

# Questionnaire

## INTRODUCTION

Thank you for taking part in this research. Please answer as many questions as you can. There are **no** right or wrong answers & we would like you to answer as honestly as possible.

This is a **confidential** questionnaire and your answers will be **anonymous**. This means no-one will know what you have written and we will not pass on personal information to your parents/guardians or anyone at your school. The only exception to this is if you reveal that you may harm yourself or others. If this happens, the research team must let your school know that one of their students is at risk. However, because your responses are anonymous you will not be identified personally.

In order to link up your questionnaire to your app data we would like you to enter your anonymous identification code below. The code should follow this format:

**Box 1:** Second Letter of your First Name (e.g. if your name is MARY; enter A in Box 1)

**Box 2:** Month of your birthday, the last 3 letters (e.g. if you were born in APRIL; enter RIL in Box 2)

**Box 3:** Date of your birthday (e.g. if you were born on the 8th of the month; enter 08 in Box 3)

**Box 4:** Year you were born in (e.g. if you were born in 1995, enter 95 in Box 4)

**Box 5:** First Letter of your Surname (e.g. if your surname is SMITH; enter S into Box 5)

**(i.e. using the examples given above the code generated would be: ARIL0895S)**

If you are unclear about this, please ask the researcher for help.

### YOUR CODE:

<b>Box 1 (second letter of your first name)</b>	
<b>Box 2 (month your birthday is in, the last 3 letters)</b>	
<b>Box 3 (date of your birthday)</b>	
<b>Box 4 (year you were born in)</b>	
<b>Box 5 (first letter of your surname)</b>	

Question 1: What is your gender?

Male	<input type="radio"/>
Female	<input type="radio"/>

Question 2: What age are you? \_\_\_\_\_

Question 3: What school do you go to? \_\_\_\_\_

**Question 4: How useful did you find the app overall?**

I didn't find it useful at all	<input type="radio"/>
I found it somewhat useful	<input type="radio"/>
I found it very useful	<input type="radio"/>

**Question 5: How much did you find each of the following useful?**

<b>Mood Rating?</b>	
I didn't find it useful at all	<input type="radio"/>
I found it somewhat useful	<input type="radio"/>
I found it very useful	<input type="radio"/>
<b>Coping Information?</b>	
I didn't find it useful at all	<input type="radio"/>
I found it somewhat useful	<input type="radio"/>
I found it very useful	<input type="radio"/>
<b>Resources?</b>	
I didn't find them useful at all	<input type="radio"/>
I found them somewhat useful	<input type="radio"/>
I found them very useful	<input type="radio"/>

**Question 6: How much did you like the appearance/layout of the app?**

I didn't like it at all	<input type="radio"/>
I somewhat disliked it	<input type="radio"/>
I neither liked nor disliked it	<input type="radio"/>
I liked it	<input type="radio"/>
I liked it very much	<input type="radio"/>

**Question 7: How would you improve the appearance/layout of the app?**

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**Question 8: How easy/difficult was the app to use?**

Very difficult to use	<input type="radio"/>
Somewhat difficult to use	<input type="radio"/>
Easy to use	<input type="radio"/>
Very easy to use	<input type="radio"/>

**Question 9 (a) Did you have any difficulties using any parts of the app?**

Yes	<input type="radio"/>
No	<input type="radio"/>

**Question 9 (b) If yes, please explain what these difficulties were.**

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**Question 10: What did you like about the app?**

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**Question 11: What did you dislike about the app?**

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**Question 12: How would you improve the app?**

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**Question 13: (a) Would you use the app in the future?**

Yes	<input type="radio"/>
No	<input type="radio"/>

**Question 13: (b) Why/Why not?**

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**Question 14: (a) Do you think other young people would use the app?**

Yes	<input type="radio"/>
No	<input type="radio"/>

**Question 14: (b) Why/Why not?**

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