disagree</p> <p>5=Disagree</p> <p>6=Strongly disagree</p>	
Perception of risk regarding substance use	<p>How much do you think people risk harming themselves physically or in other ways...</p> <p>...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.)</p> <p>...if they smoke 1 or more packs of cigarettes per day?</p> <p>...if they smoke cannabis once or twice a week?</p> <p>...if they use prescription drugs that are not prescribed to them?</p> <p>...if they vape daily?</p>	<p>1=No risk</p> <p>2=Slight risk</p> <p>3=Moderate risk</p> <p>4=Great risk</p>	<p>Adapted from Drug Free Communities Support Program Evaluation of Core Measures Survey (2012)</p> <p>Definition adapted from National Institute on Alcohol Abuse and Alcoholism</p>
Other students alcohol use	<p>In the past 30 days, how often have you had to "baby-sit" or take care of another student who drank too much?</p>	<p>1=0 times</p> <p>2=1 times</p> <p>3=2 times</p> <p>4=3 times</p> <p>5=4 or more times</p>	
Perceptions of peer substance use	<p>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...</p> <p>...about what percent of students at your school drank alcohol?</p> <p>...about what percent of students at your school smoked cigarettes?</p> <p>...about what percent of students at your school smoked (or otherwise used) cannabis?</p> <p>...about what percent of students at your school vaped?</p> <p>...about what percent of students have used prescription drugs that are not prescribed to them?</p>	<p>1= _____ %</p> <p>[force numeric, 0-100]</p>	<p>Matrix table with 4 questions.</p>
	<p>How much do you agree with the following statement?: Alcohol use is a problem for students on my campus.</p>	<p>1=Strongly agree</p> <p>2=Agree</p> <p>3=Somewhat agree</p> <p>4=Somewhat disagree</p> <p>5=Disagree</p> <p>6=Strongly disagree</p>	

<p>Policies and programs</p>	<p>Please select the policies, programs, or initiatives that you are aware your school has. (Select all that apply)</p>	<p>1=Good Samaritan or Medical Amnesty policy (e.g., no disciplinary consequences for assisting someone who needs emergency medical help during an opioid overdose) 2=Opioid overdose prevention program (e.g., education on signs of an opioid overdose and how to respond) 3=Naloxone (Narcan) training program (e.g., how to use naloxone to reverse an opioid overdose) 4=Naloxone (Narcan) available to students 5=Collegiate Recovery Program (e.g., support services for students who are in recovery from an alcohol and/or other drug use disorder) 6=None of the above [mutually exclusive]</p>	
	<p>How much do you agree or disagree with the following statement? If I needed to seek professional help for my substance use, I would know where to access my school's resources</p>	<p>1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree</p>	<p>Display if participant reported any alcohol or drug use (including cigarettes/nicotine)</p>
	<p>Are you aware of any substance use outreach efforts by your school (such as educational programs, awareness events, screening days, collegiate recovery communities, etc.)?</p>	<p>1=Yes 2=No</p>	

(5) 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/other men/my 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	
	In your day-to-day life, how often do people act as if they're better than you because of your weight?	1=Never 2=Rarely 3=Sometimes 4=Often 5=Always	
	I am concerned that I will not be treated fairly by others because of my weight.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	
	About how often do you weigh yourself?	1=Never 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	
	Have you ever used the following drugs/supplements for the purpose of enhancing appearance or performance? (Select all that apply)	1=Anabolic Steroids 2=Other Synthetic Muscle Enhancers (such as clenbuterol, human growth hormone) 3=Protein Supplements (such as whey protein, protein shakes, protein bars) 4=Creatine Supplements (such as creatine monohydrate, creatine ethyl ester, and others) 5= Diuretics/Water Pills (such as furosemide (Lasix), hydrochlorothiazide, spironolactone, and others) 6=I have never used these drugs or supplements	
SCOFF	Please answer the following questions as honestly as possible.	1=Yes 0=No	Matrix table with 5 questions. SCOFF questionnaire (Morgan, Reid, & Lacey, 1999)

	<p>Do you ever make yourself sick because you feel uncomfortably full?</p> <p>Do you worry that you have lost control over how much you eat?</p> <p>Have you recently lost more than 15 pounds in a 3-month period?</p> <p>Do you believe yourself to be fat when others say you are too thin?</p> <p>Would you say that food dominates your life?</p>		
Binging and purging	<p>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?</p>	Range: 0-28 days	Eating Disorder Examination Questionnaire (EDE-Q) (Fairburn, Cooper, & O'Connor, 2008)
	<p>Over the past 4 weeks (28 days), how many times have you...</p> <p>...made yourself sick (vomit) as a means of controlling your shape or weight?</p> <p>...taken laxatives as a means of controlling your shape or weight?</p> <p>...taken diuretics (water pills) or diet pills as a means of controlling your shape or weight?</p> <p>...exercised in a "driven" or "compulsive" way as a means of controlling your weight, shape or amount of fat, or to burn off calories?</p> <p>...fasted for non-religious purposes (intentionally not eaten anything at all for at least 8 waking hours)?</p>	[open text - force numeric 0-28]	<p>Matrix table with 5 statements.</p> <p>Eating Disorder Examination Questionnaire (EDE-Q) (Fairburn, Cooper, & O'Connor, 2008)</p>
Eating habits	<p>For about what percentage of the last 12 months were you on a diet?</p>	<p>1=More than 75% (more than 270 days total)</p> <p>2=Between 50% and 75% (180 to 270 days total)</p> <p>3=Between 25% and 49% (90 to 179 days total)</p> <p>4=Less than 25% (1 to 90 days total)</p> <p>5=I was not on a diet at all in the last 12 months.</p>	<p>Display "1=I've never been on a diet" is not selected for "When was the last time you went on a diet?"</p>
	<p>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.</p>	<p>1=Strongly agree</p> <p>2=Agree</p> <p>3=Somewhat agree</p> <p>4=Somewhat disagree</p> <p>5=Disagree</p> <p>6=Strongly disagree</p>	
	<p>How have your eating habits changed since you began as a student at your school? (Select all that apply)</p>	<p>1=I think about food more often.</p> <p>2=I think about food less often.</p> <p>3=I am more concerned about what I eat.</p> <p>4=I am less concerned about what I eat.</p>	<p>Display if "Strongly agree", "Agree", or "Somewhat agree" has been selected.</p>

		<p>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)</p>	
	Do the following eating practices apply to you?	<p>1=Vegetarian 2=Vegan 0=Neither</p>	Display if "Overall Health" Module is not selected and "vegan/vegetarian" not selected above
	Why did you become vegan or vegetarian? (Select all that apply)	<p>1= To improve my overall health. 2= To manage a specific health condition. 3= To lose weight. 4= To spend less money on food. 5= To reduce my carbon footprint or protect the environment. 6=Other (text)</p>	Display if "I became a vegetarian/vegan" is selected, OR if "Vegetarian" or "Vegan" are selected above
	Of the reasons selected above, which one is the most important or primary reason for becoming vegan or vegetarian?	<p>1= To improve my overall health. 2= To manage a specific health condition. 3= To lose weight. 4= To spend less money on food. 5= To reduce my carbon footprint or protect the environment. 6=Other</p>	
Eating competence	<p>Rate how often you experience the following:</p> <p>I am comfortable with my enjoyment of food and eating. I eat as much as I am hungry for. I tune in to food and pay attention to eating.</p>	<p>1=Always 2=Often 3=Sometimes 4=Rarely 5=Never</p>	Matrix table with 3 statements.
	I've changed my eating patterns out of concern for the environment or to help mitigate climate change.	<p>1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree</p>	

	How have you changed your eating habits out of concern for the environment? (Select all that apply)	1=Eating a plant-based diet 2=Became vegetarian or vegan 3=Eating more locally sourced foods 4=Trying to waste less food 5=Trying to reduce food packaging 6=Cooking more 7=Eating away from home or campus less often 8=Other (text response)	Display if "Somewhat agree", "Agree", or "Strongly agree" selected for "I've changed my eating patterns out of concern for the environment or to help mitigate climate change."
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(6) ASSAULT AND ABUSE

Perceptions and Experiences of Violence on Campus

The next set of questions asks you about perceptions and experiences related to assault and abuse. 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
Violence	In your lifetime, how many times has anyone struck or physically injured you? Please do not report any injuries in an appropriate athletic context (i.e. contact sports)	1=Never 2=1 time 3=2-3 times 4=4-5 times 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	
	Since you began at your school, did you strike or physically injure anyone? Please do not report any injuries in an appropriate athletic context (i.e. contact sports)	1=Yes 0=No	
Stalking	Since starting at your school, have you experienced stalking? (e.g., someone waiting for you outside your home, classroom, or workplace; repeated unwanted emails/phone calls)?	1=Yes 0=No	
	If someone were to report stalking 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 stalking 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)
Intimate Partner Violence	Since you began at your school, has someone ever: Physically hurt you? Insulted or talked down to you? Threatened your or someone you care about with harm? Screamed or cursed at you? Harassed, shared private information such as text, images, or videos or demanded/accessed online profiles without permission?	0=No 1=Yes	Matrix table with 4 questions. Adapted from HITS. Sherin KM, Sinacore JM, Li XQ, Zitter RE, Shakil A. HITS: a short domestic violence screening tool for use in a family practice setting. Fam Med 1998; 30(7):508-12.
	Please select how you know the person or people who treated you the way(s) you've just indicated. (Select all that apply)	1=I didn't know them (stranger) 2=Family member 3=Acquaintance	Display if selected "Yes, by someone who is not a current or past dating/romantic partner"

		<p>4=Coworker 5=Employer/supervisor 6=College professor/instructor 7=College staff member 8=Non-romantic friend 9=Casual or first date 10=Current significant other/ romantic partner 11=Ex-Significant other/romantic partner 12=Medical professional 13=Coach [if inter-collegiate varsity athlete] 14=Teammate [if inter-collegiate varsity athlete] 15=Trainer [if inter-collegiate varsity athlete] 15=Athletic medical staff member [if inter-collegiate varsity athlete] 16=Roommate 14=Do not wish to disclose</p>	
Perceptions of leadership, policies, and reporting	<p>If someone were to report a sexual assault to a campus authority, how likely is it that...</p> <p>...your school would take the report seriously? ...your school would protect the privacy of the person making the report? ...your school would forward the report outside the campus to criminal investigators? ...your school would take steps to protect the safety of the person making the report? ...your school would take corrective action to address factors that may have led to the sexual assault? ...your school would take corrective action against the offender? ...your school would take steps to protect the person making the report from retaliation? ...students would label the person making the report as a troublemaker? ...students would support the person making the report? ...the alleged offender(s) or their friends would retaliate against the person making the report?</p>	<p>1=Very likely 2=Moderately likely 3=Slightly likely 4=Not at all likely</p>	<p>Matrix table with 10 questions.</p> <p>Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014)</p>
Sexual violence and sexual assault	<p>How much do you agree or disagree with the following statements?</p> <p>At my school, I feel that sexual assault is taken seriously...</p> <p>...by administration ...by my peers</p>	<p>1=Strongly agree 2=Agree 3=Neither agree nor disagree 4=Disagree 5=Strongly disagree 6=Don't know</p>	<p>Matrix table with 2 statements.</p>
	<p>Have you received training in policies and procedures regarding the following?:</p>	<p>1=Yes 0=No</p>	<p>Matrix table with 4 statements.</p>

	<p>What is defined as sexual assault Where and how to report an incident of sexual assault Policies and procedures for investigating a sexual assault What resources are available at your school to support survivors</p>		<p>Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014)</p>
	<p>Where do you think sexual assaults are most likely to occur at your institution? (Select all that apply)</p>	<p>1= Campus residence halls 2= Non-residential campus buildings 3= Off-campus residence 4= Off campus, non-residential 5= Fraternity or Sorority event or housing 6= Other (please specify) [text response] 7= I don't know [mutually exclusive]</p>	
	<p>Please indicate your level of agreement to the following statements: If someone I know or I were sexually assaulted, I know where to go to get help. I understand my school's formal procedures to address incidences of sexual assault. I have confidence that my school administers the formal procedures to address complaints of sexual assault fairly.</p>	<p>1=Strongly agree 2=Agree 3=Neither agree nor disagree 4=Disagree 5=Strongly disagree 6=Don't know</p>	<p>Matrix table with 3 statements. Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014)</p>
	<p>Since you've been a student at your school, have you had a sexual encounter in which you initially gave consent but later revoked it?</p>	<p>1=Yes 2=No 3=Don't know [mutually exclusive] 4=Prefer Not to Say</p>	
	<p>Did your partner(s) honor the revocation of your consent?</p>	<p>1=Yes 2=No 3=Don't know [mutually exclusive] 4=Prefer Not to Say</p>	<p>Display if "Yes" is selected for "Have you ever had a sexual encounter in which you initially gave consent but later revoked it?"</p>
	<p>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?</p>	<p>1=Yes, I am certain this has happened. 2=I suspect this has happened but am not certain. 3=No, this has not happened.</p>	<p>Adapted from Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014)</p>
	<p>Just prior to the incident(s), had you been given a drug without your knowledge or consent?</p>	<p>1=Yes 2=No 3=Don't know</p>	<p>Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014)</p>
	<p>Since you began as a student at your school, have you experienced sexual assault?</p>	<p>1=Yes 2=No 3=Don't know [mutually exclusive] 4=Prefer Not to Say</p>	
	<p>Since you began as a student at your school, have you experienced sexual assault <i>more than once</i>?</p>	<p>1=Yes 2=No</p>	<p>Display if "Yes" is selected for "Since you began as a student at your school, have you experienced sexual assault?"</p>

	Where did the assault(s) happen? (Select all that apply)	1= Campus residence hall 2= Non-residential campus building 3= Off-campus residence 4= Off campus, non-residential 5= Fraternity or Sorority event or housing 6= Other (please specify) [text response] 7= I don't know	Display if "Yes" is selected for "Since you began as a student at your school, have you experienced sexual assault?"
Context and disclosure	Who perpetrated this assault(s)? (Select all that apply)	1=Stranger 2=Family member 3=Acquaintance 4=Coworker 5=Employer/supervisor 6=College professor/instructor 7=College staff member 8=Non-romantic friend 9=Casual or first date 10=Current significant other/ romantic partner 11=Ex-Significant other/romantic partner 12=Medical professional 13=Coach [if inter-collegiate varsity athlete] 14=Teammate [if inter-collegiate varsity athlete] 15=Trainer [if inter-collegiate varsity athlete] 15=Athletic medical staff member [if inter-collegiate varsity athlete] 16=Roommate 14=Do not wish to disclose	Adapted from Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014)
	Whom did you tell about the incident(s)? (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=Significant other/romantic partner 11=Campus sexual assault advocate 12=Pastor, Rabbi, Imam or other spiritual advisor 13=Medical Professional 12=Other (please specify)	Adapted from Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014)
	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)

	<p>Did your school’s formal procedures help you deal with the problem?</p>	<p>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</p>	<p>Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014)</p> <p>Display if “Yes” is selected for “Did you use your school’s formal procedures to report the incident(s)?”</p>
	<p>There are many possible reasons someone may choose to not disclose a sexual assault. Which of the following factors are reasons why you didn’t tell anyone? (Select all that apply)</p>	<p>1=Ashamed/embarrassed 2=Felt that it was a private matter/wanted to deal with it on my own 3=Concerned others would find out 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)</p>	<p>Adapted from Not Alone: The First Report of the White House Task Force to Protect Students From Sexual Assault (2014)</p> <p>Display if “No one” is selected for “Whom did you tell about the incident(s)?”</p>

(7) 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 would you 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 healthcare 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=HIV/AIDS 12=Other autoimmune disorder (please specify) 13=Other chronic disease (please specify) 14=No, never been diagnosed with a chronic disease. [mutually exclusive] 15=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=1-2 hours 3=2-3 hours 4=3-4 hours 5=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)	Display if selected “strongly agree”, “agree”, or “somewhat disagree” for “My exercise habits have changed a lot since I began as a student at my school”

<p>Concussion / TBI history</p>	<p>Thinking about any injuries to your head or neck that you have had in your lifetime, were you ever <u>knocked out</u> or did you <u>lose consciousness</u>?</p>	<p>0=No 1=Yes 2=I don't know 3=Prefer not to say</p>	<p>Instructions: "For these next questions, please think about injuries you have had during your entire lifetime, especially those that affected your head or neck. It might help to remember times you went to the hospital or emergency room. Think about injuries you may have received from a car, motorcycle, ATV, or snowmachine/snowmobile accident; bicycle crash; being hit by something or by someone; falling down; playing sports; or an injury on the job or during military service."</p>
	<p>Thinking about any injuries to your head or neck that you have had in your lifetime, were you ever <u>dazed or have a gap in your memory from any of the injuries</u>?</p>	<p>0=No 1=Yes 2=I don't know 3=Prefer not to say</p>	<p>Display if "0=No" is selected for "Thinking about any injuries to your head or neck that you have had in your lifetime, were you ever <u>knocked out</u> or did you <u>lose consciousness</u>?"</p>
	<p>How old were you <u>the first time</u> you were <u>dazed or have a gap in your memory from an injury</u>?</p>	<p>[open text] force numeric</p>	<p>Display if "1=Yes" is selected for "Thinking about any injuries to your head or neck that you have had in your lifetime, were you ever <u>dazed or have a gap in your memory from any of the injuries</u>?"</p>
	<p>What was the <u>longest time</u> you were knocked out or unconscious? Would you say... (If you aren't sure, please make your best guess)</p>	<p>1=Less than 5 minutes 2=Between 5 and 30 minutes 3=More than 30 minutes but less than 24 hours 4=24 hours or longer 5=I don't know 6=Prefer not to say</p>	<p>Display if "1=Yes" is selected for "Thinking about any injuries to your head or neck that you have had in your lifetime, were you ever <u>knocked out</u> or did you <u>lose consciousness</u>?"</p>
	<p>How old were you <u>the first time</u> you were knocked out or lost consciousness?</p>	<p>[open text] force numeric</p>	<p>Display if "1=Yes" is selected for "Thinking about any injuries to your head or neck that you have had in your lifetime, were you ever <u>knocked out</u> or did you <u>lose consciousness</u>?"</p>
<p>Nutrition</p>	<p>Do the following eating practices apply to you?: I am vegetarian.</p>	<p>1=Yes 0=No</p>	<p>Display if "Eating and Body Image" is not selected</p>
	<p>Do the following eating practices apply to you?: I am vegan.</p>	<p>1=Yes 0=No</p>	<p>Display if "Eating and Body Image" is not selected</p>
	<p>Why did you become vegan or vegetarian? (Select all that apply)</p>	<p>1= To improve my overall health. 2= To manage a specific health condition. 3= To lose weight. 4= To spend less money on food. 5= To reduce my carbon footprint or protect the environment. 6=Other (text)</p>	<p>Display if "Yes" selected for vegan or vegetarian.</p>

