OMB Number: Expiration Date:

Public Burden Statement: An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is 0930-XXXX. Public reporting burden for this collection of information is estimated to average 0.25 hours per respondent, per year, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to SAMHSA Reports Clearance Officer, 1 Choke Cherry Road, Room 2-1057, Rockville, Maryland, 20857.

# **AWARE Training Pre-Post Survey**

### **Consent to Participate**

The U.S. Substance Abuse and Mental Health Services Administration (SAMHSA) is sponsoring a multi-site evaluation of the Advancing Wellness and Resilience in Education (AWARE) and Trauma-Informed Services in Schools (TISS) programs. AWARE provides funding to strengthen school-based mental health programs and build partnerships to ensure that students have access and are connected to appropriate and effective behavioral health services. The purpose of the TISS program is to increase student access to trauma support services and mental healthcare by developing innovative activities to link local school systems with local support and mental health systems, including those under the Indian Health Service.

We are inviting you to participate in two surveys. The first survey asks questions about your knowledge, attitudes, and beliefs before the training in which you are about to participate. The second survey asks the same questions after completing the training. These surveys will take approximately 15 minutes to complete. Your participation in this survey is completely voluntary, and you can choose not to participate.

Your survey responses will remain confidential throughout the project and will only be shared in aggregate form without ever attributing specific responses to any individual respondent. Taking part in this survey will cause minimal risk. There are no direct benefits for you as a participant. However, it is hoped that through your participation, your community, including schools and community agencies, will be better able to provide mental health services for all students. Lessons learned in your state may also benefit SAMHSA programs in other parts of the country.

In appreciation of your participation, you will receive a \$20 gift card upon completion of both surveys.

If you have questions about this initiative please contact the Project Director, Dr. Colleen Murray, at Colleen.Murray@icf.com. For questions regarding your rights related to survey participation, you can contact ICF's Institutional Review Board (IRB) at IRB@icf.com.

\* Please choose one of the options below and click "next" to confirm:

O I have read the above information and I voluntarily agree to participate in this survey.

) I have read the above and I DO NOT wish to participate in this survey.

# **Section One: Your Personal Beliefs**

For this survey, please consider the term "mental health problem(s)" to include a range of signs and symptoms that disrupt daily functioning:

- Physical signs (e.g., changes in normal patterns or appearance)
- Emotional symptoms (e.g., depressed mood, irritability, excessive worry)
- Thinking problems (e.g., racing thoughts, odd ideas, confused thinking)
- Behavioral signs (e.g., difficulty concentrating, avoiding feared situations, excessive alcohol and substance use)
- Extreme distress (e.g., thoughts of suicide or self-harm, experienced or witnessed traumatic event(s) [i.e., events that are perceived to be dangerous and threatens serious injury or death, like accidents, domestic violence, physical or sexual abuse, loss of a caregiver, dog bites, shootings, natural disasters, painful medical procedures, etc.])

# In this section, we would like to know what YOU BELIEVE about mental health problems. Please select the response that best describes your level of agreement.

#### A1. In general, I believe that I should...

Response Category:	Do Not Agree at All 1	Somewh at Agree 2	Moderate ly Agree 3	Agre e 4	Strongl y Agree 5
<ol> <li>Encourage a person experiencing a mental health crisis to get professional help.</li> </ol>					
<ol> <li>Listen without expressing judgment to a person about their mental health problems.</li> </ol>					
<ol> <li>Provide practical resources         <ul> <li>(e.g., self-help information, crisis hotline number) to a person experiencing a mental health problem(s).</li> </ul> </li> </ol>					
<ol> <li>Ask directly about suicidal thoughts or harm if I suspect a person is experiencing a mental health crisis.</li> </ol>					
<ol> <li>Encourage a person experiencing mental health problem(s) to participate in activities that will promote their well-being.</li> </ol>					

#### A2. In general, I believe that people with mental health problem(s)...

Response Category:

Do Not Agree	Somewhat	Moderately	Agree	Strongly
At All	Agree	Agree		Agree
1	2	3	4	5

- 6. Are easy to talk with
- 7. Are unpredictable
- 8. Get better with treatment
- 9. Are dangerous

Response Category:

Do Not Agree	Somewhat	Moderately	Agree	Strongly
At All	Agree	Agree		Agree
1	2	3	4	5

10. If I had a mental health problem(s), I would not tell anyone.

11. If someone in my family had a mental health problem(s), I would not tell anyone.

12. I intend to take action to help anyone address their mental health problem(s).

13. I intend to listen without expressing judgment to anyone I suspect of experiencing a mental health problem(s).

## **Section Two: Your Beliefs About Mental Health Actions**

For each action, please select the response that best describes HOW DIFFICULT it is for you to perform that action.

