

DIAMOND-KID Self Report Screener: Child/Adolescent Version

Please read the following statements and circle YES or NO to indicate whether each statement applies to you. If you are not sure whether a statement applies to you, circle YES and ask your interviewer about it.

			Interview page
Yes	No	1. I refuse to speak in some places.	10
Yes	No	2. I worry a lot that I will be embarrassed in front of other people, or that people will laugh at me.	13
Yes	No	3. Sometimes I suddenly feel very afraid or nervous, with a lot of uncomfortable feelings in my body.	17
Yes	No	4. I feel very scared in places where I can't get out or get help (for example, being on a bus, being in a crowded place, or standing in line).	21
Yes	No	5. I feel very worried about a lot of different things, a lot of the time (for example, worries about my family, my schoolwork, or my future).	25
Yes	No	6. There are certain activities, places, or things that I am very afraid of (for example, animals/insects, needles, storms, or throwing up).	28
Yes	No	7. I feel very scared to be away from someone.	31
Yes	No	8. I have had a time when I felt so unusually energetic or happy that it got me in trouble or people thought I wasn't acting like I usually do.	34
Yes	No	9. I felt really sad or down, most of the time, for a whole year.	38
Yes	No	10. I have had a time when I felt very sad, depressed, or cranky for at least two weeks—much worse than how I usually feel.	42
Yes	No	11. I have really bad problems with my temper and get angry a lot.	57
Yes	No	12. (If applicable) I get really sad, worried, or moody in the week prior to menstruation (my period).	61
Yes	No	13. I have a lot of thoughts, worries, or pictures in my mind that I don't want to have (for example, that I will get dirt or germs on me, or that I will make a terrible mistake).	65

Yes	No	14. I do some things over and over again, and it is hard to stop (for example, washing my hands, checking things, or having to think a good or safe thought in order to feel better or to prevent something bad from happening).	65
Yes	No	15. I spend a lot of time worrying about how I look, or feeling like something is wrong with how my body looks.	69
Yes	No	16. It's hard for me to throw things away.	72
Yes	No	17. I often pull out hair from my scalp or my body.	75
Yes	No	18. I often pick at my skin.	75
Yes	No	19. I have something wrong with my body that makes me very worried.	79
Yes	No	20. I worry a lot that I am sick or have a serious disease, or that I am going to get sick.	81
Yes	No	21. I am upset about a really bad event that I have experienced or seen (like seeing something that was very dangerous, or being sexually assaulted or molested).	84
Yes	No	22. I'm having a hard time dealing with an upsetting or difficult thing that happened to me.	94
Yes	No	23. I am afraid of being overweight, and I try not to gain weight.	96
Yes	No	24. I often have times when I eat a lot of food all at once and it feels like my eating is out of control.	99
Yes	No	25. I am a very picky eater and people think I don't eat enough.	104
Yes	No	26. I have had more than one alcoholic drink, more than once.	107
Yes	No	27. I have used drugs (including cannabis, even if prescribed), or I have used prescription medications other than how they were prescribed.	107
Yes	No	28. It is hard for me to pay attention or concentrate when I need to.	111
Yes	No	29. It is hard for me to sit still or wait for things.	111
Yes	No	30. I have tics, or a lot of sudden movements that are hard to control, or	114

		make sounds that are hard to control.	
Yes	No	31. I hurt people or break things on purpose a lot.	116
Yes	No	32. I feel angry or cranky, and get into arguments a lot.	119
Yes	No	33. I've broken the law or done things that could have hurt other people in the past year.	121
Yes	No	<p>34. I have had strong beliefs that other people thought were strange or unusual. For example:</p> <ul style="list-style-type: none"> a. That people were out to get or hurt me, were watching me, poisoning me, or trying to bother me b. That the government or some other group was watching me or trying to bother me c. That someone I didn't know, such as a celebrity, was in love with me d. That I had special talents or powers, or that I was famous e. That there was something very strange going on with my body f. That someone had taken thoughts out of my mind, placed thoughts in my mind, or read my mind g. That someone or something was controlling what I did h. That someone was sending me special messages meant only for me through the TV, radio, or books i. That I did not exist, that the world did not exist, or that the world was ending j. That someone I was dating was cheating on me k. That I was to blame for a disaster or serious crime 	123
Yes	No	<p>35. I have had strange experiences that others could not understand. For example:</p> <ul style="list-style-type: none"> a. Hearing sounds that others couldn't hear, such as voices or music b. Seeing things that others couldn't see, such as colors, animals, people, or spirits c. Having strange feelings in my body, such as a feeling of electric shocks or bugs on me d. Smelling things that others could not smell, such as vomit, feces, or something rotting 	125