	Of the reasons selected above, which one is the most important or primary reason for becoming vegan or vegetarian?	1= To improve my overall health. 2= To manage a specific health condition. 3= To lose weight. 4= To spend less money on food. 5= To reduce my carbon footprint or protect the environment. 6=Other	
	Do the following eating practices apply to you?: I eat raw food (most of or all of the time).	1=Yes 0=No	
	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, ½ cup fresh/frozen/canned fruits/vegetables, ¾ cup fruit/vegetable juice, or ¼ dried fruit)	1=0 2=1-2 3=3-4 4=5 or more	Definition from American Heart Association 2014
Sexual health and behavior	How many people have you had sexual contact with in the past 12 months?	1=0 2=1 3=2 4=3 5=4 6=5-9 7=10 or more	
	In the past 30 days, what type of birth control method(s) did you or your partner(s) use during or for sexual intercourse? (Select all that apply)	1=Male condom 13=Internal/female 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	
	For what reason(s) did you or your partner(s) not use contraception in the past 30 days? (Select all that apply)	1=No pregnancy risk (including infertility/sterility, being the same sex as your partner(s), etc.) 2=Lack of access to birth control methods 3=Lack of access to information about birth control methods 4=You or your partner(s) didn’t want to use birth control (including barrier methods, hormonal contraception, etc) 5=You or your partner(s) can’t be on hormonal birth control for medical reasons	If “11=No contraceptive method was used” was selected for “In the past 30 days, what type of birth control method did you or your partner(s) use?”

		6=You or your partner(s) are trying to get pregnant 7=Some other reason	
	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	If "11=No contraceptive method was used" was NOT selected for "In the past 30 days, what type of birth control method did you or your partner(s) use?"
	Which of the following "safer sex" practices did/do you and your partner(s) use to prevent STIs, if any? (Select all that apply)	1=Barrier methods (condoms, dental dams, etc.) 2=Regular STI testing 3=Monogamy 4=PrEP for HIV prevention 5=Other safer sex practices (please specify) 6=None of these [mutually exclusive]	
	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	
	Have you been pregnant or given birth within the last 12 months?	1=Yes 2=No 3=Prefer not to say 4=I don't know	Do not display if "1=No" was selected for "Have you or a sexual partner (current or past) ever become pregnant?" Do not display if "2=Male" is selected for "What sex were you assigned at birth?"

(8) 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, uninterruptible speech 6=Eating an unusually large amount of food while feeling out of control	
	How much do you agree with the following statements? I have a good idea of how to recognize that someone is in emotional or mental distress. 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	Matrix table with 2 statements.
	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	1=Yes 0=No	

	appropriate resources. Examples include Mental Health First Aid, Question, Persuade, Refer (QPR), and At-Risk.)		
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 access my school's resources.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	
	Are you aware of mental health outreach efforts by your school (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 from your school?	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? ...medication would be for you if you were having mental or emotional health problems? ...therapy or counseling is, when provided competently, for people your age who are clinically depressed? ...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	Matrix table with 4 questions.
Identity, secrecy, and disclosure	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	
Perceived stigma and personal stigma	How much do you agree with the following statements? 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	Matrix table with 6 statements.

	<p>Most people feel that receiving mental health treatment is a sign of personal failure.</p> <p>Most people think less of a person who has received mental health treatment.</p> <p>I would willingly accept someone who has received mental health treatment as a close friend.</p> <p>I feel that receiving mental health treatment is a sign of personal failure.</p> <p>I would think less of a person who has received mental health treatment.</p>	<p>5=Disagree</p> <p>6=Strongly disagree</p>	
Stigma	<p>How much do you agree with the following statement?</p> <p>I would want to get psychological help if I were worried or upset for a long period of time.</p>	<p>0=Disagree</p> <p>1=Partly disagree</p> <p>2=Partly agree</p> <p>3=Agree</p>	<p>Item taken from: Attitudes Toward Seeking Professional Help by Fischer and Farina, 1995</p>
Self Stigma	<p>How much do you agree with the following statements?</p> <p>I would feel inadequate if I went to a therapist for psychological help.</p> <p>It would make me feel inferior to ask a therapist for help.</p> <p>If I went to a therapist, I would be less satisfied with myself.</p>	<p>1=Strongly disagree</p> <p>2=Disagree</p> <p>3=Agree and disagree equally</p> <p>4=Agree</p> <p>5=Strongly agree</p>	<p>Matrix table with 3 statements.</p> <p>Adapted from Self-Stigma of Seeking Help (SSOSH) scale (by Vogel, Wade, & Haake, 2006)</p>
Other factors	<p>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?</p>	<p>1=None</p> <p>2=At least 1 or 2</p> <p>3=3 or more</p> <p>4=Don't know</p>	
Mental health information seeking behavior	<p>In the past 12 months, have you ever looked for information on the following topics about mental or emotional health from any source? (Select all that apply)</p>	<p>1= What are the symptoms of common mental illnesses (e.g., anxiety, depression, eating disorders)</p> <p>2= Where to seek treatments for mental illnesses</p> <p>3= Ways of self-help</p> <p>4= Recognizing if someone I know is experiencing mental or emotional distress</p> <p>5= How to support someone I know affected by mental illnesses</p> <p>6= Other (please specify)</p> <p>7=No I have not looked for information about any topics about mental or emotional health in the past 12 months [mutually exclusive]</p>	

(9) UPSTANDER/BYSTANDER BEHAVIORS

Witnessing and Reacting to Difficult Situations on Campus

The next questions will ask you about difficult situations that you may have witnessed 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 statements? At my school, we are a campus where we look out for each other. I am responsible to help if a friend is struggling. 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	Matrix table with 3 statements.
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 8=Someone overdosed 6=Other (please specify) 7=None of the above [mutually exclusive]	
Upstanding	How much do you agree with the following statements? If I saw someone was drinking too much, I would intervene (by trying to help). If I saw someone was at risk of being sexually assaulted, I would intervene (by trying to help). If I saw someone was using hurtful language (e.g., bullying, sexist, racist, or homophobic comments), I would intervene (by trying to help). If I saw someone was experiencing significant emotional distress or thoughts of suicide, I would intervene (by trying to help). If I saw there was a physical altercation/fight, I would intervene (by trying to help). If I saw someone overdose, I would intervene (by trying to help)	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	Matrix table with 5 statements.
	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)	

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

(10) MENTAL HEALTH CLIMATE

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 statements? I fit in well at my school. I feel isolated from campus life. 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	Matrix table with 3 statements. Adapted from Sense of Social and Academic Fit (Walton & Cohen, 2007)
Perceptions of campus climate	How much do you agree with the following statements? At my school... ...I feel that students’ mental and emotional well-being is a priority. ...I feel that the campus climate encourages free and open discussion about mental and emotional health. ...students are working to promote mental health on campus. ...the administration is listening to the concerns of students when it comes to health and wellness. ...I feel that the campus environment has a negative impact on students’ mental and emotional health. ...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	Matrix table with 6 statements.
Feelings of safety	How safe do you feel... ...on your campus during the day? ...on your campus at night? ...in the community surrounding your campus during the day? ...in the community surrounding your campus at night?	1=Very safe 2=Safe 3=Somewhat safe 4=Somewhat unsafe 5=Unsafe 6=Very unsafe	Matrix table with 4 questions.
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	

(11) CLIMATE FOR DIVERSITY AND INCLUSION

Climate for Diversity and Inclusion

The next questions will ask you about your perceptions of campus climate, sense of belonging, and student identity. Remember that your responses are confidential, your participation voluntary, and you may choose to skip questions or stop responding at any point.

SECTION	ITEM	RESPONSE CATEGORIES	CITATIONS/NOTE
School climate	Using the scale below, please rate the overall climate at your school over the past 12 months on the following dimensions: Friendly - Hostile Cooperative - Uncooperative Welcoming- Not welcoming Respectful - Disrespectful Comfortable - Uncomfortable	1=Very friendly 2=Somewhat friendly 3=Neither friendly nor hostile 4=Somewhat hostile 5=Very hostile	Adapted from Perception of Campus Climate (Rankin, 1998) Matrix table containing this measure and the following 4 measures. Instructions for this section: “Please read the following definition of climate before answering the next questions. <i>Definition of Climate:</i> Climate refers to your view of how things generally work in your campus environment e.g.: common attitudes, practices, or behaviors.
Climate for Specific Groups	Please select which of the following groups/backgrounds of students for whom, based on your perception, the overall climate of your school is unwelcoming, hostile, or discriminatory.	1=Students with disabilities 2=Women students 3=Transgender and genderqueer students 4=Gay, lesbian, and bisexual students 5=Racial/ethnic minority students 6=Students with religious beliefs and backgrounds other than being Christian 7=Students with Christian religious beliefs and backgrounds 8=Students who are immigrants or non-US Citizens 9=Students who are the first in their family to attend college (first-generation) 10=Students who are non-native English speakers 11=Students of low socioeconomic status 12=None of the above [mutually exclusive]	Adapted from Perception of Campus Climate (Rankin, 1998) Instructions for this item: “(Use command or control key to select more than 1 sport.)” [multi-select box]
	Please select which of the following racial/ethnic groups/backgrounds of students for whom, based on your perception, the overall climate of your school is unwelcoming, hostile, or discriminatory.	1=African American/African/Black 2=American Indian/Alaska Native 3=Asian/Asian American 4=South Asian/Indian 5=Hispanic/Latinx 6=Middle Eastern/Arab/Arab American 7=Pacific Islander/Native Hawaiian 8=White 9=None of the above [mutually exclusive]	Adapted from Perception of Campus Climate (Rankin, 1998) Instructions for this item (multi-select): “(Use command or control key to select more than 1 sport.)”

	Over the past 12 months at your school, have you observed any exclusionary, intimidating, offensive and/or hostile behavior towards a person or group of people for any of the following reasons? (Select all that apply)	1=Age 2=English language proficiency/accent 3=Gender identity and/or expression 4=Immigrant/citizen status 5=International student status 6=Learning/intellectual disability 7=Height/weight 8=Physical disability 9=Political views 10=Pregnancy 11=Psychological condition 12=Race/ethnicity 13=Religious/spiritual views 14=Sexual identity/orientation 15=Socioeconomic status 16=Other (please specify)	Adapted from Perception of Campus Climate (Rankin, 1998)
	How distressed or bothered do you get when you think about these experiences or incidents?	1=Not at all distressed 2=A little distressed 3=Somewhat distressed 4=Very distressed 5=Extremely distressed	
Anti-racism	How much do you agree with the following statement? I believe my school actively works towards combating racism within the campus community.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	
Sense of belonging	Considering your experiences over the past 12 months , please indicate the extent to which you agree or disagree with the following statements: I feel valued as an individual at this school. I feel I belong at this school. I have considered leaving this school because I felt isolated or unwelcomed. This university is a place where I am able to perform up to my full potential. I have found one or more communities or groups where I feel I belong at this school.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	Matrix table with 5 statements.
	At my school, I feel valued and listened to by: Faculty Other students	1=Strongly disagree 2=Disagree 3=Neither agree nor disagree 4=Agree	Matrix table with 3 statements.

	Campus leadership	5=Strongly agree	
Experiences of discrimination	Please rate the extent to which you agree or disagree with the following statements: 'I am treated fairly and equitably...' ...on campus in general ...in classrooms and classroom settings (e.g., labs, recitation sessions, clinical environments, etc.) ...in out-of-classroom spaces (e.g., workshops, co-curricular offerings, etc.)	1=Strongly disagree 2=Disagree 3=Neither agree nor disagree 4=Agree 5=Strongly agree	Matrix table with 3 statements.
	I have been concerned about my personal safety on campus.	1=Strongly disagree 2=Disagree 3=Neither agree nor disagree 4=Agree 5=Strongly agree	We are interested in learning about your experiences at your school in the past 12 months. Please indicate the extent to which you agree or disagree with the following statement:
	Over the past 12 months at your school, have you <i>personally experienced</i> any exclusionary, intimidating, offensive and/or hostile behavior towards a person or group of people for any of the following reasons? (Select all that apply)	1=Age 2=English language proficiency/accent 3=Gender identity and/or expression 4=Immigrant/citizen status 5=International student status 6=Learning/intellectual disability 7=Height/weight 8=Physical disability 9=Political views 10=Pregnancy 11=Psychological condition 12=Race/ethnicity 13=Religious/spiritual views 14=Sexual identity/orientation 15=Socioeconomic status 16=Other (please specify)	Adapted from Perception of Campus Climate (Rankin, 1998)
	Please note whether and how often you have experienced each of the following events in the past year at my school: Being treated rudely or disrespectfully Not being taken seriously	1=Never 2=Couple times per year 3=Couple times a month 4=Couple times a week 5=Every day	Matrix table with 2 statements. Adapted from Daily Hassles (Harrell, 1997)
	For the following questions, please think about your own experiences in your classes . In your classes, how often... ...did professors call on you less than others because of your race/ethnicity?	1=Almost never 2=Not very often 3=Sometimes 4=Fairly often 5=Very often	Matrix table with 3 questions. Adapted from Classroom Inferiorization Scale (Gomez & Treiweiller, 1999)

	<p>...did you have fears of representing your racial/ethnic group in a negative way that discouraged you from participating in class? ...did you feel that others were taking your opinion as speaking for all members of your racial/ethnic group?</p>		
Identity connectedness	Please indicate the extent to which you agree or disagree with the following statement: I have a group, community, or social circle at my school where I feel I belong (feel at home, known, connected to, supported in my identity)	1=Strongly disagree 2=Somewhat disagree 3=Somewhat agree 4=Strongly agree	
	<p>How often do you attend meetings, events, activities, clubs, social gatherings, etc., that support your:</p> <p>Racial/ethnic identity Sexual identity Gender/gender identity Religious/spiritual identity</p>	1=Never 2=Less than once per month 3=1-3 times per month 4=Weekly 5=Multiple times per week 6=Every day	Matrix table with 4 factors/statements.
Community and Identity	<p>People may think about their racial or ethnic identity in different ways. Please respond how much you agree or disagree with the following statements.</p> <p>Being a member of my racial/ethnic group is an important reflection of who I am. I have a strong sense of belonging with other people in my racial/ethnic group. I have a strong attachment to other people in my racial/ethnic group.</p>	1=Strongly disagree 2=Disagree 3=Neither agree nor disagree 4=Agree 5=Strongly agree	Matrix table with 3 statements. (Crocker, 1992;Sellers, 1998)
Perceptions of campus programs/policies/efforts	Please check the policies, programs or initiatives that you are aware your school has (check all that apply):	1=Diversity, equity, inclusion or related strategic plan 2=Chief Diversity Officer or other senior-level administrator focused on diversity, equity and inclusion 4=LGBTQ Center 5=Multicultural student Center 8=Race, ethnicity, diversity or related course requirement 12=In state tuition, funding or scholarships available for undocumented students 13=Gender neutral bathroom options 14=Comprehensive nondiscrimination policy that includes race, sex, gender identity and expression, sexuality, color, religion, creed, national origin or ancestry, age, and marital status 15=Policy/procedure allowing students to indicate their preferred name and pronoun on campus records (e.g. course rosters and directory listings) 16=Veterans services coordinator	

		<p>17=Student health insurance coverage for transition-related medical expenses (e.g., hormone replacement therapy)</p> <p>18=gender neutral housing options</p> <p>22=Counselor(s) trained in providing therapy/mental health counseling to gender minority students</p> <p>23=Center for First-Generation Studies</p>	
	<p>Instructions for this item: "Please rate the extent to which you agree or disagree with the following statements:</p> <p>My school fosters respect for cultural differences.</p> <p>My school has made a special effort to help students from diverse backgrounds feel like they belong on campus.</p>	<p>1=Strongly disagree</p> <p>2=Disagree</p> <p>3=Neither agree nor disagree</p> <p>4=Agree</p> <p>5=Strongly agree</p>	<p>Matrix table with 2 statements.</p> <p>Adapted from Racial Climate subscale (Reid & Radhakrishnan, 2003)</p>
Identity	What language was spoken at home growing up?	<p>1=Only English</p> <p>2=Mostly English</p> <p>3=English and 1 other language</p> <p>4=Mostly 1 other language</p> <p>5=Only 1 other language</p> <p>6=More than 2 languages</p>	
	What language do you use when you speak with your friends?	<p>1=Only English</p> <p>2=Mostly English</p> <p>3=Both English and native language equally</p> <p>4=Mostly native language</p> <p>5=Only native language</p>	
	Regardless of your own immigration or citizenship status, how much do you worry that you, a family member, or a close friend could be deported?	<p>1=Not at all</p> <p>2=Not too much</p> <p>3=Some</p> <p>4=A lot</p>	(Pew Hispanic Center, 2007 National Survey of Latinos)
	Where were your parents/guardians born?	<p>1=United States</p> <p>2=United States territories (Puerto Rico, Guam, American Samoa, Northern Mariana Islands, US Virgin Islands)</p> <p>3=Outside of the U.S./U.S. territories</p> <p>4=I don't know</p> <p>5=Not applicable</p>	Instructions for this item (multi-select): "If your parents/guardians were born in different countries/territories, select multiple by using the command or control key"