#### B1. Currently, I believe that, for me...

**Response Categories:** 

Not At All	Somewhat	Moderately	Difficult	Extremely
Difficult	Difficult	Difficult		Difficult
1	2	3	4	5

- 14. Providing practical resources (e.g., self-help information, crisis hotline number) to a person showing signs and symptoms of a mental health problem(s) is:
- 15. Listening to a person about their mental health problem(s) without expressing judgment is:
- 16. Asking a person experiencing a mental health problem(s) if they are thinking about suicide or harm is:
- 17. Referring a person experiencing a mental health problem(s) to a mental health provider is:
- 18. Encouraging a person showing signs of mental health problem(s) to engage in activities that might help decrease symptoms is:

# **B2.** For each statement below, please select the response that best describes YOUR OPINION about how likely it would be for a person with mental health problems to respond to a specific action of yours.

Response Categories:

Not At All	Somewhat	Moderately	Likely	Extremely
Likely	Likely	Likely		Likely
1	2	3	4	5

- 19. If I express my concerns to any person about the mental health signs and symptoms that h they are experiencing, it will help that person to seek timely support.
- 20. If I listen to any person without expressing judgment, it will help that person talk to me about their mental health problem(s).
- 21. If I ask about suicidal thoughts directly, a person with such thoughts will feel a sense of relief.
- 22. If I give information about mental health providers in the community to any person experiencing a mental health problem(s), it will assist that person get help.

We would like to learn from you whether helping anyone with mental health problem(s) would be personally rewarding—in other words, something that would feel beneficial to you. For each action, please select the response that best describes HOW REWARDING it is for you to perform that action.

#### **B3.** Currently, I believe that, for me...

Response Categories:

Not At All	Somewhat	Moderately	Rewarding	Extremely
Rewarding	Rewarding	Rewarding		Rewarding
1	2	3	4	5

- 23. Giving practical resources (e.g., self-help information, crisis hotline number) to a person showing signs and symptoms of a mental health problem(s) is:
- 24. Listening to a person about their mental health problem(s) without expressing judgment is:
- 25. Asking a person experiencing a mental health problem(s) if they are thinking about suicide or harm is:
- 26. Referring a person experiencing a mental health problem(s) to a mental health provider is:
- 27. Encouraging a person showing signs of a mental health problem(s) to engage in activities that might help decrease symptoms is:

## **Section Three: Your Confidence in Performing Mental** Health Actions

# Please select the response that best describes your level of agreement with the following statements.

#### C1. Currently, I am confident that I can...

Response categories:

Do Not Agree	Somewhat	Moderately	Agree	Strongly
At All	Agree	Agree		Agree
1	2	3	4	5

- 28. Assist a person who may be dealing with a mental health problem(s) to seek professional help.
- 29. Provide practical resources (e.g., self-help information, crisis hotline number) to help a person who may have a mental health problem(s).
- 30. Recognize the signs and symptoms of mental health problem(s) in a person.
- 31. Ask a person directly whether they are considering killing her/himself.
- 32. De-escalate a situation where a person is agitated or aggressive.
- 33. Ask a person directly about experiencing or witnessing a traumatic event(s) (i.e., events that are perceived to be dangerous and threaten serious injury or death, like accidents, domestic violence, physical or sexual abuse, loss of a caregiver, dog bites, shootings, natural disasters, painful medical procedures, etc.).
- 34. Listen without expressing my judgment to a person in distress.
- 35. Correct misconceptions in others about mental health and mental illness.
- 36. Suggest supportive and self-help strategies to a person with mental health problems.

### Section Four: Your Agreement with Various Aspects of Mental Health

# **D1.** Please select the response that best describes your level of agreement with the following statements.

Response categories

Do not agree Agree Don't know

- 37. At least 1 in 5 people in the United States have one or more mental health disorder(s) in any one year.
- 38. Around half of mental disorders start during childhood or adolescence.
- 39. It is not a good idea to ask someone if they are feeling suicidal in case you put the idea in their head.
- 40. Use of alcohol or other drugs increases the risk of suicide or harm.
- 41. Schizophrenia is one of the most common mental disorders in the United States.
- 42. Depression can increase a young person's risk-taking behavior (e.g., reckless driving, risky sexual involvements).
- 43. When talking to people with eating disorders, it is important to criticize their body size.
- 44. Exposure to traumatic event(s) is a risk factor in almost every type of mental illness.
- 45. Males complete suicide four times more frequently than females.
- 46. People with psychosis are more at risk of being victims of violent crimes.
- 47. When difficulties are encountered, youth tend to be quite resilient.
- 48. Physical symptoms, such as fast breathing, dizziness, or shaking, could be signs of a panic attack.

- 49. Emotional symptoms, such as excessive anger, depressed mood, or hopefulness, can be signs of a young person's distress.
- 50. Two significant risk factors of suicide are having an organized plan and having a previous attempt.
- 51. Anxiety disorders are the least common mental health disorders in the United States.

## Section Five: Re-contact Consent (for Follow-up)

# **E1.** Please select the response that best describes your answer to the following question.

Response categories Yes No

52. Are you willing to be contacted again to answer some brief questions about today's training and follow-up questions about how you've used the information and skills you learned in the training?

[If Yes] Please provide the information below so we can contact you for future surveys. Full Name: Work email address: Personal email address: Mobile phone number: NOTE: Text (SMS) messages with survey links will be sent to the mobile phone number if provided.