

Project Cal-Well California Healthy Kids Survey Custom Module – ELEMENTARY

Please mark one answer for each statement unless it says to mark all that apply. You do not have to answer any questions you don't want to answer.

	No, never	Yes, some of the time	Yes, most of the time	Yes, all of the time
1. Do you have a friend who really cares about you?				
2. Do you have a friend who you talk to about your problems?				
3. Do you have a friend who helps you when you're having a hard time?				
4. Do you try to understand how other people feel?				
5. Do you feel bad when someone else gets their feelings hurt?				
6. Do you try to understand your moods and feelings (like why some things make you feel angry, sad or happy)?				
7. Do you understand why you make the choices you make?				
8. Do you have an adult you can talk to about your problems?				
9. Do you know where to go for help when you feel sad, scared or stressed?				
10. Do you expect good things to happen to you?				

The next questions ask about times when you or someone you know feels sad, scared or stressed.

11. If a friend of mine felt this way, I would... *(mark all that apply)*

- Listen to them
- Tell them to talk to a teacher
- Tell them to talk to someone in their family
- Try not to talk to them until they got better
- Not know what to do

12. If I felt this way, I would... *(mark all that apply)*

- Talk to someone in my family
- Get help from a counselor, doctor or therapist
- Talk to a teacher or another adult
- Talk to my friends
- Be afraid to get help
- Not know what to do

If someone my age felt sad, scared or stressed...	Not at all true	A little true	Pretty much true	Very much true
13. Talking to an adult could help them feel better.				
14. Kids at my school would be nice to them.				

15. In the past year, did you want to talk to a counselor, doctor or therapist about feeling sad, scared or stressed?

- Yes
- No
- I don't know

16. Were you able to get help from a counselor, doctor or therapist about your feelings when you needed it?

- No, never
- Yes, some of the time
- Yes, most of the time
- Yes, all of the time
- I didn't need this kind of help

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