(12) ACADEMIC PERSISTENCE, RETENTION AND COMPETITION

Academic Experiences and Goals

The next questions will ask you about your experiences as a student, your academic goals, stress, 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
Stress mindset	Please rate the extent to which you agree or disagree with the following statements. Experiencing stress depletes health and vitality. Experiencing stress enhances performance and productivity. Experiencing stress inhibits learning and growth. 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	Matrix table with 4 statements. Crum, Salovey, & Achor (2013)
Perceived competition	How would you rate the overall competitiveness among students... ...in your current classes? ...at your school? ...in your field of study?	1=Very competitive 2=Competitive 3=Somewhat competitive 4=Not competitive 5=Very uncompetitive	Matrix table with 3 questions.
	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. It is important to me to confirm my intelligence through my schoolwork. In school, I am always seeking opportunities to develop new skills and acquire new knowledge. It is very important to me to feel that my coursework offers me real challenges.	1=Strongly disagree 2=Disagree 3=Neither agree nor disagree 4=Agree 5=Strongly agree	Matrix table with 4 statements. Adapted from Achievement Goal Inventory (Grant & Dweck, 2003)
Imposter Syndrome	How much do you agree with the following statements? I'm afraid people important to me may find out that I'm not as capable as they think I am.	1=Strongly disagree 2=Disagree 3=Neither agree nor disagree 4=Agree 5=Strongly agree	Matrix table with 5 statements. Adapted from The Imposter Phenomenon (Clance, 1985)

	<p>Sometimes I feel or believe that my success in life or in academics has been the result of some kind of error. At times, I feel my success was due to some kind of luck.</p> <p>Sometimes I'm afraid others will discover how much knowledge or ability I really lack.</p> <p>I often compare my ability to those around me and think they may be more intelligent than I am.</p>		
Overall academic experience	<p>How much do you agree with the following statement?</p> <p>If I could make my choice over, I would still choose to enroll at my school.</p>	<p>1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree</p>	
	<p>How much do you agree with the following statement?</p> <p>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 4=Somewhat disagree 5=Disagree 6=Strongly disagree</p>	Display if "Non-degree student" not selected for "In what degree program are you currently enrolled?"
	<p>Which of the following challenges are most likely to prevent you from finishing your degree? (Select all that apply)</p>	<p>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)</p>	
	<p>What is the highest degree you plan to pursue?</p>	<p>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</p>	
	<p>How much do you agree with the following statements?</p>	<p>1=Strongly agree 2=Agree 3=Somewhat agree</p>	Matrix table with 3 statements.

	I have doubts about whether higher education is worth the time, money, and effort that I'm spending on it. My family is very supportive of my educational goals. My professors believe in my potential to succeed academically.	4=Somewhat disagree 5=Disagree 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? ...failed one or more courses since you began as a student at your school?	1=Yes 0=No	Matrix table with 2 questions.
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? ...interacted with faculty during office hours since you began as a student at your school? ...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? ...interacted with academic advisors/counselors (e.g., by phone, email, text, or in person) since you began as a student at your school? ...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	Matrix table with 5 questions.
Faculty Advising (PhD Students)	Which best describes how your mental and emotional health is affected by your faculty advisor(s)?	1=Strong negative effect 2=Somewhat negative effect 3=No effect/neutral effect 4=Somewhat positive effect 5=Strong positive effect	Display if selected "6=PhD (or equivalent doctoral program)" as degree program.
Overall social experience	How has it been to...	1=Very easy 2=Easy 3=Somewhat easy	Matrix table with 2 questions.

	<p>...develop close friendships with other students at your school? ...manage your time effectively since you began as a student at your school?</p>	<p>4=Somewhat difficult 5=Difficult 6=Very difficult</p>	
<p>Issues affecting academic performance</p>	<p>In the past year, how has the following affected your academic performance? (Select all that apply)</p> <ul style="list-style-type: none"> Anxiety/stress Depression/suicidality Eating/body image concerns Attention disorder or learning disability (e.g., attention deficit disorder, attention deficit hyperactivity disorder, learning disability) Alcohol/substance use Physical health condition Physical assault Sexual assault 	<p>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 (please specify)</p>	<p>Matrix table with 8 factors. Adapted from American College Health Association's National College Health Assessment</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	<p>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.</p> <p>My painful experiences and memories make it difficult for me to live a life that I would value. I'm afraid of my feelings. I worry about not being able to control my worries and feelings. My painful memories prevent me from having a fulfilling life. Emotions cause problems in my life. It seems like most people are handling their lives better than I am. Worries get in the way of my success.</p>	<p>1=Never true 2=Very seldom true 3=Seldom true 4=Sometimes true 5=Frequently true 6=Almost always true 7=Always true</p>	<p>Matrix table with 7 statements. Acceptance and Action Questionnaire-II (AAQ-II) (Bond, Hayes, Baer, Carpenter, Guenole, Orcutt, Waltz, & Zettle, 2011)</p>
Emotional resilience	<p>Please indicate the extent to which you agree with each of the following statements:</p> <p>I tend to bounce back quickly after hard times. I have a hard time making it through stressful events. It does not take me long to recover from a stressful event. It is hard for me to snap back when something bad happens. I usually come through difficult times with little trouble. 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>Matrix table with 6 statements. Brief Resilience Scale (BRS) (Smith, Dalen, Wiggins, Tooley, Christopher, & Bernard, 2008)</p>
Self-Compassion Scale	<p>Please read each statement carefully before answering. Indicate how often you behave in the stated manner:</p> <p>I try to be understanding and patient towards those aspects of my personality I don't like. When something painful happens I try to take a balanced view of the situation. I try to see my failings as part of the human condition. When I'm going through a very hard time, I give myself the caring and tenderness I need. When something upsets me, I try to keep my emotions in balance. When I feel inadequate in some way, I try to remind myself that feelings of inadequacy are shared by most people.</p>	<p>1=Almost never 2=Rarely 3=Sometimes 4=Often 5=Almost always</p>	<p>Matrix table with 6 statements.</p>

(14) 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	CCMH Standardized Data Set
	How would you describe your financial situation right now?	1=Always stressful 2=Often stressful 3=Sometimes stressful 4=Rarely stressful 5=Never stressful	CCMH Standardized Data Set
	Within the past 12 months I worried whether our food would run out before we got money to buy more.	1=Often true 2=Sometimes true 3=Never true	
	Within the past 12 months the food I bought just didn't last and I didn't have money to get more.	1=Often true 2=Sometimes true 3=Never true	
	Within the past 12 months, which of the following expenses have you had difficulty paying for? (Select all that apply)	1=School 2=Food 3=Transportation 4=Childcare 5=Health care 6=Textbooks or course materials 7=Housing 8=None of the above [mutually exclusive]	
Housing concerns	Do you have any concerns about your current living situation, like housing conditions, safety, and costs?	1=Yes 2=No	
	What are those concerns? (Select all that apply.)	1=Condition/quality of housing 2=Lack of more permanent housing 3=Ability to pay for housing or utilities 4=Feeling safe 5=Other (please specify)	Display if "Yes" is selected for "Do you have any concerns about your current living situation, like housing conditions, safety, and costs?"
	Which of the following have you used to pay for educational expenses (room, board, tuition, and fees)? (Select all that apply)	1=Family resources (parents, relatives, spouse, etc.) 2=Your own resources (income from work, work-study, etc.) 3=Aid that need not be repaid (grants, scholarships, military, etc.)	

		4=Aid that must be repaid (loans) 5=Other sources (please specify)	
Financing education	To what extent do you agree or disagree with the following statements? I am worried about my ability to pay for school. I am worried about my ability to repay my student loans in the future [if loans selected above] My student loans negatively impact my mental health [if loans selected above]	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	
Scholarship Status	Do you receive scholarship funding from your institution? (Select all that apply)	1=No [mutually exclusive] 2=Yes, a need based scholarship 3=Yes, an academic scholarship (or merit scholarship) 4=Yes, an athletic scholarship 5=Other (please specify)	

(15) STUDENT ATHLETES MODULE

STUDENT ATHLETES

The next questions will ask you about unique experiences student athletes may face that may impact your college experience. Remember your responses are confidential and you may choose to skip questions or stop responding at any point.

Displayed if Student Athlete Module is selected and participant indicates they are an intercollegiate varsity athlete.

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
Academic Information	How much time do you spend participating in your sport (including practice, team meetings, workouts, etc.)? <i>(If this varies by season, please approximate the average week across the whole academic year)</i>	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	
	In what division is the sport that you play?	1=NCAA Division 1 2=NCAA Division 2 3=NCAA Division 3 4=NAIA 5=NJCAA Division 1 6=NJCAA Division 2 7=NJCAA Division 3	
Financial	Have you received a scholarship for your participation in athletics?	1=Yes 2=No	
Concussion / TBI history	Thinking about any injuries to your head or neck that you have had in your lifetime, were you ever <u>knocked out</u> or did you <u>lose consciousness</u> ?	0=No 1=Yes 2=I don't know 3=Prefer not to say	Instructions: "For these next questions, please think about injuries you have had during your entire lifetime, especially those that affected your head or neck. It might help to remember times you went to the hospital or emergency room. Think about injuries you may have received from a car, motorcycle, ATV, or snowmachine/snowmobile accident; bicycle crash; being hit by something or by someone; falling down; playing sports; or an injury on the job or during military service."
	Thinking about any injuries to your head or neck that you have had in your lifetime, were you ever <u>dazed</u> or <u>have a gap in your memory from any of the injuries</u> ?	0=No 1=Yes 2=I don't know 3=Prefer not to say	Display if "0=No" is selected for "Thinking about any injuries to your head or neck that you have had in your lifetime, were you ever <u>knocked out</u> or did you <u>lose consciousness</u> ?"

	How old were you <u>the first time</u> you were <u>dazed</u> or have a <u>gap in your memory from an injury</u> ?	[open text] force numeric	Display if "1=Yes" is selected for "Thinking about any injuries to your head or neck that you have had in your lifetime, were you ever <u>dazed</u> or have a <u>gap in your memory from any of the injuries</u> ?"
	What was the <u>longest time</u> you were knocked out or unconscious? Would you say... (If you aren't sure, please make your best guess)	1=Less than 5 minutes 2=Between 5 and 30 minutes 3=More than 30 minutes but less than 24 hours 4=24 hours or longer 5=I don't know 6=Prefer not to say	Display if "1=Yes" is selected for "Thinking about any injuries to your head or neck that you have had in your lifetime, were you ever <u>knocked out</u> or did you <u>lose consciousness</u> ?"
	How old were you <u>the first time</u> you were knocked out or lost consciousness?	[open text] force numeric	Display if "1=Yes" is selected for "Thinking about any injuries to your head or neck that you have had in your lifetime, were you ever <u>knocked out</u> or did you <u>lose consciousness</u> ?"
	How much do you agree or disagree with the following statement? There is a good support system in my athletic department for athletes going through difficult times.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	
Psychological Strain	Please think back over the last four weeks and respond to each item considering how often it applied to you. It was difficult to be around teammates I found it difficult to do what I needed to do I was less motivated I was irritable, angry or aggressive I could not stop worrying about injury or my performance I found training more stressful I found it hard to cope with selection pressures I worried about life after sport I needed alcohol or other substances to relax I took unusual risks off-field	1=None of the time 2=A little of the time 3=Some of the time 4=Most of the time 5=All of the time	Matrix table with 10 statements Athlete Psychological Strain Questionnaire (APSQ) by Rice et al., 2019
Attitudes	How much do you agree with the following statements? I am overwhelmed with time spent on athletics. I would prefer to receive mental health services from my athletic department than other sources. I feel like my mental health is a priority for my university . I feel like my mental health is a priority for my coach . I feel like my mental health is a priority for my athletic department . I feel comfortable going to my coach for a mental health concern.	1=Strongly Agree 2=Agree 3=Somewhat Agree 4=Somewhat Disagree 5=Disagree 6=Strongly Disagree	

	I would feel comfortable receiving mental health treatment that includes psychotherapy. I would feel comfortable receiving mental health treatment that includes medication.		
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(16) PEER & FRIEND SUPPORT MODULE

PEER & FRIEND SUPPORT

The next set of questions aims to assess attitudes toward and impact from support that is provided by peers and friends **since being in college (this includes friends met prior to college whom you continue to feel supported by while in college)**. As such, this module contains two sections: one specific to “friend support”, and one specific to “peer support”.

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
Friend Support	<p>We are interested in how you feel about the following statements. Read each statement carefully. Indicate how you feel about each statement.</p> <p>My friends really try to help me. I can count on my friends when things go wrong. I have friends with whom I can share my joys and sorrows. I can talk about my problems with my friends.</p>	<p>1=Very strongly disagree 2=Strongly disagree 3=Mildly disagree 4=Neutral 5=Mildly agree 6=Strongly agree 7=Very strongly agree</p>	<p>Introduction to Section: Friend Support: <i>This section pertains to “friend support” since being in college (this includes friends met prior to college whom you continue to feel supported by while in college). Please keep the following definition of friend support in mind when completing the following questions in this section: “Friend support is the process of confiding in friends as a form of support.”</i></p> <p>Matrix table with 4 statements.</p> <p>MSPSS (Zimet, et al., 1988)</p>
	<p>The top benefits I get/have gotten from utilizing friend support since being in college include: (Select all that apply)</p>	<p>1=Maintaining/increasing my sense of belonging. 2=Maintaining/increasing my academic performance. 3=Maintaining/increasing my mental wellbeing. 4=Maintaining/increasing my feelings of safety/security. 5=Other (please specify) 6=N/A, I do not utilize/have not utilized friend support since being in college. [mutually exclusive]</p>	<p><i>Please keep the following definition of friend support in mind when completing the following questions in this section: “Friend support is the process of confiding in friends as a form of support.”</i></p> <p>Instructions for item: We are interested in how you feel about the following statements. Read each statement carefully. Indicate how you feel about each statement.</p>
	<p>Since being in college, which of the following are reasons why you do not utilize/have not utilized friend support? (Select all that apply)</p>	<p>1=Not having a friend or friend groups to talk to. 2=Not feeling comfortable talking to a friend(s) about my concerns. 3=Not expecting a friend(s) to be of any help. 4=Feeling like I can handle my concerns on my own. 5=Feeling like my concerns would be a burden to my friend(s). 6=Other (please specify)</p>	<p>Display if “N/A, I do not utilize/have not utilized friend support since being in college. “ is selected for “The top benefits I get/have gotten from utilizing friend support since being in college include”</p>
	<p>Since being in college, which of the following are barriers you face/have faced to utilizing friend support, if any?</p>	<p>1=Not having a friend or friend groups to talk to. 2=Not feeling comfortable talking to a friend(s) about my concerns. 3=Not expecting a friend(s) to be of any help. 4=Feeling like I can handle my concerns on my own. 5=Feeling like my concerns would be a burden to my friend(s). 6=Other (please specify) 7=I do not face/have not faced barriers to utilizing friend support [mutually exclusive]</p>	<p>Display if “N/A, I do not utilize/have not utilized friend support since being in college. “ is not selected for “The top benefits I get/have gotten from utilizing friend support since being in college include”</p>

	Please indicate how you prefer to utilize friend support:	1=In-person 2=Virtually (e.g., phone, computer, social media, etc.) 3=Other (please specify)	Display if "N/A, I do not utilize/have not utilized friend support since being in college. " is not selected for "The top benefits I get/have gotten from utilizing friend support since being in college include"
Peer Support	<p>Please indicate how much you agree with the following statements:</p> <p>It is easier/I think it would be easier to confide in peers I just met than in my closest friends If I were experiencing mental health concerns, I would prefer to discuss these concerns with a peer(s) near my age instead of a professor, counselor, or other professional support. If I were experiencing mental health concerns, I would prefer to discuss these concerns with a peer(s) with shared identities (e.g., race/ethnicity, religion, sexual orientation, gender identity, etc.) instead of a professor, counselor, or other professional support with shared identities. Peer support is only for people with diagnosed mental illnesses. I would think less of someone who sought out peer support for help. I would be nervous to attend a peer support service consisting of someone/people I do not know.</p>	<p>1=Strongly disagree 2=Somewhat disagree 3=Neither agree nor disagree 4=Somewhat agree 5=Strongly agree</p>	<p>Introduction to Section: <i>This section pertains to "peer support" since being in college. Please keep the following definition of peer support in mind when completing the following questions in this section: "Peer support is defined as the process of confiding in trained peers or peers (not friends) with similar lived experiences as a form of support. This support is NOT provided by professionals (e.g., therapists, or other clinicians). Peer support is NOT the same as support from friends. Some examples of peer support include: one-on-one peer counseling; group-based peer support."</i></p> <p>Matrix table with 6 statements.</p>
	<p>Since being in college, which of the following types of peer support have you utilized that are school-based (i.e., services sponsored by or affiliated with your school)? (Select all that apply)</p>	<p>1=One-to-one peer support for academic concerns (e.g. peer advising) 2=One-to-one peer support for mental/emotional health concerns (e.g. peer counseling) 3=General peer support group 4=Identity-based peer support group (i.e. LGBTQ+, students of color, etc.) 5=Issue-based peer support group (i.e. eating disorders, anxiety, grief, etc.) 6=Other (please specify): 7=None of the above [mutually exclusive]</p>	
	<p>Please consider your experience with {activity selected in previous question} when answering the following questions.</p> <p>My {peer counselor/peer support group members} really tried to help me.</p>	<p>1=Very strongly disagree 2=Strongly disagree 3=Mildly disagree 4=Neutral 5=Mildly agree 6=Strongly agree</p>	<p>Matrix table(s) with 4 statements. Number of matrix table questions depends on number of activities selected for "Since being in college, which of the following types of peer support have you utilized that are school-based (i.e. services sponsored by or affiliated with your school)? (Select all that apply)"</p>

