

Mott Poll Questions



Adolescent Mental Health

The following questions were answered by parents with children aged 11-18 years old.

Q1. Which of the following would make you concerned about a possible mental health issue for your [x]-year-old child? *Select all that apply.*

1. Moodiness (e.g., angry, sad)
2. Change in eating patterns
3. Change in sleep pattern (trouble sleeping or sleeping more than usual)
4. Decreased interaction with family
5. Drop in grades
6. Frequent comments about being worried or anxious
7. None of the above

Q2. What would be your **first response** if you noticed a possible mental health issue for your [x]-year-old child? Select actions that you would likely **do within a few weeks** of noticing a possible issue.

1. Keep a closer eye on child
2. Talk with child
3. Ask teachers/school officials if there are problems
4. Get advice from family or friends
5. Make appointment with child's doctor or other health care provider
6. None of the above

Q3. How confident are you that you would recognize a possible mental health issue for your [x]-year-old child?

1. Very confident
2. Somewhat confident
3. Not confident

Q4. Would your [x]-year-old child talk with you or his/her other parent about a possible mental health issue in himself/herself?

1. Definitely yes
2. Possibly yes
3. Probably not
4. Definitely not

Q5. Would your [x]-year-old child feel comfortable talking with the primary care provider about a possible mental health issue?

1. Definitely yes
2. Possibly yes
3. Probably not
4. Definitely not

Screening for mental health issues in children 10 years and older is done by having the child fill out a survey or answer questions about their mood and feelings. The goal of mental health screening is to help identify mental health issues and help connect children with resources or referrals.

Q6. Has your [x]-year-old child had a mental health screening at an appointment with their primary care provider?

1. Yes
2. No
3. Don't know

Q7. How often does the primary care provider ask about mental health concerns during your [x]-year-old child's check-ups?

1. At all check-ups
2. At some check-ups
3. Never
4. Don't know
5. N/A—child does not attend check-ups

Q8. Has your [x]-year-old child ever had a visit or appointment with a mental health specialist—a psychologist, psychiatrist, or therapist?

1. Yes
2. No
3. Don't know

[If child has seen a mental health specialist]

Q9. When was your [x]-year-old child's most recent visit with a mental health specialist?

1. Within the last year
2. 1-2 years
3. More than 2 years ago
4. Don't know

[If child has seen a mental health specialist]

Q10. Why did you seek care from a mental health specialist for your [x]-year-old child?

1. Referral from child's primary care provider
2. Referral from school
3. Decided on own to seek care
4. Other

[If child has seen a mental health specialist]

Q11. Did you have any of the following difficulties getting care for your [x]-year-old child from a mental health specialist? *Select all that apply.*

1. Long wait for appointment
2. Hard to find a provider who takes our insurance
3. Hard to find a provider who sees children
4. Insurance did not cover mental health care
5. Didn't know where to go
6. Child refused to go
7. Other
8. No difficulty

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