	<p>I could count on my {peer counselor/peer support group members} when things went wrong. I could share my joys and sorrows with my {peer counselor/peer support group members}. I could talk about my problems with my {peer counselor/peer support group members}.</p>	<p>7=Very strongly agree</p>	<p>Display if “7=None of the above” is NOT selected in previous question. Adapted from: MSPSS (Zimet, et al., 1988)</p>
	<p>Since being in college, which of the following types of peer support have you utilized that are NOT school-based (i.e., services NOT sponsored by or affiliated with your school)? (Select all that apply)</p>	<p>1=One-to-one peer support for academic concerns (e.g. peer advising) 2=One-to-one peer support for mental/emotional health concerns (e.g. peer counseling) 3=General peer support group 4=Identity-based peer support group (i.e. LGBTQ+, students of color, etc.) 5=Issue-based peer support group (i.e. eating disorders, anxiety, grief, etc.) 6=Other (please specify): 7=None of the above [mutually exclusive]</p>	
	<p>Instructions for this item: Please consider your experience with {activity selected in previous question} when answering the following questions. My {peer counselor/peer support group members} really tried to help me. I could count on my {peer counselor/peer support group members} when things went wrong. I could share my joys and sorrows with my {peer counselor/peer support group members}. I could talk about my problems with my {peer counselor/peer support group members}.</p>	<p>1=Very strongly disagree 2=Strongly disagree 3=Mildly disagree 4=Neutral 5=Mildly agree 6=Strongly agree 7=Very strongly agree</p>	<p>Matrix table(s) with 4 statements. Number of matrix table questions depends on number of activities selected for “Since being in college, which of the following types of peer support have you utilized that are NOT school-based (i.e. services NOT sponsored by or affiliated with your school)? (Select all that apply)” Display if “7=None of the above” is NOT selected in previous question. Adapted from: MSPSS (Zimet, et al., 1988)</p>
	<p>The top benefits I get/have gotten from utilizing peer support since being in college include: (Select all that apply)</p>	<p>1=Maintaining/increasing my sense of belonging. 2=Maintaining/increasing my academic performance. 3=Maintaining/increasing my mental wellbeing. 4=Maintaining/increasing my feelings of safety/security. 5=Other (please specify) 6=N/A, I do not utilize/have not utilized peer support since being in college. [mutually exclusive]</p>	
	<p>Since being in college, which of the following are reasons why you do not utilize/have not utilized peer support? (Select all that apply)</p>	<p>1=Not having access to peer support. 2=Not feeling comfortable talking to a peer(s) about my concerns. 3=Not expecting a peer(s) to be of any help.</p>	<p>Display if “N/A, I do not utilize/have not utilized friend support since being in college.” is selected for “The top benefits I get/have gotten from utilizing peer support since being in college include.”</p>

		<p>4=Feeling like I can handle my concerns on my own. 5=Feeling like my concerns would be a burden to my peer(s). 6=Other (please specify)</p>	
	<p>Since being in college, which of the following are barriers you face/have faced to utilizing peer support, if any? (Select all that apply)</p>	<p>1=Not having access to peer support. 2=Not feeling comfortable talking to a peer(s) about my concerns. 3=Not expecting a peer(s) to be of any help. 4=Feeling like I can handle my concerns on my own. 5=Feeling like my concerns would be a burden to my peer(s). 6=Other (please specify) 7=I do not face/have not faced barriers to utilizing peer support [mutually exclusive]</p>	<p>Display if "N/A, I do not utilize/have not utilized friend support since being in college." is not selected for "The top benefits I get/have gotten from utilizing peer support since being in college include."</p>
	<p>Please indicate how you prefer to utilize peer support:</p>	<p>1=In-person 2=Virtually (e.g., phone, computer, etc.) 3=Other (please specify)</p>	<p>Display if "N/A, I do not utilize/have not utilized friend support since being in college." is not selected for "The top benefits I get/have gotten from utilizing peer support since being in college include."</p>

(17) PUBLIC SAFETY AND POLICING

This set of questions are about your experience with and views of police and public safety. As a reminder, all information you share is anonymous and confidential. You may take a break from the survey at any time and return to it later if you want.

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
<i>Experiences prior to college</i>	We would like to learn more about your experience with police prior to attending your school. How would you describe your interactions with police prior to coming to [school]?	1=I did not have experiences with police 2=Very positive 3=Positive 4=Neither positive or negative 5=Negative 6=Very negative	
	Approximately how many police encounters have you had across your lifetime (prior to coming to [school])?	1=0 2=1-3 3=4-6 4=7-9 5=10+	Display if any answer other than "I did not have experiences with police" is selected
	Growing up, were you taught by family or friends to minimize your chance of harm when interacting with police?	1=Yes 2=No	
<i>Experiences While a Student</i>	Please indicate which of the following types of contact you've had with police during your time as a student at your school. (Select all that apply)	1=No contact 2=Casual conversation 3=Assistance with a car 4=Asked a police official for information or advice 5=Traffic stop 6=Telephone contact with dispatcher 7=Witness to a crime 8=Victim of a crime 9=Crime prevention program 10=Interacted with an officer patrolling the campus by foot 11=Traffic accident 12=Interaction with an officer patrolling the campus by bike 13=Noise complaint 14=Event planning 15=They responded when I had a mental health concern 16=Asked to present my ID 17=Stopped by police 18=Questioned by police 19=Called-in for questioning by police	Instructions for this item: We would like to learn more about your experience with police as a student at [school]: on campus, where you live, and where you work. For these questions, when we refer to police, we include campus police, local police, and other law enforcement in the community (e.g., County Sheriffs, State Police, Immigration and Customs Enforcement (ICE) Officers).

		20=Other (please indicate):	
	Please indicate the number of interactions or experiences you've had with police during your time as a student at [school]:	1=0 2=1-3 3=4-6 4=7-9 5=10+	Display only if "no contact" is not selected for "Please indicate which of the following types of contact you've had with police during your time as a student at [school] (check all that apply)"
	How would you characterize these experiences?	1=Very positive 2=Positive 3=Neither positive or negative 4=Negative 5=Very negative	
	Who were these experiences with? (Select all that apply)	1=I don't know 2=[Insert school's choices] 3=Immigration and Customs Enforcement (ICE) 4=Other (please specify):	
	Were you treated fairly in these interactions with police?	1=None of the time 2=Some of the time 3=All of the time	
	Have you ever avoided calling the police for an incident or situation while a [school] student?	1=Yes 2=No	
	For what reason did you avoid calling the police? (Select all that apply)	1=Concern for my own safety if police were to get involved 2=Concern for the safety of others if police were to get involved 3=Concern about legal consequences (e.g. arrest, deportation) if the police were to get involved 4=Concern about disciplinary consequences (e.g. from [school]) if the police were to get involved 5=Concern that police presence would escalate the situation 6=Called someone I thought would be more helpful 7=Other (Please specify):	
	Did you contact someone else instead? (Select all that apply)	1=I did not contact someone else 2=I contacted a friend 3=I contacted a family member 4=I contacted a staff member 5=I contacted someone in Greek Life or other social organization 6=I contacted a faculty member 7=Other (please specify the type of contact, not a name):	

	<p>Some students report being “policed” (e.g., watched, monitored, profiled, surveilled) by entities other than the police. Have you ever been “policed” by any of the following while a student at your school? (Select all that apply)</p>	<p>1=No, I have not been policed 2=I’m not sure 3=Housing staff 4=Greek Life or other social organization staff 5=My peers 6=Faculty 7=Teaching Assistant (TA) 8=Staff in my school or department 9=Library staff 10=Dining hall staff 11=Custodial staff in buildings 12=Campus recreation staff 13=Other (please specify):</p>	
Views and Attitudes	<p>How does the presence of police on campus impact your mental health? Please describe.</p>	[Text box]	
	<p>Please rate the extent to which you agree or disagree with the following statements:</p> <p>Having <i>armed</i> police officers on campus is good for my mental health Having <i>unarmed</i> police officers on campus is good for my mental health A police presence on campus makes me feel safe</p>	<p>6=Strongly disagree 7=Disagree 8=Agree 9=Strongly agree</p>	Matrix table with 3 statements.
	<p>How much do you agree or disagree with the following statement?</p> <p>[school] students of color are treated differently by law enforcement based on their perceived racial identity</p>	<p>1=Strongly disagree 2=Disagree 3=Agree 4=Strongly agree 5=Don’t know</p>	
	<p>If you were in distress due to a mental health concern, please rate your level of comfort with the police being involved in responding.</p>	<p>1=Very uncomfortable 2=Uncomfortable 3=Comfortable 4=Very comfortable</p>	
	<p>If you were in the situation described above, would you like to have someone else present, in addition to a police officer, who serves as an advocate for you? (Select all that apply)</p>	<p>1=Yes, a trained mental health provider or counselor 2=Yes, a trained staff member 3=Yes, a representative from [campus health and wellness resource] 4=Yes, a trained peer or fellow student 5=Yes, a friend or family member 6=No, I would prefer no one else be involved in addition to the police 7=I don’t think police officers should be involved in</p>	

		these situations 8=Other (please specify:) [TEXT BOX]	
	How have your thoughts and feelings about interaction or potential interaction with police while a [school] student affected your academic performance?	1=Very positively 2=Positively 3=Neither positively or negatively 4=Negatively 5=Very negatively	
	Please explain:	[text box]	
	Please rate the extent to which the following are or are not concerns you have about campus police/security: Racial profiling (targeting people of color without evidence of criminal activity and based on perceived race, ethnicity, national origin or religion) Carrying weapons Lack of training (e.g., anti-racism training, mental health training, unconscious bias) Lack of oversight Too much funding/overspending Other (please specify)	1=Not a problem 2=Might be a problem 3=This is a problem 4=This is a big problem 5=I don't know enough about this to say	Matrix question with 5 statements.

(18) Black College Student Mental Health

The next set of questions were developed in partnership with UNCF and the Steve Fund specifically for students at Historically Black Colleges and Universities (HBCUs) and Predominantly Black Institutions (PBIs). Remember your responses are confidential and you may choose to skip questions or stop responding at any point.

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
Resources	How much do you agree with the following statements? I like to stay informed about resources and events for mental health and well-being I am comfortable visiting my school counseling center when a mental health issue arises I am comfortable reaching out to a mental health resource outside of campus I go to social media for mental health support	1=Strongly agree 2=Agree 3=Neither agree nor disagree 4=Disagree 5=Strongly disagree	Matrix table with 4 statements. Adapted from existing Steve Fund/UNCF Questionnaire
	What have you heard from other students about the quality of mental health and psychological counseling services at your school?	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 have not heard anything	
Social Support	How much do you agree with the following statement? I have friends at school with whom I can share my thoughts and feelings.	1=Strongly agree 2=Agree 3=Neither agree nor disagree 4=Disagree 5=Strongly disagree	
	Since I began college, my friends have been _____ in contributing to my: Sense of belonging on campus Academic performance Mental well-being Feelings of safety and security	1=Very important 2=Moderately important 3=Slightly important 4=Not important	Matrix table with 4 factors.
	How much do you agree with the following statement? When I feel sad or down, I tend to keep those feelings to myself.	1=Strongly agree 2=Agree 3=Neither agree nor disagree 4=Disagree 5=Strongly disagree	
Student Mental Health	Please identify which of the following have most negatively impacted your mental health in your lifetime: (Select up to 3)	1=Racism/racial stress 2=Sexual Trauma 3=Grief 4=Anxiety	Adapted from existing Steve Fund/UNCF Questionnaire

		<p>5=Depression 6=Gender discrimination 7=Sexual orientation discrimination 8=Religious discrimination 9=Alcohol and other drugs 10=Social and familial relationships 11=Academic stress 12=COVID-19 13=Other (please specify) 14=None of these (mutually exclusive)</p>	
	<p>Please identify which of the following have most negatively impacted your mental health in the past 6 months: (Select up to 3)</p>	<p>1=Racism/racial stress 2=Sexual Trauma 3=Grief 4=Anxiety 5=Depression 6=Gender discrimination 7=Sexual orientation discrimination 8=Religious discrimination 9=Alcohol and other drugs 10=Social and familial relationships 11=Academic stress 12=COVID-19 13=Other (please specify) 14=None of these (mutually exclusive)</p>	<p>Adapted from existing Steve Fund/UNCF Questionnaire</p>
	<p>Since you've been a student at [school name], what are the top 3 stressors you have faced? (Select up to 3)</p>	<p>1=Finding a job 2=Balancing work and school 3=Applying for graduate school 4=Extracurricular activities 5=Family issues 6=Relationships 7=Financial stress 8=Staying in school 9=None of these (mutually exclusive)</p>	<p>Adapted from Williams, L., & Washington, G. (2018). Soul glow: An application for helping to understand and improve mental health care of HBCU students</p>
	<p>How much do you agree with the following statement? The top 3 stressors I identified above have made me consider not returning to school next semester.</p>	<p>1=Strongly agree 2=Agree 3=Neither agree nor disagree 4=Disagree 5=Strongly agree</p>	
	<p>How helpful on average do you think therapy or counseling would be for you if you were having mental health concerns?</p>	<p>1=Extremely helpful 2=Very helpful 3=Moderately helpful 4=Slightly helpful 5=Not helpful at all</p>	

	<p>How much do you agree with the following statement?: If I were experiencing mental health concerns, it would be important to me to discuss these concerns with a therapist/counselor who shares my:</p> <p>Race/ethnicity Sexual Orientation Gender identity Religion</p>	<p>1=Strongly disagree 2=Somewhat disagree 3=Neither agree nor disagree 4=Somewhat agree 5=Strongly agree</p>	<p>Matrix table with 4 factors.</p>
Stigma	<p>How much do you agree with the following statement?</p> <p>Most people feel that receiving mental health treatment is a sign of personal weakness.</p>	<p>1=Strongly agree 2=Agree 3=Neither agree nor disagree 4=Disagree 5=Strongly disagree</p>	
	<p>Which of the following are reasons you may not go to therapy? (Select all that apply)</p>	<p>1=I have a busy schedule 2=I do not see therapy as valuable 3=I am afraid of what my friends or family may think if they knew I was receiving therapy 4=I cannot afford it 5=I do not know how to begin therapy 6=The wait time to my campus counseling center is too long 7=My counseling center does not have therapists I identify with 8=I do not feel comfortable talking to a stranger about my issues 9=I do not think therapy can help me 10=I do not need therapy 11=None of these (mutually exclusive)</p>	
	<p>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?</p>	<p>0=None 1=1-3 2=3-5 3=5+ 6=Don't know</p>	
	<p>I would get professional mental health support if I were experiencing this consistently:</p> <p>Feeling down, depressed, or hopeless Little interest or pleasure in doing things Trouble falling or staying asleep, or sleeping too much Trouble concentrating on things Panic attacks</p>	<p>1=Very untrue 2=Untrue 3=Somewhat untrue 4=Somewhat true 5=True 6=Very true</p>	<p>Matrix table with 5 statements.</p>

<p>Mental Health Education</p>	<p>How much do you agree with the following statement? I have a good idea of how to recognize that a friend or peer is in emotional or mental distress.</p>	<p>1=Strongly agree 2=Agree 3=Neither agree nor disagree 4=Disagree 5=Strongly disagree</p>	<p>Included if "Knowledge and Attitudes" module is not included</p>
	<p>How much do you agree with the following statement? I feel confident helping a friend or peer with a mental health challenge.</p>	<p>1=Strongly agree 2=Agree 3=Neither agree nor disagree 4=Disagree 5=Strongly disagree</p>	<p>Included if "Knowledge and Attitudes" module is not included</p>
	<p>In the past 6 months, have you ever looked for information on the following topics about mental or emotional health from any source? <i>(Select all that apply)</i></p>	<p>1=Symptoms of common mental illnesses (e.g., anxiety, depression, eating disorders) 2=Where to seek treatments for mental illnesses 3=Self-help and coping strategies 4=Recognizing if someone is experiencing mental or emotional distress 5=How to support someone affected by mental illnesses 6=How therapy works 7=What types of questions to ask in therapy 8=Other (specify) 9= No, I have not looked for information about any topics regarding mental or emotional health in the past 6 months <i>(mutually exclusive)</i></p>	<p>Included if "</p>
<p>Resilience and Coping</p>	<p>In the past 6 months, I most often coped with my stress by: <i>(Select all that apply)</i></p>	<p>1=Praying/leaning on my spiritual beliefs 2=Drinking alcohol 3=Smoking or using other drugs 4=Calling a friend or family member 5=Exercising or being physically active 6=Meditating 7=Listening to music 8=Using social media for mental health support and resources 9=Eating 10=Binge watching TV 11=None of the above <i>(mutually exclusive)</i></p>	<p>Included if "Resilience and Coping" Module is not selected Adapted from Williams, L., & Washington, G. (2018). Soul glow: An application for helping to understand and improve mental health care of HBCU students</p>
	<p>The following is a list of items that may or may not be relevant for you. Some of the questions may sound similar, but each is important. Please read and complete each item to the best of your ability using the response scale provided. I try to present an image of strength.</p>	<p>0=This is not true for me 1=This is true for me rarely 2=This is true for me sometimes 3=This is true for me all the time</p>	

	This bothers me:	0=Not at all 1=Somewhat 2=Very much	Display if "0=This is not true for me" is not selected for "I try to present an image of strength."
	My tears are a sign of weakness.	0=This is not true for me 1=This is true for me rarely 2=This is true for me sometimes 3=This is true for me all the time	
	This bothers me:	0=Not at all 1=Somewhat 2=Very much	Display if "0=This is not true for me" is not selected for "My tears are a sign of weakness."
	Asking for help is difficult for me.	0=This is not true for me 1=This is true for me rarely 2=This is true for me sometimes 3=This is true for me all the time	
	This bothers me:	0=Not at all 1=Somewhat 2=Very much	Display if "0=This is not true for me" is not selected for "Asking for help is difficult for me."
	No matter how hard I work, I feel like I should do more.	0=This is not true for me 1=This is true for me rarely 2=This is true for me sometimes 3=This is true for me all the time	
	This bothers me:	0=Not at all 1=Somewhat 2=Very much	Display if "0=This is not true for me" is not selected for "No matter how hard I work, I feel like I should do more."
	I put everyone's needs before mine.	0=This is not true for me 1=This is true for me rarely 2=This is true for me sometimes 3=This is true for me all the time	
	This bothers me:	0=Not at all 1=Somewhat 2=Very much	Display if "0=This is not true for me" is not selected for "I put everyone's needs before mine."
Identity Connectedness	How much do you agree or disagree with the following statement? I have a group, community, or social circle at my school where I feel I belong (feel at home, known, connected to, supported in my identity)	1=Strongly agree 2=Agree 3=Neither agree nor disagree 4=Disagree 5=Strongly disagree	
	Using a scale of 1-5, please rate the overall climate at your school for students with the following identities: Women students	1=Hostile 2=Somewhat hostile 3=Neutral 4=Somewhat welcoming	Matrix table with 5 factors.

	Transgender and genderqueer students Students with disabilities Students of low economic status Gay, lesbian, and bisexual students	5=Welcoming	
Mental Health Climate (Sense of Belonging)	How much do you agree with the following statement? I feel isolated from campus life.	1=Strongly agree 2=Agree 3=Neither agree nor disagree 4=Disagree 5=Strongly disagree	
Mental Health Climate (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=Neither agree nor disagree 4=Disagree 5=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=Neither agree nor disagree 4=Disagree 5=Strongly disagree	

(19) Knowledge and Attitudes about Artificial Intelligence

This module aims to gather your knowledge of and opinions about Artificial Intelligence.

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
AI knowledge	Artificial intelligence (AI) is designed to learn tasks that humans typically do, for instance recognizing speech or pictures. How much do you know about AI? [choose one]	1=A lot 2=A little 3=Nothing at all 4=No answer	Adapted from: 2023 PEW RESEARCH CENTER'S AMERICAN TRENDS PANEL WAVE 132 – SCIENCE TOPLINE July 31-August 6, 2023
Frequency of Ai Interaction	Original: Just your impression, how often do you interact with artificial intelligence (AI)? [choose one] Revised: On average, how often do you think you interact with AI? By “interact with AI,” we mean indirectly using AI through apps/websites that have integrated AI into their systems - not if you use Ai such as ChatGPT, Bard, AlphaCode, Dall-E, etc..	1=Almost constantly 2=Several times a day 3=About once a day 4=Several times a week 5=Less often than several times a week 6=Never 7=No answer	2022 PEW RESEARCH CENTER'S AMERICAN TRENDS PANEL WAVE 119 – SCIENCE TOPLINE December 12-18, 2022
Frequency of Gen Ai	Directions: We want to understand how people are using widely available artificial intelligence tools. In an average week, how often do you intentionally use generative Ai (e.g., such as ChatGPT, Bard, AlphaCode, Dall-E, etc.)?	1=Almost constantly 2=Several times a day 3=About once a day 4=Several times a week 5=Less often than several times a week 6=Never 7=No answer	
Gen Ai Use Reason	Please remember that your responses are confidential. How frequently have you used generative AI (such as ChatGPT, Bard, AlphaCode, Dall-E, etc.) for the following: Academic-related matters that have not been explicitly forbidden within your institution On academic-related matters which have explicitly been forbidden within your Institution For non-academic related work For personal communications (e.g., messages to friends, family) For matters related to physical health problems (e.g., weight loss, identifying physical symptoms of sickness, etc.) For matters related to mental health (e.g., identifying symptoms, ideas for treatment, etc.) For matters related to companionship (e.g., when feeling lonely) To create materials such as text, images, or videos for fun Other (please specify)	1=Almost constantly 2=Several times a day 3=About once a day 4=Several times a week 5=Less often than several times a week 6=Never 7=No answer	Matrix table with 9 statements

<p>Gen Ai Trust</p>	<p>Regardless if you have used generative Ai for the following reasons, how trustworthy do you think information or advice from generative Ai like ChatGPT is regarding...</p> <p>...information on physical health matters ...decisions about physical health ...information on mental health matters ...decisions about mental health ...information on political or social matters ...decisions about political or social matters</p>	<p>1 = Very trustworthy 2 = Trustworthy 3 = Untrustworthy 4 = Very untrustworthy</p>	<p>Matrix table with 6 statements</p>
<p>Higher Ed on AI</p>	<p>How important is it for higher education institutions to incorporate Ai education into the curriculum?</p>	<p>1-Very important 2=Somewhat important 3=Somewhat unimportant 4=Very unimportant</p>	
	<p>Which of the following is the <u>most</u> important for higher education institutions to teach students when preparing them for AI and their careers?</p>	<p>1=Teach the ethics of using AI 2=Prioritize teaching core skills (critical thinking, problem-solving, etc.) for AI use and applications 3=Teach the practical applications of AI 4=Encourage careers that are less likely to be impacted by AI 5=None of these</p>	
<p>Satisfaction with AI training</p>	<p>How satisfied are you with your school's instruction on...</p> <p>...the basic functions of AI and how to use AI applications? ...applying AI knowledge, concepts, and applications in different scenarios? ...higher-order thinking skills (e.g., evaluate, appraise, predict, design) with AI applications? ...human-centered considerations (e.g., fairness, accountability, transparency, ethics, safety)?</p>	<p>1=Very satisfied 2=Somewhat satisfied 3=Neither satisfied nor dissatisfied 4=Somewhat dissatisfied 5=Very dissatisfied 6=Don't know 7=Not available at my school</p>	<p>Adapted from: Ng DTK, Leung JKL, Chu SKW, Qiao MS. Conceptualizing AI literacy: An exploratory review. <i>Computers and Education: Artificial Intelligence</i>. 2021;2:100041. doi:10.1016/j.caeai.2021.100041</p> <p>Instructions: The following questions will ask you about your satisfaction with your school's instruction with regards to AI.</p> <p>Matrix table with 4 statements.</p>
<p>AI influence on study</p>	<p>How much has the rise of artificial intelligence influenced what you are studying or plan to study in college?</p>	<p>1=A lot 2=Somewhat 3=A little 4=Not at all</p>	<p>Flaherty, C. (2024, January 10). Survey: How AI Is Impacting Students' Career Choices. <i>Inside Higher Ed</i>. https://www.insidehighered.com/news/student-success/life-after-college/2024/01/10/survey-college-students-thoughts-ai-and-careers</p>

	How much has the rise of artificial intelligence influenced your intended career or career plans?	1=A lot 2=Somewhat 3=A little 4=Not at all	Flaherty, C. (2024, January 10). Survey: How AI Is Impacting Students' Career Choices. <i>Inside Higher Ed</i> . https://www.insidehighered.com/news/student-success/life-after-college/2024/01/10/survey-college-students-thoughts-ai-and-careers
Higher ed regulation of AI	Thinking about the impact of generative AI on the future of education, which of the following comes closest to your view, even if neither is exactly right?	1=Teachers should focus more on detecting cheating with generative AI so students can learn to think critically on their own 2=Teachers should focus more on incorporating generative AI into the classroom so students can learn to harness the tools to their full potential 3=Don't know/No opinion	
Role of AI in Negative Events	How much of a role, if at all, has AI played in each of the following in the U.S.? Spread of misinformation Loss of trust in elections Political polarization Loss of trust in institutions Threats to democracy Distrust in vaccines	1=A large role 2=A moderate role 3=Don't know/ no opinion 4=A small role 5=No role at all	Stevens Institute, Techpulse Survey 2024 Matrix table containing 6 statements
Knowledge of Ai in Daily Life	Directions: We are interested in what people know off the top of their head about artificial intelligence (AI). You may find some of these questions easy and others difficult. (If you don't know the answer, select "Not sure.") Thinking about customer service, which of the following uses artificial intelligence (AI)?	1=A chatbot that immediately answers customer questions (CORRECT) 2=An online survey sent to customers that allows them to provide feedback 3=A contact page with a form available to customers to provide feedback 4=A detailed Frequently Asked Questions webpage 5=Not sure	2022 PEW RESEARCH CENTER'S AMERICAN TRENDS PANEL WAVE 119 – SCIENCE TOPLINE December 12-18, 2022
	When playing music, which of the following uses artificial intelligence (AI)?	1=Using Bluetooth to connect to wireless speakers 2=A playlist recommendation (CORRECT) 3=A wireless internet connection to stream the music 4=Shuffle play from a chosen playlist 5=Not sure	2022 PEW RESEARCH CENTER'S AMERICAN TRENDS PANEL WAVE 119 – SCIENCE TOPLINE December 12-18, 2022
	When using email, which of the following uses artificial intelligence (AI)?	1=The email service marking an email as read after the user opens it	2022 PEW RESEARCH CENTER'S AMERICAN TRENDS PANEL WAVE 119 – SCIENCE TOPLINE December 12-18, 2022

		<p>2=The email service allowing the user to schedule an email to send at a specific time in the future</p> <p>3=The email service categorizing an email as spam (CORRECT)</p> <p>4=The email service sorting emails by time and date</p> <p>5=Not sure</p>	
	Thinking about health products, which of the following uses artificial intelligence (AI)?	<p>1=Wearable fitness trackers that analyze exercise and sleeping patterns (CORRECT)</p> <p>2=Thermometers that are placed under someone’s tongue to detect a fever</p> <p>3=At-home COVID-19 tests</p> <p>4=Pulse oximeters that measure a person’s oxygen level of the blood</p> <p>5=Not sure</p>	2022 PEW RESEARCH CENTER’S AMERICAN TRENDS PANEL WAVE 119 – SCIENCE TOPLINE December 12-18, 2022
	Thinking about online shopping, which of the following uses artificial intelligence (AI)?	<p>1=Storage of account information, such as shipping addresses</p> <p>2=Records of previous purchases</p> <p>3=Product recommendations based on previous purchases (CORRECT)</p> <p>4=Product reviews from other customers</p> <p>5=Not sure</p>	2022 PEW RESEARCH CENTER’S AMERICAN TRENDS PANEL WAVE 119 – SCIENCE TOPLINE December 12-18, 2022
	Thinking about devices in the home, which of the following uses artificial intelligence (AI)?	<p>1=Programming a home thermostat to change temperatures at certain times</p> <p>2=A security camera that sends an alert when there is an unrecognized person at the door (CORRECT)</p> <p>3=Programming a timer to control when lights in a home turn on and off</p> <p>4=An indicator light that turns red when a water filter needs to be replaced</p> <p>5=Not sure</p>	2022 PEW RESEARCH CENTER’S AMERICAN TRENDS PANEL WAVE 119 – SCIENCE TOPLINE December 12-18, 2022
Jobs	In your opinion, what type of effect will artificial intelligence have on the total number of jobs in the United States in the next 10 years?	<p>1=Increase the total number of jobs</p> <p>2=Have no impact on the total number of jobs</p> <p>3=Reduce the total number of jobs</p>	Marken, S., & Nicola, T. (2023, September 23). Three in Four Americans Believe AI Will Reduce Jobs. <i>Gallup</i> . https://news.gallup.com/opinion/gallup/510635/three-four-americans-believe-reduce-jobs.aspx
AI Perception	Overall, would you say the increased use of artificial intelligence (AI) in daily life makes you feel:	<p>1=More excited than concerned</p> <p>2=Equally concerned and excited</p> <p>3=More concerned than excited</p> <p>4=No answer</p>	2023 PEW RESEARCH CENTER’S AMERICAN TRENDS PANEL WAVE 132 – SCIENCE TOPLINE July 31-August 6, 2023

<p>Ai help or hurt (directions)</p>	<p>Do you think artificial intelligence (AI) is doing more to help or hurt each of the following:</p> <p>People finding accurate, unbiased information online People taking care of their health Police maintaining public safety Doctors providing quality care to patients Judges making fair sentencing recommendations for individuals convicted of a crime Content moderation on social media Students learning materials Students' academic performance</p>	<p>1=AI helps more than it hurts 2=AI hurts more than it helps 3=Not sure 4=No answer</p>	<p>2023 PEW RESEARCH CENTER'S AMERICAN TRENDS PANEL WAVE 132 – SCIENCE TOPLINE July 31-August 6, 2023</p>
<p>Trust in Institutional AI Use</p>	<p>Directions: How much do you trust or distrust each of the following to use AI responsibly?</p> <p>The U.S. military Law enforcement Healthcare organizations Higher education institutions Financial institutions The news media The U.S. civilian government Social media companies U.S. corporations Political organizations</p>	<p>1=Trust a lot 2=Trust somewhat 3=Don't know/No opinion 4=Distrust somewhat 5=Distrust a lot</p>	<p>Stevens Institute, Techpulse Survey 2024 Matrix table containing 10 statements</p>

(20) MHICC Module

This survey module is intended to understand the mental health needs and experiences specific to community college students.

This module was developed by the Mental Health Improvement through Community Colleges (MHICC) study at the University of Michigan School of Public Health (PI: Dr. Shawna Smith; HUM00193791). Answers will be used by the MHICC study team to better understand the current mental health resources at your school as well as preferences students have for seeking mental health support.

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
Demographics	Please answer the following questions: Did you enroll in community college immediately after your high school graduation (i.e., in the year following)? Were you ever dual enrolled in a community college while attending high school? Are you currently enrolled in your community college full-time (12+ credits per semester)?	1=Yes 2=No	Matrix table with 6 questions.
	How many hours a week do you currently work?	0=0 hours 1=1-10 hours 2=11-20 hours 3=21-30 hours 4=31+ hours	
	Including this current semester, for how many semesters have you been enrolled at <i>any</i> community college? Please, exclude any semesters where you were dual enrolled (i.e., also attending high school), if applicable.	Multiple choice dropdown: 1-99	
	For how many semesters were you dual enrolled in both community college and high school?	Multiple choice dropdown: 1-99	Display if “Yes” is selected for “Were you ever dual enrolled in a community college while attending high school?”
	How old were you when you first enrolled in community college, excluding dual enrollment?	Multiple choice dropdown: Under 16-99	
	On average, approximately how many credit hours have you taken per semester at your current community college?	1=Less than 6 hours 2=6-11 hours 3=12 or more hours	
	Do you currently use campus resources (library, internet, fitness center, health services, etc.) in person?	1=Yes 2=No	
	Why do you not use campus resources in person? Select all that apply.	1=All classes are online 2=No need for on-campus resources 3=Commute is too long 4=Health reasons 5=Caregiving responsibilities 6=Lack of transportation 7=Other (please specify)	Display if “No” is selected for “Do you currently attend classes or use campus resources (library, internet, fitness center, health services, etc.) in person?”

	How do you get to campus most days?	1=Public transit (e.g., bus) 2=Drive alone 3=Drive or ride with other students or campus employees (e.g., carpool/vanpool) 4=Dropped off by others (e.g., family member) 5=Cycle, scooter, skateboard, motorbike or e-bike, etc.) 6=Walk/run 7=Other (please specify)	Display if “Yes” is selected for “Do you currently attend classes or use campus resources (library, internet, fitness center, health services, etc.) in person?”
	How often do transportation challenges keep you from getting to campus?	1=Never 2=Less than once a month 3=About once a month 4=Several times a month 5=Weekly or more than weekly	Display if “Yes” is selected for “Do you currently attend classes or use campus resources (library, internet, fitness center, health services, etc.) in person?”
	On a typical day, how long does it take you to commute to campus?	1= Less than 15 minutes 2=15-30 minutes 3=31-45 minutes 4=46-60 minutes 5=61-90 minutes 6=More than 90 minutes	Display if “Yes” is selected for “Do you currently attend classes or use campus resources (library, internet, fitness center, health services, etc.) in person?”
	What is your living situation today?	1=I have a steady place to live 2=I have a place to live today, but I am worried about losing it in the future 3=I do not have a steady place to live (e.g. I am temporarily staying with others, in a hotel, in a shelter, living outside on the street, on a beach, in a car, abandoned building, bus or train station, or in a park) 4=Other (please specify)	
	Including yourself, how many people do you currently live with?	Single-select dropdown “1”-“20+”	
	What is your relationship to the people you currently live with? (Select all that apply)	1=Parents 2=Roommates (other college/community college students) 3=Roommates (non-college students) 4=Siblings 5=Grandparents 6=Spouse/partner	Display if answer for “Including yourself, how many people do you currently live with?” is >1.

		7=Children 8=Other (please specify)	
	If you are a veteran or related to a veteran, do you currently receive or have you ever received any educational benefits from the U.S. government?	1=I am not a veteran/related to a veteran 2=Yes 3=No	Display if answer for “Including yourself, how many people do you currently live with?” = 1
Resources	Thinking about your current community college, please respond to the questions below to the best of your ability: Over the last two weeks have you reached out to any community college employees (e.g., counselors, instructors, administrators) for any mental health concerns? Over the last two weeks , have you attempted to use any community college resources to receive help for any mental health concerns? Have you ever attempted to use any community college resources to receive help for any mental health concerns?	1=Yes 2=No 3=I prefer not to say	Matrix table with 4 questions.
	Do you have access to any mental health resources through any of the following other (i.e., non-community college) settings or organizations? Select all that apply.	1=Yes, through my local or community organizations 2=Yes, through my workplace 3=Yes, through my church or religious institution 4=Yes, through my primary care provider 5=Yes, through another (non-community college) educational institution (please specify) 6=Yes, through another setting or organization (please specify) 7=No, I do not have access to mental health resources outside of my community college [mutually exclusive]	
	Have you ever used counseling services at your community college?	1=Yes 2=No 3=I prefer not to say	If answer is “No, I am not aware of any counseling services at my community college”, skip to text box that displays “Some schools have a behavioral intervention team comprised of school/community professionals (e.g., counselors, school administrators, police officers) that is focused on identifying and supporting any student who has raised concerns or is demonstrating warning signs of harming themselves or others or disrupting the safety of the school environment.”

	<p>Are you aware of, or do you know of others who have used on-campus counseling services at your community college?</p>	<p>1=Yes, I know someone who has used counseling services at my community college 2=I am aware of counseling services at my community college but I do not know anyone who has used them 3=No, I am not aware of any counseling services at my community college 4=I prefer not to say</p>	<p>If answer = “No, I am not aware of any counseling services at my community college”, SKIP TO “Are you aware of or have you ever interacted with a behavioral intervention team at your community college?”</p>
	<p>How satisfied were you with the counseling you received at your community college?</p>	<p>1=Very satisfied 2=Satisfied 3=Neither satisfied nor dissatisfied 4=Dissatisfied 5=Very dissatisfied</p>	<p>Display if “Have you used counseling services at your community college?” = “Yes”</p>
	<p>How effective do you feel this counseling was in addressing your mental health needs?</p>	<p>1=Not effective at all 2=Slightly effective 3=Moderately effective 4=Very effective 5=Extremely effective</p>	<p>Display if “Have you used counseling services at your community college?” = “Yes”</p>
	<p>To the best of your knowledge, does your community college currently offer counseling via teletherapy (i.e. individual counseling via telephone or video call)?</p>	<p>1=Yes 2=No 3=I don’t know</p>	<p>Skip if “Are you aware of, or do you know of others who have used on-campus counseling services at your community college?” = “No, I am not aware of any counseling services at my community college”</p>
	<p>To the best of your knowledge, are students required to pay for counseling services at your community college?</p>	<p>1=No, they are free of charge 2=Yes, payment out-of-pocket is required 3=Yes, insurance can be billed or can be paid out of pocket 4=I don’t know</p>	<p>Skip if “Are you aware of, or do you know of others who have used on-campus counseling services at your community college?” = “No, I am not aware of any counseling services at my community college”</p>
<p>Skip destination</p>		<p>Displayed text: “Some schools have a behavioral intervention team comprised of school/community professionals (e.g., counselors, school administrators, police officers) that is focused on identifying and supporting any student who has raised concerns or is demonstrating warning signs of harming themselves or others or disrupting the safety of the school environment.”</p>	<p>Always displayed. Previous questions in gray are skipped if: “Are you aware of, or do you know of others who have used on-campus counseling services at your community college?” = “No, I am not aware of any counseling services at my community college”</p>

	<p>Are you aware of or have you ever interacted with a behavioral intervention team at your community college?</p>	<p>1=Yes, I have interacted with a behavioral intervention team 2=I am aware of a behavioral team but have not interacted with one 3=No, I am not aware of a behavioral intervention team 4=I prefer not to say</p>	<p>If answer is “No, I am not aware of a behavioral intervention team” OR “I prefer not to say”, skip to “Have you ever used a mobile app that provides resources or services for mental health support (e.g. BetterHelp, Calm, Happify, Headspace, Cognito, Wysa, Sanvello, TalkCampus), either provided by your college or otherwise?”</p>
	<p>Do you know of others that have interacted with a behavioral intervention team at your college?</p>	<p>1=Yes, I know someone who has interacted with a behavioral intervention team 2=No, I do not know anyone who has interacted with a behavioral intervention team 3=I prefer not to say</p>	
	<p>How satisfied were you with your college’s behavioral intervention team?</p>	<p>1=Very satisfied 2=Satisfied 3=Neither satisfied nor dissatisfied 4=Dissatisfied 5=Very dissatisfied</p>	<p>Display if “Are you aware of or have you ever interacted with a behavioral intervention team at your community college?” = “Yes, I have interacted with a behavioral intervention team”</p>
	<p>How effective do you feel that the behavioral intervention team was in addressing your mental health needs?</p>	<p>1=Not effective at all 2=Slightly effective 3=Moderately effective 4=Very effective 5=Extremely effective</p>	<p>Display if “Are you aware of or have you ever interacted with a behavioral intervention team at your community college?” = “Yes, I have interacted with a behavioral intervention team”</p>
	<p>Have you ever used a mobile app that provides resources or services for mental health support (e.g. BetterHelp, Calm, Happify, Headspace, Cognito, Wysa, Sanvello, TalkCampus), either provided by your college or otherwise?</p>	<p>1=Yes 2=No 3=I prefer not to say</p>	<p>Always displayed. Previous (gray) questions are skipped if answer for “Are you aware of or have you ever interacted with a behavioral intervention team at your community college?” is “No, I am not aware of a behavioral intervention team”, or “I prefer not to say”</p>
	<p>Which app did you use? (If you have used or tried several, pick the one you have used the most)</p>	<p>1=Name of app [text box] 2=I don’t recall</p>	<p>Display if “Have you ever used a mobile app that provides resources or services for mental health support (e.g. BetterHelp, Calm, Happify, Headspace, Cognito, Wysa, Sanvello, TalkCampus), either provided by your college or otherwise?” = “Yes”</p>
	<p>Did your school provide access to this app?</p>	<p>1=Yes 2=No 3=I’m not sure</p>	<p>Display if “Have you ever used a mobile app that provides resources or services for mental health support (e.g. BetterHelp, Calm, Happify, Headspace, Cognito, Wysa, Sanvello, TalkCampus), either provided by your college or otherwise?” = “Yes”</p>
	<p>How satisfied were you with the mobile app?</p>	<p>1=Very satisfied 2=Satisfied</p>	<p>Display if “Have you ever used a mobile app that provides resources or services for mental health</p>

		3=Neither satisfied nor dissatisfied 4=Dissatisfied 5=Very dissatisfied	support (e.g. BetterHelp, Calm, Happify, Headspace, Cognito, Wysa, Sanvello, TalkCampus), either provided by your college or otherwise?" = "Yes"
	How effective do you feel that this app was in addressing your mental health needs?	1=Not effective at all 2=Slightly effective 3=Moderately effective 4=Very effective 5=Extremely effective	Display if "Have you ever used a mobile app that provides resources or services for mental health support (e.g. BetterHelp, Calm, Happify, Headspace, Cognito, Wysa, Sanvello, TalkCampus), either provided by your college or otherwise?" = "Yes"
	Are you aware of or have you ever received a referral from your community college off-campus, community-based counseling services?	1=Yes, I have received a referral to off-campus counseling services 2=I am aware of referrals to off-campus counseling services but have not received one 3=No, I am not aware of referrals to off-campus counseling services 4=I prefer not to say	
	Do you know of others that have received referrals from your college to off-campus counseling resources?	1=Yes, I know someone who has received a referral to off-campus counseling services 2=No, I do not know anyone who has received a referral to off-campus counseling services 3=I prefer not to say	Display if "Are you aware of or have you ever received a referral from your community college off-campus, community-based counseling services?" = "I am aware of referrals to off-campus counseling services but have not received one" OR "I prefer not to say"
	Are there other mental health resources that you would like your college to provide?	1=Yes 2=No 3=Unsure	
	What other mental health resources would you like your college to provide?	Open text	Display if "Are there other mental health resources that you would like your college to provide?" = "Yes"
	On a scale of 1-10, where 1 is "very difficult" and 10 is "very easy", how difficult is to access mental health treatment (e.g., book an appointment with a counselor or behavioral intervention team) at your college?	1=1 (Very easy) 2=2 3=3 4=4 5=5 6=6 7=7 8=8 9=9 10=10 (Very difficult) 11=I don't know	
	Have you ever used your community college's website in order to find mental health resources at your school?	1=Yes 2=No	

		3=I prefer not to say	
	On a scale of 1-10, where 1 is “very difficult” and 10 is “very easy”, how difficult was it for you to find mental health resources offered at your community college by using your community college’s website?	1=1 (Very easy) 2=2 3=3 4=4 5=5 6=6 7=7 8=8 9=9 10=10 (Very difficult)	Display if “Have you ever used your community college’s website in order to find mental health resources at your school?” = “Yes”
	Overall, what grade would you give your college’s mental health resources from students?	1=A (Excellent) 2=B 3=C (Average) 4=D 5=F (Failing)	
	What could your college do to improve mental health services for students like you?	Open text	
Vignette 1	<p>Mood Tracking App Your college provides access to a mobile application (“app”) that can be accessed for free on personal mobile devices. The app provides a daily survey to assess your mood and also provides suggestions for improving your mood (e.g., taking a walk, trying to meditate).</p> <p>All students can access the app, regardless of mental health need, and no mental health professionals or other administrators at your college are involved or have access to your mood or other data.</p> <p>Please answer the following questions based on this resource:</p> <ol style="list-style-type: none"> 1. This resource is appealing to me 2. This resource seems like a good match for the students at my college. 3. This resource seems feasible for my college to provide. 4. This resource seems likely to be effective at improving student mental health at my college 5. I would use this resource. 	1=Strongly disagree 2=Disagree 3=Neither agree nor disagree 4=Agree 5=Strongly agree 6=Unsure	
Vignette 2	<p>Campus Mental Health Resources Portal Your college provides access to a free web-based portal that connects students with information on available mental health resources, both on campus and in surrounding communities. This includes information on local mental health service providers, including services they offer, how to schedule or request appointments, typical wait times, cost, and payments or insurance types accepted.</p> <p>Students are also able to request counseling appointments with mental health professionals at their college directly through the portal. The portal can be accessed by all students via the web or through a mobile app on their personal electronic devices. No</p>	1=Strongly disagree 2=Disagree 3=Neither agree nor disagree 4=Agree 5=Strongly agree 6=Unsure	

	<p>mental health professionals or other administrators at your college have access to data related to your portal usage.</p> <p>Please answer the following questions based on this resource:</p> <ol style="list-style-type: none"> 1. This resource is appealing to me 2. This resource seems like a good match for the students at my college. 3. This resource seems feasible for my college to provide. 4. This resource seems likely to be effective at improving student mental health at my college 5. I would use this resource. 		
<p>Vignette 3</p>	<p>Peer Support Community Forum Your college provides access to a peer support mobile application (“app”) that you can use for free on your personal electronic devices. The app allows students to participate in an anonymous peer-to-peer support community forum, where other students can offer advice or support to students in need. This can include support for issues related to mental health, as well as academic and other personal support needs.</p> <p>The community is moderated by licensed (but anonymous) mental health professionals that may or may not be affiliated with your college; these professionals oversee discussions but generally do not offer advice or support themselves. All students can access and participate in the anonymous community forum. No mental health professionals or other administrators at your college have access to data related to your engagement with the peer support community.</p> <p>Please answer the following questions based on this resource:</p> <ol style="list-style-type: none"> 1. This resource is appealing to me 2. This resource seems like a good match for the students at my college. 3. This resource seems feasible for my college to provide. 4. This resource seems likely to be effective at improving student mental health at my college 5. I would use this resource. 	<p>1=Strongly disagree 2=Disagree 3=Neither agree nor disagree 4=Agree 5=Strongly agree 6=Unsure</p>	
<p>Vignette 4</p>	<p>Required Mental Health Seminar Your college requires all students to complete a one-credit seminar during your first enrolled semester focused on managing your emotional and mental health. Course instructors are local licensed mental health professionals. Through the course, students are taught skills to manage their emotional and mental health, including mindfulness, conflict resolution, and building resilience. Evidence-based practices related to early intervention for students experiencing mental health challenges (e.g., self-screening for depression/anxiety, key tenets of Cognitive Behavioral Therapy [CBT]) are also covered. Students are also provided with information for accessing mental health resources on campus and/or in the community. Students receive credit for the course (thus are required to pay one credit hour of tuition for the course) and can opt to take the course for a letter grade or pass/fail.</p>	<p>1=Strongly disagree 2=Disagree 3=Neither agree nor disagree 4=Agree 5=Strongly agree 6=Unsure</p>	

	<p>Please answer the following questions based on this resource:</p> <ol style="list-style-type: none"> 1. This resource is appealing to me 2. This resource seems like a good match for the students at my college. 3. This resource seems feasible for my college to provide. 4. This resource seems likely to be effective at improving student mental health at my college 5. I would use this resource. 		
<p>Vignette 5</p>	<p>Crisis Intervention Texting Hotline Your college provides access to a mental health crisis intervention texting hotline. The hotline provides 24/7 free and confidential support for students in distress. By texting the hotline, students are connected to a licensed mental health professional at their school or in their community who provides just-in-time crisis and emotional support via text message and can help connect to other local resources. The hotline is confidential and available for all students to use anytime.</p> <p>Please answer the following questions based on this resource:</p> <ol style="list-style-type: none"> 1. This resource is appealing to me 2. This resource seems like a good match for the students at my college. 3. This resource seems feasible for my college to provide. 4. This resource seems likely to be effective at improving student mental health at my college 5. I would use this resource. 	<p>1=Strongly disagree 2=Disagree 3=Neither agree nor disagree 4=Agree 5=Strongly agree 6=Unsure</p>	
<p>Vignette 6</p>	<p>Academic Department Counselors Your college has counselors dedicated to students in each academic department. These counselors, who are distinct from academic advisors, are typically not licensed mental health professionals but are trained to provide support for both student mental health and academic needs. These counselors will have knowledge of the academic requirements for students in their department, and will know how to work with students to problem solve and come up with strategies to address mental health concerns that may be impacting a student’s academic success. Academic counselors can also help connect students to other community or campus mental health resources, including dedicated academic advisors or mental health professionals. Counselors are available to meet in person or virtually. Appointments are free of charge, confidential, and available to students first-come, first-served.</p> <p>Please answer the following questions based on this resource:</p> <ol style="list-style-type: none"> 1. This resource is appealing to me 2. This resource seems like a good match for the students at my college. 3. This resource seems feasible for my college to provide. 4. This resource seems likely to be effective at improving student mental health at my college 5. I would use this resource. 	<p>1=Strongly disagree 2=Disagree 3=Neither agree nor disagree 4=Agree 5=Strongly agree 6=Unsure</p>	

<p>Vignette 7</p>	<p>In-Person, Professional Counseling Your college has licensed counselors or therapists available for in-person individual or group counseling appointments. All counseling sessions take place at the campus counseling office, which is conveniently located on campus and easily accessible. All counselors are licensed mental health professionals trained in evidence-based mental health practices. Counselors work with students to come up with a counseling plan best suited to their needs; typically students will meet with their counselor every two weeks for up to one semester.</p> <p>Following these initial sessions, students in need of longer-term counseling can be referred to counselors or therapists in the community. Insurance is not required, and cost of counseling is based on a sliding-scale for student income, with many students receiving it at no or low cost. Depending on need and counselor availability, there may be a waiting list for scheduling the first counseling appointment.</p> <p>Please answer the following questions based on this resource:</p> <ol style="list-style-type: none"> 1. This resource is appealing to me 2. This resource seems like a good match for the students at my college. 3. This resource seems feasible for my college to provide. 4. This resource seems likely to be effective at improving student mental health at my college 5. I would use this resource. 	<p>1=Strongly disagree 2=Disagree 3=Neither agree nor disagree 4=Agree 5=Strongly agree 6=Unsure</p>	
<p>Vignette 8</p>	<p>Teletherapy with a Licensed Professional Your college has licensed counselors or therapists available for individual counseling appointments via telephone or video call. Students can participate in their teletherapy appointments from any location via their personal electronic devices (e.g., computer, tablet, phone). All counselors are licensed mental health professionals trained in evidence-based mental health practices. Counselors work with students to come up with a teletherapy plan best suited to their needs; typically students will have a teletherapy appointment with their counselor every two weeks for up to one semester.</p> <p>Following these initial sessions, students in need of longer-term counseling can be referred to teletherapy or other counseling opportunities in the community. Insurance is not required, and cost of teletherapy is based on a sliding-scale for student income, with many students receiving it at no or low cost. Depending on need and counselor availability, there may be a waiting list for scheduling the first teletherapy appointment.</p> <p>Please answer the following questions based on this resource:</p> <ol style="list-style-type: none"> 1. This resource is appealing to me 2. This resource seems like a good match for the students at my college. 3. This resource seems feasible for my college to provide. 4. This resource seems likely to be effective at improving student mental health at my college 	<p>1=Strongly disagree 2=Disagree 3=Neither agree nor disagree 4=Agree 5=Strongly agree 6=Unsure</p>	

	5. I would use this resource.		
Vignette 9	<p>Mental Health Skills Workshop Your college offers several 2-week workshops each semester that teach students effective skills to manage their mental health. Workshops are tailored toward different mental health challenges (e.g., anxiety, depression) and students can choose to attend the workshop(s) that best suit their needs.</p> <p>Students participating in the workshops meet for two weeks, for 90 minutes each week, at the campus counseling office with other students and a mental health professional. The mental health professional teaches and then guides students in practicing techniques that can be implemented in their daily lives to improve their mental health. Participation in the workshops is first-come, first-served and is free of charge. Workshop attendance is confidential.</p> <p>Please answer the following questions based on this resource:</p> <ol style="list-style-type: none"> 1. This resource is appealing to me 2. This resource seems like a good match for the students at my college. 3. This resource seems feasible for my college to provide. 4. This resource seems likely to be effective at improving student mental health at my college 5. I would use this resource. 	<p>1=Strongly disagree 2=Disagree 3=Neither agree nor disagree 4=Agree 5=Strongly agree 6=Unsure</p>	
Vignette 10	<p>Virtual Health Care App Your college offers access to a mobile application (“app”) which provides 24/7 access to virtual medical care, at no cost, for physical and mental health needs, including health coaching, teletherapy, on-demand access to mental health counselors, and psychiatric care. In urgent or crisis situations, on-demand medical care and mental health counseling services connect students with the app-associated provider that can virtually meet with them the soonest, with an average wait time of 3-7 minutes.</p> <p>For non-urgent situations, students can book teletherapy appointments, which connect students with providers that can diagnose and treat both mental and physical health complaints. Mental health-focused teletherapy consists of scheduled 45 minute appointments with a licensed mental health provider who students can choose from a nationwide directory of providers.</p> <p>All care is free of charge for currently-enrolled students, with no insurance needed, and only psychiatric care requires a referral from another health care provider.</p> <p>Please answer the following questions based on this resource:</p> <ol style="list-style-type: none"> 1. This resource is appealing to me 2. This resource seems like a good match for the students at my college. 3. This resource seems feasible for my college to provide. 	<p>1=Strongly disagree 2=Disagree 3=Neither agree nor disagree 4=Agree 5=Strongly agree 6=Unsure</p>	

	<p>4. This resource seems likely to be effective at improving student mental health at my college</p> <p>5. I would use this resource.</p>		
<p>Vignette 11</p>	<p>Campus Basic Needs Resources Program The college has a “basic needs” program to address food, housing, transportation, and other basic needs insecurities among currently-enrolled students. The program provides students access to an on-campus food pantry and also a web-based portal that offers information on other campus and community resources. This includes information on accessing nutritious and sufficient food; secure and adequate housing; affordable technology and transportation; resources for personal hygiene; childcare and related needs; and physical and mental health care. The portal can be accessed by all students via the web or through a mobile app. No administrators at your college have access to data related to your portal usage. Please answer the following questions based on this resource:</p> <ol style="list-style-type: none"> 1. This resource is appealing to me 2. This resource seems like a good match for the students at my college. 3. This resource seems feasible for my college to provide. 4. This resource seems likely to be effective at improving student mental health at my college 5. I would use this resource. 	<p>1=Strongly disagree 2=Disagree 3=Neither agree nor disagree 4=Agree 5=Strongly agree 6=Unsure</p>	
	<p>For each resource below, please indicate how strongly your college should prioritize this resource, with a 1 indicating little to no priority, and a 10 indicating highest priority. You may give the same priority score to multiple resources. Please click on each slider option, as a slider not clicked will assume a non-response, rather than a response of “1”.</p> <p>Mood Tracking App Campus Mental Health Resources Portal Peer Support Community Forum Required Mental Health Seminar Crisis Intervention Texting Hotline Academic Department Counselors In-Person, Professional Counseling Teletherapy with a Licensed Professional Mental Health Skills Workshop Virtual Resources App Campus Basic Needs Resources Program</p>	<p>1=1 (Lowest priority) 2=2 3=3 4=4 5=5 6=6 7=7 8=8 9=9 10=10 (Highest priority)</p>	

FACULTY & STAFF 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=18-24 2=25-34 3=35-44 4=45-54 5=55-64 6=65 or older	
	What is your primary role at your institution?	1=Faculty 2=Staff	
	In which academic discipline(s) are you currently a faculty member? (Select all that apply)	1=Architecture or urban planning 2=Art and design 3=Business 4=Dentistry 5=Education 6=Engineering or Computer Sciences 7=Humanities (history, languages, philosophy, etc.) 8=Law 21=Library or information sciences 9=Medicine 10=Music, theater, or dance 11=Natural sciences or mathematics 12=Nursing 13=Pharmacy 14=Public health 15=Public policy 16=Social sciences (economics, psychology, etc.) 17=Social work 19=Communications 20=Health sciences 18=Other (please specify)	Display if "Faculty" is selected for "What is your primary role at your institution?"
	Which of the following most closely describes your faculty position? (Select all that apply)	1=Full professor 2=Associate professor 3=Assistant professor 4=Lecturer/instructor 5=Adjunct professor 6=Post-doctoral fellow	Display if "Faculty" is selected for "What is your primary role at your institution?"

		7=Emeritus professor 8=Other (please specify)	
	What is your tenure status at your institution?	1=Tenured 2=On tenure track, but not tenured 3=Not on tenure track, but institution has tenure system 4=Institution has no tenure system	Display if "Faculty" is selected for "What is your primary role at your institution?"
	How many years have you been a faculty member at any college/university? <i>If you have been a faculty member at multiple institutions throughout your career, please answer with the total number of years.</i>	1=<1 year 2=1-3 years 3=4-6 years 4=7-9 years 5=10-15 years 6=>15 years	Display if "Faculty" is selected for "What is your primary role at your institution?"
	In the past 12 months, including currently, which group(s) of students have you taught? <i>By undergraduate we mean associate's and bachelor's degree students.</i>	1=Both undergraduate and graduate students 2=Exclusively undergraduate students 3=Exclusively graduate students 4=Other (please specify) 5=None (no teaching in the past 12 months)	Display if "Faculty" is selected for "What is your primary role at your institution?"
	In which office/department(s) are you currently a staff member? (Select all that apply)	1=Academic services 2=Admissions, enrollment, financial aid 3=Alumni and advancement/development 4=Athletics and recreation 5=Campus life (campus safety, Greek life, student engagement, student activities, veteran's affairs, etc.) 6=Career and employment services 7=Custodial 8=Dining services 9=Disability services 10=Diversity and inclusion/multicultural services 11=Health services (student health, counseling/psychological services, wellness, etc.) 12=Human resources 13=Residence life 14=Student conduct 15=Other (please specify)	Display if "Staff" is selected for "What is your primary role at your institution?"
	In your role, do you provide mental health services to students? <i>By mental health services, we mean therapy/counseling, crisis intervention, support groups, wellness programming, psychiatric services, etc.</i>	1=Yes 2=No	Display if "Health services" is selected for "In which office/department(s) are you currently a staff member?"

	How many years have you been a staff member at your institution?	1=<1 year 2=1-3 years 3=4-6 years 4=7-9 years 5=10-15 years 6=>15 years	Display if "Staff" is selected for "What is your primary role at your institution?"
Employment	What is your employment status at your institution?	1=Part-time without benefits 2=Part-time with benefits 3=Full-time without benefits 4=Full-time with benefits	
	All things considered, how satisfied are you with your current position at your institution?	1=Very dissatisfied 2=Dissatisfied 3=Neither satisfied nor dissatisfied 4=Satisfied 5=Very satisfied	
	All things considered, how satisfied are you with your institution's <i>Work from Home</i> policy?	1=Very dissatisfied 2=Dissatisfied 3=Neither satisfied nor dissatisfied 4=Satisfied 5=Very satisfied 6=Not applicable	
Education	What is the highest level of education that you have completed?	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 (or equivalent) 6=Bachelor's degree 7=Graduate degree	Display if "Staff" is selected for "What is your primary role at your institution?"
Sex/gender/sexuality	What sex were you assigned at birth?	1=Female 2=Male 3=Intersex	
	Please select all that apply to you and your gender identity:	1=Man 2=Woman 5=Genderqueer/Gender non-confirming 6=Self identify (please specify) 7=Nonbinary 3=Transgender 8=Prefer not to respond	
	How would you describe your sexual orientation?	1=Heterosexual 2=Lesbian	

	(Select all that apply)	<p>3=Gay 4=Bisexual 5=Queer 6=Questioning 7=Self-identify (please specify) 8=Asexual 9=Pansexual 10=Prefer not to respond</p>	
Race/ethnicity	<p>What is your race/ethnicity? (Select all that apply)</p>	<p>1=African American/Black 2=American Indian or Alaskan Native 3=Asian American/Asian 4=Hispanic/Latin(x) 5=Native Hawaiian or Pacific Islander 6=Middle Eastern, Arab, or Arab American 7=White 8=Self-identify (please specify)</p>	
	<p>At what age did you first come to live in the U.S.?</p>	<p>1=U.S.-born 2=Less than 12 years old 3=12-17 years old 4=18-35 years old 5=More than 35 years old</p>	
Relationship	<p>How would you characterize your current relationship status?</p>	<p>1=Single 2=In a relationship 3=Married, in a domestic partnership, or engaged 6=Other (please specify)</p>	
Family characteristics	<p>What is the current number of children or other dependents living in your household, for whom you are responsible?</p>	<p>0=None 1=1 2=2 3=3 4=4 or more</p>	
	<p>Are you currently pregnant, or have you been pregnant, given birth, or taken parental leave within the last 12 months?</p>	<p>1=Yes 2=No 3=Prefer not to say 4=I don't know</p>	

(2) FACULTY & STAFF WELLBEING

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	<p>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.</p> <p>I lead a purposeful and meaningful life. My social relationships are supportive and rewarding. I am engaged and interested in my daily activities. I actively contribute to the happiness and well-being of others. I am competent and capable in the activities that are important to me. I am a good person and live a good life. I am optimistic about my future. People respect me.</p>	<p>1=Strongly disagree 2=Disagree 3=Slightly disagree 4=Mixed or neither agree nor disagree 5=Slightly agree 6=Agree 7=Strongly agree</p>	<p>Matrix table with 8 statements. Flourishing Scale (Diener & Biswas-Diener, 2009)</p>
Depression (PHQ-9)	<p>Over the last 2 weeks, how often have you been bothered by any of the following problems?</p> <p>Little interest or pleasure in doing things Feeling down, depressed or hopeless Trouble falling or staying asleep, or sleeping too much Feeling tired or having little energy Poor appetite or overeating Feeling bad about yourself—or that you are a failure or have let yourself or your family down Trouble concentrating on things, such as reading the newspaper or watching television 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 Thoughts that you would be better off dead or of hurting yourself in some way</p>	<p>1=Not at all 2=Several days 3=More than half the days 4=Nearly every day</p>	<p>Matrix table with 9 statements. Patient Health Questionnaire-9 (Kroenke et al., 2001)</p>
	<p>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?</p>	<p>1=Not difficult at all 2=Somewhat difficult 3=Very difficult 4=Extremely difficult</p>	<p>Displayed when score >9 Adapted from Patient Health Questionnaire-9 (Kroenke et al., 2001)</p>
Anxiety (GAD-7)	<p>Over the last 2 weeks, how often have you been bothered by the following problems?</p>	<p>1=Not at all 2=Several days</p>	<p>Matrix table with 7 statements.</p>

	<p>Feeling nervous, anxious or on edge Not being able to stop or control worrying Worrying too much about different things Trouble relaxing Being so restless that it's hard to sit still Becoming easily annoyed or irritable Feeling afraid as if something awful might happen</p>	<p>3=Over half the days 4=Nearly every day</p>	<p>GAD-7 (Spitzer et al., 2006)</p>
	<p>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?</p>	<p>1=Not difficult at all 2=Somewhat difficult 3=Very difficult 4=Extremely difficult</p>	<p>Displayed if score >9</p>
Eating and body image (SDE)	<p>Please answer the following questions as honestly as possible.</p> <p>Do you often feel the desire to eat when you are emotionally upset or stressed? Do you often feel that you can't control what or how much you eat? Do you sometimes make yourself throw up (vomit) to control your weight? Are you often preoccupied with a desire to be thinner? Do you believe yourself to be fat when others say you are thin?</p>	<p>1=Yes 0=No</p>	<p>SDE (Maguen et al., 2018)</p>
Non-suicidal self-injury	<p>In the past year, have you ever done any of the following intentionally? (Select all that apply)</p>	<p>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]</p>	<p>Instructions for this item: "This question asks about ways you may have hurt yourself on purpose, without intending to kill yourself."</p>
	<p>On average, how often in the past year did you hurt yourself on purpose, without intending to kill yourself?</p>	<p>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</p>	<p>Display if "12=No, none of these" is not selected for "In the past year, have you ever done any of the following intentionally?"</p>
Suicidality	<p>In the past year, did you ever seriously think about attempting suicide?</p>	<p>1=Yes 0=No</p>	

	In the past year, did you attempt suicide?	1=Yes 0=No	
Substance use	Over the past 2 weeks, did you drink any alcohol?	1=Yes 0=No	
	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	Definition adapted from National Institute on Alcohol Abuse and Alcoholism Display if "1=Yes" is selected for "Over the past 2 weeks, did you drink any alcohol?"
	In the last 12 months, have you felt the need to reduce your drinking?	1=Yes 2=No 3=Not applicable	
	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	
	Over the past 30 days, have you used any of the following drugs? (Select all that apply)	1=Cannabis products containing THC (including smoking, vaping, or edibles) 2=Cocaine (any form, including crack, powder, or freebase) 3=Heroin 4=Opioid pain relievers (such as Vicodin, OxyContin, Percocet, Demerol, Dilaudid, codeine, hydrocodone, methadone, morphine) without a prescription or more than prescribed 5=Benzodiazepines (such as Valium, Ativan, Klonopin, Xanax, Rohypnal (Roofies)) 6=Methamphetamines (also known as speed, crystal meth, Tina, T, or ice) 7=Other stimulants (such as Ritalin, Adderall) without a prescription or more than prescribed 8=MDMA (also known as Ecstasy or Molly) 9=Ketamine (also known as K, Special K) 10=LSD (also known as acid) 11=Psilocybin (also known as magic mushrooms, boomers, shrooms) 12=Kratom 14=Other drugs without a prescription (please specify)	

		15=No, none of these [mutually exclusive]	
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 6=1-2 hours 2=2-3 hours 3=3-4 hours 4=5 or more hours	
Chronic disease	Have you ever been diagnosed with any of the following health conditions, which required ongoing treatment by a healthcare 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=HIV/AIDS 12=Other autoimmune disorder (please specify) 13=Other chronic disease (please specify) 14=No, never been diagnosed with a chronic disease. [mutually exclusive] 15=Don’t know/prefer not to answer	
Burnout	How much do you agree or disagree with the following statements? I achieve a healthy balance between my personal life and my professional life. In the past 12 months, I have felt overwhelmed by all I had to do.	1=Strongly disagree 2=Disagree 3=Somewhat disagree 4=Somewhat agree 5=Agree 6=Strongly agree	Matrix table with 2 statements. Adapted from the UCLA faculty survey
	Do you feel burnt out because of your work? <i>Work-related burnout is a state of prolonged physical and psychological exhaustion, which is perceived as related to the person’s work.</i>	1=To a very high degree 2=To a high degree 3=Somewhat 4=To a low degree 5=To a very low degree	Adapted from Kristensen TS, Borritz M, Villadsen E, Christensen KB. The Copenhagen Burnout Inventory: A new tool for the assessment of burnout. Work Stress 2005;19:192-207.
	How much do you agree or disagree with the following statement? In the past 12 months, my job has taken a negative toll on my mental or emotional health.	1=Strongly disagree 2=Disagree 3=Somewhat disagree 4=Somewhat agree 5=Agree 6=Strongly agree	

	In the past 4 weeks, how many days have you felt that emotional or mental difficulties have hurt your work performance/productivity?	0=None 1=1-2 days 2=3-5 days 3=6 or more days	
	<p>Within the last 12 months, have any of the following negatively impacted your work performance and/or productivity?</p> <p>Anxiety Depression Mental health challenge <i>other than</i> anxiety/depression Stress Financial concerns Experiencing discrimination Death of a close friend or family member Lack of quality sleep Violence in my home Personal use of alcohol or drugs A close friend or family member’s use of alcohol or drugs</p>	<p>1=I did not experience this issue/not applicable. 2=I have experienced this issue, but my work performance/productivity has not been affected. 3=I have experienced this issue, and it negatively impacted my work performance/productivity.</p>	Matrix table with 11 factors.
Imposter syndrome	<p>How much do you agree with the following statements?</p> <p>I’m afraid people important to me may find out that I’m not as capable as they think I am. Sometimes I feel or believe that my success in my life or my job has been the result of some kind of error. At times, I feel my success was due to some kind of luck. Sometimes I’m afraid others will discover how much knowledge or ability I really lack. I often compare my ability to those around me and think they may be more intelligent than I am.</p>	<p>1=Not at all true 2=Rarely 3=Sometimes 4=Often 5=Very true</p>	<p>Matrix table with 5 statements. Adapted from The Imposter Phenomenon (Clance, 1985)</p>

(3) MENTAL HEALTH SERVICE UTILIZATION, SUPPORT, & 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
Informal help-seeking	In the past 12 months have you received support for your mental or emotional health from any of the following sources? (Select all that apply)	1=Friend 2=Significant other 3=Family member 4=Religious counselor or other religious contact 5=Support group 6=Colleague/coworker 7=Other non-clinical source (please specify) 8=No, none of these [mutually exclusive]	
Stigma	How much do you agree with the following statements? Most people think less of a person who has received mental health treatment. 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	Matrix table with 2 statements.
Resources	How much do you agree or disagree with the following statements? If I needed to seek professional help for my mental or emotional health, I would know where to access resources. I know what mental health services, if any, are available for faculty and staff members at my institution. My institution should be investing more resources to support faculty and staff mental health and wellbeing. In the past 12 months, I needed help for emotional or mental health problems or challenges such as feeling sad, blue, anxious or nervous.	1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree	Matrix table with 4 statements.
	How much do you agree with the following statement?: I currently need help for emotional or mental health problems or challenges 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 if “Strongly agree, agree, or somewhat agree” are selected for “In the past 12 months, I needed help for emotional or mental health problems or challenges such as feeling sad, blue, anxious or nervous.”
Use of counseling/therapy	In your lifetime, have you ever received mental health treatment (counseling, therapy, medications)?	1=Yes 2=No, never 3=I prefer not to answer.	

	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 “Yes” is selected for “In your lifetime, have you ever received mental health treatment?”
	Are you currently receiving counseling or therapy?	1=Yes 0=No	Display only if previous item answered with more than “0” total visits in the past 12 months
Use of medication	In the past 12 months have you taken any of the following types of prescription medications for mental or emotional health? (Please count only those you took, or are taking, several times per week.) Psychostimulants (e.g., Ritalin, Adderall) Antidepressants (e.g., Prozac, Zoloft, Lexapro, Wellbutrin) Anti-psychotics (e.g., Risperdal) Anti-anxiety medications (e.g., Ativan, Klonopin, Xanax) Mood stabilizers (e.g., lithium) Sleep medications (e.g., Ambien) Other medication for mental or emotional health	1=Yes 2=No 3=I don’t know	Matrix table with 7 medications.
	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 (Dexedrine), etc.) 2=Antidepressants (e.g., fluoxetine (Prozac), sertraline (Zoloft), paroxetine (Paxil), escitalopram (Lexapro), venlafaxine (Effexor), bupropion (Wellbutrin), etc.) 3=Antipsychotics (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]	Pipe in selected options from: “In the past 12 months have you taken any of the following types of prescription medications?”
Campus resources	Have you utilized any of the following mental health or wellness resources through your institution?:	1=Yes 2=No	

	[insert school-selected resources]	3=Not applicable	
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 otherwise received? (Select all that apply)	1=No need for services 2=Financial reasons (too expensive, not covered by insurance) 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] 9=Privacy concerns 10=People providing services don't understand me	
	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] 10=Privacy concerns 11=People providing services don't understand me	
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, persistent depressive disorder) 2=Bipolar (e.g., bipolar I or II, cyclothymia) 3=Anxiety (e.g., generalized anxiety disorder, phobias) 4=Obsessive-compulsive or related disorders (e.g., obsessive-compulsive disorder, body dysmorphia) 5=Trauma and Stressor Related Disorders (e.g., post-traumatic stress disorder), 6=Neurodevelopmental disorder or intellectual disability (e.g., attention deficit disorder, attention deficit hyperactivity disorder, intellectual disability, autism spectrum disorder)	

		<p>7=Eating disorder (e.g., anorexia nervosa, bulimia nervosa, binge eating disorder) 8=Psychosis (e.g., schizophrenia, schizo-affective disorder) 9=Personality disorder (e.g., antisocial personality disorder, paranoid personality disorder, schizoid personality disorder) 10=Substance use disorder (e.g., alcohol abuse, abuse of other drugs) 11=No, none of these [mutually exclusive] 12=Don't know</p>	
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?	<p>1=None 2=At least 1 or 2 3=3 or more 4=Don't know</p>	

(4) SUPPORTING STUDENTS

Experiences with Supporting Students

This section will ask you about your experiences interacting with students about their mental health and related topics. Remember that all of your responses are confidential and you may skip any questions or choose to stop responding at any time.

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
Attitudes	<p>How much do you agree or disagree with the following statements?</p> <p>I am comfortable having conversations with students about their mental health.</p> <p>I have a good idea of how to recognize that a student is in emotional or mental distress.</p> <p>I know what mental health services, if any, are available for students at my institution.</p> <p>If I think that a student is experiencing emotional or mental distress, I am likely to reach out to that student.</p> <p>Student mental health problems are significantly worse now compared to when I began my career.</p> <p>It is important for me to model positive health and wellness behaviors to students.</p> <p>Supporting students in mental and emotional distress has taken a toll on my own mental and emotional health.</p>	<p>1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree</p>	<p>Matrix table with 7 statements.</p>
	<p>Which of the following are reasons why you would not reach out to a student if you thought they were experiencing emotional or mental distress? (Select all that apply)</p>	<p>1=It's none of my business. 2=I don't have enough time. 3=I don't feel safe. 4=It's not my responsibility. 5=Someone else is better suited to do this. 6=I'm unsure of what to do/say to a student. 7=I worry that I could make things worse. 8=I would feel uncomfortable doing so. 9=I would not want to make the student feel uncomfortable. 10=Other reason(s) (please specify) 11=None, I would always reach out to a student if I thought they were experiencing emotional or mental distress. [mutually exclusive]</p>	
	<p>During the most recent semester in which you taught, did you list any mental health resources in your course syllabus (e.g., information about the counseling center or other resources)?</p>	<p>1=Yes 2=No 3=Not applicable</p>	<p>Display if faculty is selected for "What is your primary role at your institution?" or if faculty is displayed for respondent in sample file provided to HMS study team.</p>

	<p><i>If you are teaching this semester, please answer based on your current syllabi.</i></p> <p><i>If your institution is not on a semester system, please answer for the most recent trimester/quarter, etc. in which you taught.</i></p>		
	In the past 12 months, have you had any one-on-one conversations with students (whether in person, by phone, video conference, or email) about their mental or emotional health?	<p>1=Yes</p> <p>2=No</p>	
	In the past 12 months, with about <u>how many students</u> have you had one-on-one conversations (whether in person, by phone, video conference, or email) about their mental or emotional health?	<p>1=1-2 students</p> <p>2=3-5 students</p> <p>3=6-9 students</p> <p>4=10 or more students</p>	Display if “Yes” is selected for “In the past 12 months, have you had any one-on-one conversations with students (whether in person, by phone, video conference, or email) about their mental or emotional health?”
	In the past 12 months, about <u>how many times</u> total have you had one-on-one conversations with students (whether in person, by phone, or email) about their mental or emotional health?	<p>1=1-2 times</p> <p>2=3-5 times</p> <p>3=6-9 times</p> <p>4=10 or more times</p>	Display if “Yes” is selected for “In the past 12 months, have you had any one-on-one conversations with students (whether in person, by phone, video conference, or email) about their mental or emotional health?”
	<p>The following question asks about experiences you may have had referring students to mental health resources. Resources could include campus counseling, disability services, a dean of students, or other resources either on or off campus. A ‘referral’ is defined as providing a student with information about a mental health resource and either encouraging the student to use this resource or connecting the student to a resource.</p> <p>In the past 12 months, did you refer any students to resources for their mental health?</p>	<p>1=Yes, I referred 1 or 2 students.</p> <p>2=Yes, I referred 3-5 students.</p> <p>3=Yes, I referred 6-9 students.</p> <p>4=Yes, I referred 10 or more students.</p> <p>5=No, I did not refer any students to resources for their mental health.</p>	Display if “Yes” is selected for “In the past 12 months, have you had any one-on-one conversations with students (whether in person, by phone, video conference, or email) about their mental or emotional health?”
	To your knowledge, in the past 12 months, did any students receive mental health services or treatment as a result (or at least partially as a result) of your referral(s)?	<p>1=Yes, one or more students received services or treatment as a result (or partially as a result) of my referral.</p> <p>2=No, zero students received services or treatment as a result (or partially as a result) of my referral.</p> <p>3=I don’t know.</p> <p>4=Not applicable/I did not make any referrals.</p>	Display if “Yes” is selected for “In the past 12 months, have you had any one-on-one conversations with students (whether in person, by phone, video conference, or email) about their mental or emotional health?”
Trainings	Does your institution offer mental health “gatekeeper trainings” for faculty and staff? That is, a program available to faculty and staff designed to enhance an individual’s 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 Kognito At-Risk.)	<p>1=Yes</p> <p>2=No</p> <p>3=Don’t know</p>	

	<p>Have you ever participated in a mental health gatekeeper training program, as defined above?</p>	<p>1=Yes, through my institution 2=Yes, through another institution 3=Yes, through my institution and another institution 4=No</p>	
	<p>How helpful was the gatekeeper training that you received?</p>	<p>1=Very helpful 2=Helpful 3=Somewhat helpful 4=Not helpful</p>	<p>Display if “No” is not selected for “Have you ever participated in a mental health gatekeeper training program, as defined above?”</p>
	<p>We are interested in understanding what would make you more likely to participate in a mental health gatekeeper training program in the future (either for the first time or to receive additional training). As noted, gatekeeper training is a program designed to enhance an individual’s skills to recognize signs of emotional distress in other people and refer them to appropriate resources.</p> <p>Please complete the following statement by selecting all that apply:</p> <p>I would be more likely to participate in a mental health gatekeeper training program in the future, if the training were... (Select all that apply)</p>	<p>1=Online 2=Self-paced 3=Included in my paid time 4=Offered as credit for continuing education (i.e., CEU) 5=Required by my institution 6=Provided during a department/office meeting 7=30 minutes or less in length 8=Co-facilitated by students 9=Focused on not only what to do in a crisis but also how to support students through everyday stressors 10=Led by a faculty or staff member I know personally 11=Led by diverse facilitators 12=More culturally sensitive 13=Focused on how faculty can navigate institutional power structures when reporting concerns 14=Other (please specify)</p>	
	<p>Beyond trainings, what other resources/information would be helpful for your institution to provide faculty and staff in order for you to better support student mental health? (Select all that apply)</p>	<p>1=A list of all mental health resources available to students through my institution 2=A checklist of things to consider (i.e. warning signs of mental and emotional distress) 3=A small reference guide for how to initiate a conversation with a student about their mental health 4=A sample mental health statement for course syllabi [display if faculty] 5=Statistics about the prevalence of mental health issues among young adults</p>	

		<p>6=Anti-stigma education and mental health literacy 7=Suicide prevention training 8=Information about how to support students of color 9=Information about how to support LGBTQ+ students 10=Other resource(s)/information (please specify)</p>	
	<p>How much do you agree or disagree with the following statements?</p> <p>I would welcome receiving additional professional development on the topic of student mental health. I am motivated to strengthen my role in supporting student mental health at my institution. It should be mandatory that all faculty and staff receive basic training in how to respond to students experiencing mental or emotional distress.</p>	<p>1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree</p>	<p>Matrix table with 3 statements.</p>

(5) CAMPUS CLIMATE

You're almost done! The final set of questions below will ask about your perceptions of the campus climate. Climate refers to your view of how things generally work in your campus environment (e.g., common attitudes, practices, or behaviors.) Remember that all of your responses are confidential and you may skip any questions or choose to stop responding at any time.

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
Sense of belonging	<p>How much do you agree with the following statements?</p> <p>I see myself as a part of the campus community. My institution cares about my health and wellbeing. At my institution, students' mental and emotional health is a priority. At my institution, [faculty/staff] mental and emotional health is a priority. At my institution, the campus environment has a negative impact on students' mental and emotional health. At my institution, the campus environment has a negative impact on [faculty/staff] mental and emotional health. At my institution, the campus climate encourages free and open discussion about mental and emotional health. At my institution, there are adequate resources and services to support student mental health. At my institution, there are adequate resources and services to support [faculty/staff] mental health.</p>	<p>1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree</p>	<p>Matrix table with 9 statements.</p> <p>Adapted from Perceived Cohesion Scale (Bollen & Hoyle, 1990)</p>
	<p>Considering your experiences over the past 12 months, please indicate the extent to which you agree or disagree with the following statements:</p> <p>I feel valued as an individual at this institution. I feel I belong at this institution. I have considered leaving this institution because I felt isolated or unwelcomed. This institution is a place where I am able to perform up to my full potential. I have found one or more communities or groups where I feel I belong at this institution.</p>	<p>1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree 6=Strongly disagree</p>	<p>Matrix table with 5 statements.</p>
Competition	<p>How would you rate the overall competitiveness among faculty in your department?</p>	<p>1=Very competitive 2=Competitive 3=Somewhat competitive 4=Not competitive 5=Very uncompetitive</p>	<p>Display if faculty is selected for "What is your primary role at your institution?" or if faculty is displayed for respondent in sample file provided to HMS study team.</p>
Anti-racism	<p>How much do you agree or disagree with the following statements?</p> <p>I believe my institution actively works towards combating racism within the campus community. My institution makes a genuine effort to recruit a diverse community.</p>	<p>1=Strongly agree 2=Agree 3=Somewhat agree 4=Somewhat disagree 5=Disagree</p>	<p>Matrix table with 3 statements.</p>

	My institution has made a special effort to help individuals from diverse backgrounds feel like they belong on campus.	6=Strongly disagree	
School climate	<p>Please rate the climate at your institution in general for faculty from the following backgrounds:</p> <p>Faculty of color Women faculty Sexual minority faculty (gay, lesbian, bisexual, queer) Gender minority faculty (transgender, genderqueer, non-binary) Faculty with disabilities Faculty from religious beliefs and backgrounds other than Christian Faculty with Christian religious beliefs and backgrounds Faculty who are immigrants Faculty who are not U.S. citizens Faculty who are non-native English speakers</p>	<p>1=Hostile 2=Somewhat hostile 3=Neutral 4=Somewhat welcoming 5=Welcoming 6=I don't know</p>	<p>Matrix table with 10 factors.</p> <p>Display if faculty is selected for "What is your primary role at your institution?" or if faculty is displayed for respondent in sample file provided to HMS study team.</p>
	<p>Please rate the climate at your institution in general for staff from the following backgrounds:</p> <p>Staff of color Women faculty Sexual minority staff (gay, lesbian, bisexual, queer) Gender minority staff (transgender, genderqueer, non-binary) Staff with disabilities Staff from religious beliefs and backgrounds other than Christian Staff with Christian religious beliefs and backgrounds Staff who are immigrants Staff who are not U.S. citizens Staff who are non-native English speakers</p>	<p>1=Hostile 2=Somewhat hostile 3=Neutral 4=Somewhat welcoming 5=Welcoming 6=I don't know</p>	<p>Matrix table with 10 factors.</p> <p>Display if staff is selected for "What is your primary role at your institution?" or if staff is displayed for respondent in sample file provided to HMS study team.</p>

CUSTOM QUESTION BANK/SECONDARY DEMOGRAPHICS

These questions (that used to appear in the survey) will not appear unless schools choose to pick any of them as custom questions.

SECTION	ITEM	RESPONSE CATEGORIES	CITATION/NOTES
Family characteristics	What is the current number of children or other dependents living in your household, for whom you are responsible?	1=None 2=1 3=2 4=3 5=4 or more	
Pregnancy	Are you currently pregnant?	1=Yes 2=No 3=Prefer not to say 4=I don't know	Display if "1=Female or 3=Intersex" is selected for "What was your sex at birth?"
	How much time do you spend during a typical week studying, doing school work, or writing/doing your dissertation research?	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	
Relationship	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)	
Religiosity	How important is religion in your life?	1=Very important 2=Important 3=Neutral 4=Unimportant 5=Very unimportant	CCMH Standardized Data Set
Religious Affiliation	What is your religious affiliation? (Select all that apply)	1=Agnostic 2=Atheist 3=Buddhist 4=Christian-Catholic 5=Christian-Protestant 6=Hindu 7=Jewish 8=Muslim	CCMH Standardized Data Set

		<p>9=Christian-Church of Jesus Christ of Latter-day Saints</p> <p>10=No affiliation [mutually exclusive]</p> <p>11=Self-identify (please specify)</p>	
Birthplace: United States	Where in the U.S. were you born?	<p>1=Continental U.S.</p> <p>2=Alaska</p> <p>3=Hawaii</p> <p>4=Puerto Rico</p> <p>5=American Samoa</p> <p>6=Guam</p> <p>7=U.S. Virgin Islands</p> <p>8=Northern Mariana Islands</p> <p>9=Baker Island</p> <p>10=Howland Island</p> <p>11=Jarvis Island</p> <p>12=Johnston Atoll</p> <p>13=Kingman Reef</p> <p>14=Midway Islands</p> <p>15=Navassa Island</p> <p>16=Palmyra Atoll</p> <p>17=Wake Island</p>	Display if "U.S.-born" is selected for "At what age did you come to live in the U.S.?"
Weekly Activities	How much time do you spend during a typical week attending classes/labs?	<p>1=Less than 1 hour/week</p> <p>2=1-2 hours/week</p> <p>3=3-5 hours/week</p> <p>4=6-10 hours/week</p> <p>5=11-15 hours/week</p> <p>6=16-20 hours/week</p> <p>7=More than 20 hours/week</p>	
Campus Activities/Extracurriculars	How much time do you spend during a typical week participating in campus activities, organizations, sports, or extracurriculars connected to [School name]? (Do not include time spent in classes or homework.)	<p>1=Less than 1 hour/week</p> <p>2=1-2 hours/week</p> <p>3=3-5 hours/week</p> <p>4=6-10 hours/week</p> <p>5=11-15 hours/week</p> <p>6=16-20 hours/week</p> <p>7=More than 20 hours/week</p>	
Work responsibilities	What is the average number of hours you work per week during the school year (paid employment only)?	Free response	CCMH Standardized Data Set
Military experience	Have you ever served in the United States Armed Forces, military Reserves, or National Guard? (Select all that apply)	<p>1=No, never served in the military [mutually exclusive]</p> <p>2=Yes, currently in Reserve Officers' Training Corps (ROTC)</p> <p>3=Yes, currently in military Reserves or National Guard</p>	

		<p>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</p>	
Overall school experience	How satisfied are you with your overall experience at your school?	<p>1=Very dissatisfied 2=Dissatisfied 3=Somewhat dissatisfied 4=Somewhat satisfied 5=Satisfied 6=Very satisfied</p>	